FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 | |
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| | | | |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APP | ROVAL | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | |
| Estimated average burden | | | | | | | |
| hours per response: | 0.5 | | | | | | |

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person* SATO VICKI L | | | | <u>De</u> | 2. Issuer Name and Ticker or Trading Symbol Denali Therapeutics Inc. [DNLI] | | | | | | | | | k all applio Directo Officer | cable) | g Pers | son(s) to Iss 10% Ov Other (s | vner | | |
|---|--|--|--|-----------|---|---|---|-------|--|--------|---|-----------------|---------------------------------------|------------------------------------|---|---|-------------------------------------|--|---|--|
| | • | RAPEUTICS IN | (Middle) C. | | | 3. Date of Earliest Transaction (Month/Day/Year) 06/02/2021 | | | | | | | | | below) | | | below) | | |
| (Street) SOUTH FRANCI | SCO | | 94080 (Zip) | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 5. Indi ine) X | | | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | | ction 2A. Deemed Execution Date, | | 3. 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4) Code (Instr. 5) | | | | or 5. Amou 4 and Securitie Benefici | | es Formally (I) (I | | n: Direct r Indirect sstr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | |
| | | | | | | | | Code | v | Amount | (A) or (D) Pr | | е | Transact (Instr. 3 | action(s) | | | (111301.4) | | |
| Common Stock 06/02 | | | | /2021 | | A | | 2,074 | 2,074 ⁽¹⁾ A \$ | | .00 | 136,163 | | | D | | | | | |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemee Execution of if any (Month/Day | Date, | Code (In | | | | 6. Date Exercisa Expiration Date (Month/Day/Year | | Amount of | | of S g e Securit | D S (I | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | ly | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership t (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exercisab | | expiration Pate | Title | Amous or Number of Shares | er | | | | | | |
| Stock Option (right to buy) | \$63.76 | 06/02/2021 | | | A | | 6,222 | | (2) | 0 | 6/02/2031 | Common Stock | 6,22 | 2 | \$0.00 | 6,222 | | D | | |

- 1. Each share is represented by a Restricted Stock Unit ("RSU") and a contingent right to receive one share of common stock of the Issuer. 100% of the RSUs shall vest upon the earlier of (i) the one year anniversary of the grant date or (ii) the day preceding the Issuer's next annual meeting of stockholders occurring after the grant date.
- 2. 100% of the shares subject to the option shall vest upon the earlier of (i) the one year anniversary of the grant date or (ii) the day preceding the Issuer's next annual meeting of stockholders occurring after the grant date

Remarks:

/s/ Tyler Nielsen, by power of attorney

06/04/2021

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.