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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 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* Leproust Emily M.					2. Issuer Name and Ticker or Trading Symbol Twist Bioscience Corp [TWST]									(Che	Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Leprou	<u> </u>	<u>IVI.</u>							•					2	Director			10% Ow	·	
(Last)	(E	irst)	(Middle)											2	Officer (below)	(give title		Other (s below)	pecify	
	י IST BIOSC		3. Date of Earliest Transaction (Month/Day/Year) 11/19/2018									President & CEO								
		BOULEVARD	_		11/ -	13/2	.010													
						If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable					
(Street)						successful bate of original rinea (Montal Bayrical)									Line)					
SAN CA 94158 FRANCISCO														2	X Form filed by One Reporting Person					
														Form fil Person	Form filed by More than One Reporting Person					
(City)	(S	State)	(Zip)																	
		Та	ble I - Nor	n-Deriva	ative	e Se	curitie	s Ac	quired,	Dis	posed o	of, or	Ber	neficially	/ Owned					
1. Title of Security (Instr. 3) 2. Transa Date (Month/D					/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			d (A) or r. 3, 4 and 5	Beneficia Owned F	s Illy ollowing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of ndirect Beneficial Ownership	
									Code	v	Amount		(A) or (D)	Price	Reported Transacti (Instr. 3 a	on(s)			Instr. 4)	
Common	Common Stock 11/19.					2018		A		114,23	1 ⁽¹⁾	Α	\$0.00	822,561			D			
			Table II - I	Derivat	ive S	Sec	urities	Acqı	uired, E	Disp	osed of	or E	3ene	ficially	 Owned					
											onverti									
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Da if any (Month/Day/\)	Co	Transaction Code (Instr.		5. Number Derivative Securities Acquired or Dispos of (D) (In. 3, 4 and 9	re s I (A) sed str.	6. Date Expiration (Month/D	n Date	•	nd 7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Co	de V	<i>'</i>	(A)		Date Exercisal		Expiration Date	Title		Amount or Number of Shares		(Instr. 4)	011(3)			
Employee Stock Option (right to	\$26.66	11/19/2018		A	`		266,539		(2)	1	1/18/2028	Comi		266,539	\$0.00	266,53	39	D		

Explanation of Responses:

- 1. Represents a restricted stock unit award (the "RSU Award") that vests in installments, with 12/60th of the shares subject to the RSU Award vesting on November 20, 2019 and 1/20th 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. 12/60th of the shares subject to the option vest and become exercisable on October 31, 2019 and 1/60th of the shares subject to the option vest and become exercisable on each monthly anniversary thereafter, subject to the Reporting Person's continuous service through each vesting date.

Remarks:

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

11/21/2018

** 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.