FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Washington, D.C. 20049

ATEMENT	OF CHA	NGES IN	BENEFIC	IAI OWNE	-RSHI

l	OMB APPRO	VAL
	OMB Number:	3235-0287
l	Estimated average burde	en
l	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

1. Name and Address of Reporting Person* Finn Patrick John					2. Issuer Name and Ticker or Trading Symbol Twist Bioscience Corp [TWST]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (spec					
(Last) (First) (Middle) C/O TWIST BIOSCIENCE CORPORATION 455 MISSION BAY BOULEVARD SOUTH					3. Date of Earliest Transaction (Month/Day/Year) 09/25/2019								X	belov	w) ``	below	v)`	
(Street) SAN FRANCISCO CA 94158 (City) (State) (Zip)			4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indiv Line) X	′					
		Tabl	e I - 1	Non-Deriv	/ative	e Sec	uritie	es Ad	cquir	ed, D	isposed o	f, or E	enefic	ially (Owne	ed		
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye				Execution Date,		ite,			Acquired (A) or (D) (Instr. 3, 4 and		I 5) Secui Bene		ficially d Following	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		Trans	action(s) 3 and 4)		(IIISII. 4)	
Common Stock 09/25/2019					19	9			S ⁽¹⁾		23,289(2)	D	\$25.75	512 ⁽³⁾	1	18,713	D	
Common Stock 09/26/2019				19	.9		S ⁽¹⁾		13,711(2)	D	\$24.89)41 ⁽⁴⁾		5,002	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	tercise (Month/Day/Year) if any (Month/Day/Year) rative				Transaction Code (Instr. 8)		umber vative urities uired v osed) r. 3, 4	Expiration (Month/Da				it of ies ying iive	8. Price Derivati Security (Instr. 5)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	ode V (A) ((D)	Date Exercisable		Expiration Date	Title	Amount or Number of Shares					

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.
- $2. \ Represents the aggregate of sales effected on the same day at different prices.$
- 3. Represents the weighted average sales price per share. The shares sold at prices ranging from \$25.41 to \$26.06 per share. Full information regarding the number of shares sold at each price shall be provided upon request to the staff of the U.S. Securities and Exchange Commission, the Issuer, or a security holder of the Issuer.
- 4. Represents the weighted average sales price per share. The shares sold at prices ranging from \$24.53 to \$25.48 per share. Full information regarding the number of shares sold at each price shall be provided upon request to the staff of the U.S. Securities and Exchange Commission, the Issuer, or a security holder of the Issuer.

Remarks:

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

09/26/2019

** 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.