FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

TATEMENT (	<b>OF CHANGES</b>	IN BENEFICIAL	<b>OWNERSHIP</b>

OMB APPROVAL								
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

Name and Address of Reporting Person*     Anderson-Copperman Krista			2. Issuer Name and Ticker or Trading Symbol Asana, Inc. [ ASAN ]								ck all app	ntionship of Reporti all applicable) Director		rson(s) to Is					
(Last)	(Fir	st) (N	/liddle)	,	3. Date of Earliest Transaction (Month/Day/Year) 11/01/2023								Office below	r (give title		Other (s below)	specify		
C/O ASANA, INC. 633 FOLSOM STREET, SUITE 100				4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)						Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person					·			
(Street) SAN FRANCI	SAN CA 9/107				Dul	Dula 10h5 1(a) Transportion Indication									Form filed by More than One Reporting Person				
(City)	(Sta	ate) (Z	ľip)		Rule 10b5-1(c) Transaction Indication  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.								nded to						
		Table	I - Non	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or E	Benef	ficiall	y Own	ed			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da			Execution I ay/Year) if any		ution Date, Transaction						S, 4 and Secur Bene Owne		rities F ficially (l ed Following (l		Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount	(A) (D)	or P	rice		action(s) 3 and 4)			(Instr. 4)	
Class A C	Common Sto	ock		11/01/	/2023				A		684(1)	A \$		\$0.00	30,023			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)	rivative Conversion Date Execution Date, curity or Exercise (Month/Day/Year) if any		4. Transaction Code (Instr. 8)		of Deriv Secu Acqu (A) o Dispo of (D) (Insti	of Expira		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		De Se (Ir	Price of erivative ecurity nstr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)		Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amou or Numb of Share	per					

## Explanation of Responses:

1. These shares represent the Class A Common Stock that the Reporting Person elected to receive in lieu of cash compensation under the Issuer's Non-Employee Director Compensation Policy for the quarter ended October 31, 2023. The number of shares of Class A Common Stock received in lieu of cash was calculated based on the closing price of a share of Class A Common Stock on October 31, 2023.

## Remarks:

/s/ Katie Colendich, Attorneyin-Fact

11/03/2023

in-Fact

\*\* Signature of Reporting Person

n 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.