FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

I	OMB APPROVAL									
	OMB Number:	3235-02								

	Check this box if no longer subject to
)	Section 16. Form 4 or Form 5
J	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

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

Name and Address of Reporting Person* Leproust Emily M.				2. Issuer Name and Ticker or Trading Symbol Twist Bioscience Corp [TWST]								able)	g Pers	10% Ov	vner			
(Last) (First) (Middle) C/O TWIST BIOSCIENCE CORPORATION 455 MISSION BAY BOULEVARD SOUTH					3. Date of Earliest Transaction (Month/Day/Year) 10/24/2019						X	X Officer (give title Other (specific below) President & CEO				pecify		
(Street) SAN FRANCI			94158		4. If Amendment, Date of Original Filed (Month/Day/Year)					Line)	ndividual or Joint/Group Filing (Check Applicable 2) X Form filed by One Reporting Person Form filed by More than One Reporting Person							
(City)	(S	tate)	(Zip)															
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
Date			2. Transac Date (Month/Da	Execution Date,		, Transaction Disposed Code (Instr.		ities Acquired (A) o d Of (D) (Instr. 3, 4) or 4 and 5)	5. Amoun Securities Beneficia Owned Fo Reported	s Illy ollowing	Form (D) o	n: Direct r Indirect estr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
								Code	v	Amount (A)		or I	Price	Transacti (Instr. 3 a	on(s)			(1.150.4)
Common Stock 1			10/24/2	l/2019		A		30,630 ⁽¹⁾ A \$		\$0.00	856,191(2)			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		3A. Deemed Execution Date, if any (Month/Day/Yea	Code (In:				6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amou of Securities Underlying Derivative Securit (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported	e s ally g	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				Cod	e V	(A)		Date Exercisab		Expiration Date	Title	or Nur	ount mber Shares		Transaction(s (Instr. 4)		۶)	
Employee Stock Option (right to	\$23.33	10/24/2019		A		131,290		(3)	1	0/23/2029	Common Stock	13	1,290	\$0.00	131,29	90	D	

Explanation of Responses:

- 1. Represents a restricted stock unit award (the "RSU Award") that vests in installments, with 25% of the shares subject to the RSU Award vesting on October 24, 2020 and 1/16th of the shares subject to the RSU Award vesting on each quarterly anniversary thereafter, subject to the Reporting Person's continuous service through each vesting date
- 2. Includes shares that were acquired under the Issuer's Employee Stock Purchase Plan in a transaction that was exempt under both Rule 16b-3(d) and Rule 16b-3(c).
- 3. 25% of the shares subject to the option vest and become exercisable on October 24, 2020 and 1/48th of the shares subject to the option vest and become exercisable on each monthly anniversary thereafter, subject to the Reporting Person's continuing service through each vesting date.

Remarks:

/s/ William Solis, as Attorneyin-Fact for Emily M. Leproust

11/05/2019

** 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.