FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number: 3235-0287									
Estimated average burden									
hours per response:	0.5								

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*  Schuth Alexander O.				2. Issuer Name and Ticker or Trading Symbol  Denali Therapeutics Inc. [ DNLI ]								Relationshi heck all app Direc	olicable)	Ĭ	10%	Owner (specify			
(Last)	Last) (First) (Middle) C/O DENALI THERAPEUTICS INC.					3. Date of Earliest Transaction (Month/Day/Year) 08/14/2023								X below	() ()				
161 OYSTER POINT BLVD.					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) SOUTH SAN FRANCISCO CA 94080												X Form filed by One Reporting Person  Form filed by More than One Reporting  Person							
					Ru	Rule 10b5-1(c) Transaction Indication													
(City) (State) (Zip)					Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.														
		Table	I - N	lon-Deriva	tive S	Secui	rities	Ac	quire	d, Di	sposed o	f, or E	Benefici	ally Own	ed				
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Yell)			Execution Date,			3. Transaction Code (Instr. 8)  4. Securities A Disposed Of (					5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)				
									Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)				(111501.4)	
Common Stock 08/14/202					23				S <sup>(1)</sup>		2,772	D	\$23.67	518	518,989		I	See footnote <sup>(3)</sup>	
Common Stock														126	,197(4)		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)	vative Conversion Date Execution Date, urity or Exercise (Month/Day/Year) if any					ransaction of Detode (Instr. ) Sec Acc (A) Dis		osed ) r. 3, 4	Expiration Date (Month/Day/Year)			7. Titl Amou Secul Unde Deriv Secul 3 and	int of rities rlying ative rity (Instr.	8. Price of Derivative Security (Instr. 5)			10. Ownersh Form: Direct (D) or Indirec (I) (Instr.	Beneficial Ownership t (Instr. 4)	
					Code	v	(A)	(D)	Date Exer	cisable	Expiration Date	Title	Number of Shares						

## **Explanation of Responses:**

- 1. The sales reported by the Reporting Person were affected pursuant to a Rule 10b5-1 trading plan adopted September 30, 2022.
- 2. The sale price reported in column 4 of Table I represents the weighted average sale price of the shares ranging from \$23.58 to \$23.80 per share. Upon request by the Commission staff, the Issuer, or a securityholder of the Issuer, the Reporting Person will provide full information regarding the number of shares sold at each separate price.
- 3. The shares are held of record by The Schuth Family Trust U/A DTD 06/05/2017, for which the Reporting Person serves as trustee.
- 4. Includes 113,531 RSUs.

## Remarks:

/s/ Tyler Nielsen, by power of

08/16/2023

attorney

\*\* 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.