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						
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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) 01 1110 11												
1. Name and Address of Reporting Person* Finn Patrick John (Last) (First) (Middle) C/O TWIST BIOSCIENCE CORPORATION 681 GATEWAY BLVD.						Issuer Name and Ticker or Trading Symbol Twist Bioscience Corp [TWST] In June 20, 12, 12, 12, 12, 12, 12, 12, 12, 12, 12										of Reportin cable) or (give title	g Perso	10% Owner Other (specify below) ercial Officer		
) "	nercial			
(Street) SOUTH SAN FRANCISCO CA 94080						4. If Amendment, Date of Original Filed (Month/Day/Year)									o. Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S	tate)	(Zip)																	
			le I - No			_				Dis	_				ly Owner		1			
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Yea		Execution Date,		Code (ransaction D ode (Instr. 5)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			Benefic	es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Direct Indirect It. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
										v	Amount	(1) or)	Price	Transac (Instr. 3	tion(s)			ilisu. 4j	
Common Stock			12/02	/2021	2021		M		1,517	7	A	\$26.6	6 39	,751		D				
Common	Common Stock			12/02	/2021	L			M		241	241 A		\$23.3	39,992			D		
Common	Stock			12/02	/2021	\perp			S ⁽¹⁾		1,172	2	D	\$87.0	6 38	,820		D		
Common Stock 12/02/					/2021			S ⁽¹⁾		586 D		\$90			4 D					
		7	able II -								osed of converti				Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	ed n Date,	4. Transact Code (Ins	ion str.	5. Number of		6. Date Exercisa Expiration Date (Month/Day/Year		able and	7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)		ecurity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	i F	10. Ownership Form: Direct (D) or Indirect I) (Instr. 4)	11. Nature of Indirec Beneficial Ownershi (Instr. 4)	
					Code V	,	(A)		Date Exercisab	ole E	xpiration ate	Title	1	Amount or Number of Shares						
Employee Stock Option (right to buy)	\$26.66	12/02/2021			М			1,517	(2)	1	1/18/2028	Comn		1,517	\$0	34,891	1	D		
Employee Stock Option	\$23.33	12/02/2021			M			241	(3)	1	0/23/2029	Comn		241	\$0	20,204	4	D		

Explanation of Responses:

- 1. The transactions reported on this Form 4 were effected pursuant to a Rule 10b5-1 trading plan previously adopted by the Reporting Person on September 3, 2020.
- 2. 20% of the shares subject to the option vested and became 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.
- 3. 25% of the shares subject to the option vested and became 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 continuous service through each vesting date.

Remarks:

(right to

/s/ William Solis, as Attorneyin-Fact for Patrick John Finn

12/06/2021

** 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.