FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

VIIIEO F	414F		
Washington	DC	20540	

gton, D.C. 20549	OMB APPROVAL
O IN DENEELOIAL OVANIEDOLUB	OMP Number: 2225 (

STATEMENT OF CHANGES IN BENE	FICIAL OWNERSHI
------------------------------	-----------------

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

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL									
OMB Number: 3235-0287									
Estimated average burden									
hours per response	9: 0.5								

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)							
- HIII I dutick John																er (give title O		10% Ov Other (s		
(Last) (First) (Middle) C/O TWIST BIOSCIENCE CORPORATION 681 GATEWAY BLVD.			3. Date of Earliest Transaction (Month/Day/Year) 11/11/2024									Officer (give title Other (specify below) President and COO								
(Street) SOUTH SAN FRANCISCO CA 94080					4. If Amendment, Date of Original Filed (Month/Day/Year)								ne)	ividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(St		Zip)	on Dorive)	See	rition	Λ 0.0		l Die	posed of		onofici	ially C)m					
1. Title of Security (Instr. 3) 2. Transactic Date (Month/Day/				Execution Date,		,	3. Transaction Code (Instr. 8) 4. Securities Acquired Disposed Of (D) (Instr.				d 5) S B C	5. Amount of Securities Beneficially Owned Following Reported		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		Transaction(s) (Instr. 3 and 4)						
Common Stock 11/11/20)24			s 10,340 ⁽¹⁾		D	\$47.9	998	221,061		D					
		Tal	ole II								osed of, c				vne	t				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Conversion or Exercise Price of Derivative Date (Month/Day/Year) (Month/Day/Year)		eemed ution Date, h/Day/Year)		Transaction Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		e Exerc ation D h/Day/	Year) Secu Unde Deriv		nt of ities lying ative ity (Instr.	8. Price of Derivative Security (Instr. 5)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	,	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Natur of Indirec Beneficia Ownersh (Instr. 4)	
									Date Expiration Exercisable Date			Amount or								

Explanation of Responses:

Remarks:

/s/ Dennis Cho, as Attorneyin-Fact for Patrick John Finn ** Signature of Reporting Person

11/13/2024

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.

^{1.} Represents the number of shares required to be sold by the Reporting Person to cover tax withholding obligations in connection with the vesting of Restricted Stock Units. These sales are mandated by the Issuer's election under its equity incentive plans to require the satisfaction of a tax withholding obligation to be funded by a "sell to cover" transaction and do not represent discretionary trades by the Reporting Person