FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, [D.C.	20549
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

					UI	Section	30(11) 0	n tile	IIIVESI	unent	Company Ac	01 1340						
1. Name and Address of Reporting Person*					2. Issuer Name and Ticker or Trading Symbol Twist Bioscience Corp [TWST]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Peck Bill					1	Twist Dioscience Corp [Two1]								[Director		10% C	wner
(Loot)	(Fi	(rot)	Middle		_										Officer (give elow)	title	Other below)	(specify
(Last)	•	,	Middle	•		3. Date of Earliest Transaction (Month/Day/Year)								Chief Technology Officer				
C/O TWIST BIOSCIENCE CORPORATION			109	09/13/2019											00			
455 MISSION BAY BOULEVARD SOUTH																		
(Street)					4.	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)				
SAN	C	Λ (94158)										X Form filed by One Reporting Person				
FRANCI	SCO CA	n :	94130										Form filed by More than One Reporting Person				orting	
(City)	(SI	tate) (Zip)															
		Tabl	e I -	Non-Deriv	ativ	e Secı	urities	s Ac	quir	ed, C	isposed	of, or E	Benefici	ally O	vned			
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye			Execution Date,		;, T	Transaction Dispos			ecurities Acquired (A) or losed Of (D) (Instr. 3, 4 and			Amount of ecurities eneficially wned Follow	F (6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
								G	Code	v	Amount	(A) or (D)	Price	Ti	eported ansaction(s nstr. 3 and 4			(Instr. 4)
Common Stock 09/13/201			19				S ⁽¹⁾		400	D	\$30)	702,485		D			
Common	Stock			09/16/20	19				S ⁽¹⁾		19,153(2)	D	\$30.05	30.0572 ⁽³⁾ 683,332 D				
		Та	ıble I	II - Derivat (e.g., pı							posed of converti				ed			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Date (Month/Day/Year)	Exec if any	Execution Date, if any		ransaction of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		tive ties red sed	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title Amour Securi Under Deriva Securi and 4)	nt of ties ying	8. Pric Deriva Securi (Instr.	rative derivative rity Securities	ive ies cially ing ed ction(s)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
													Amount or Number					

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 \$30.00 to \$30.305 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.

(D)

Date Exercisable

Expiration

Date

Remarks:

/s/ William Solis, as Attorney-09/17/2019 in-Fact for Bill Peck

of Shares

Title

** 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.