FORM 4

Check this box if no longer subject

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

to Section 16. Form 4 or Form 5 obligations may continue. See Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 Instruction 1(b).

Name and Address of Reporting Person* Banyai William						2. Issuer Name and Ticker or Trading Symbol Twist Bioscience Corp [TWST]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
															X	Direc			10% O\		
(Last)	(First) (Middle)					2 Data of Farlingt Transportion (Month/Day/Voc.)									X	Office below	fficer (give title elow)		Other (s below)	specify	
C/O TWIST BIOSCIENCE CORPORATION						3. Date of Earliest Transaction (Month/Day/Year) 08/20/2020									See Remarks						
681 GATEWAY BLVD.																					
						4. If Amondment, Date of Original Filed (Month/Day/Veer)									6 Individual or Joint/Croup Filing (Chook Applicable						
(Street)				4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable Line)							
SOUTH SAN FRANCISCO CA 94080														X		filed by One Reporting Person					
														Form filed by More than One Re Person					orting		
(City)	(St	ate) (Z	Zip)																		
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day						Exec if any	Deemed ution Date, / th/Day/Year)		3. 4. Securiti Transaction Code (Instr. 8) 5.		es Acquired (A) Of (D) (Instr. 3,		l (A) or . 3, 4 aı	4 and Secur Benef		ially Following	Forn (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A)) or)	Price	Transa		ction(s) 3 and 4)			(111511.4)	
Common Stock 08/20/2					.020				F		675(1)		D	\$67.28		492,917			D		
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																					
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1. Title of Derivative Security (Instr. 3)	Z. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	emed ion Date, /Day/Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercis Expiration Dat (Month/Day/Ye		ite	7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		of s ig	Der Sec	rice of ivative urity itr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)	
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	or Nu of	mount mber ares							

Explanation of Responses:

1. Represents shares withheld by the Issuer to satisfy the Reporting Person's tax withholding obligation in connection with the vesting of certain Restricted Stock Units ("RSUs") previously granted to the Reporting Person. Such withholding is exempt from Section 16(b) pursuant to Rule 16b-3(e).

Remarks:

Senior Vice President of Advanced Development and General Manager of Data Storage

/s/ William Solis, as Attorney-08/24/2020 in-Fact for William Banyai

** 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.