The Securities and Exchange Commission has not necessarily reviewed the information in this filing and has not determined if it is accurate and complete.

The reader should not assume that the information is accurate and complete.

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 FORM D

Notice of Exempt Offering of Securities

OMB APPROVAL

OMB 3235-Number: 0076

Estimated average

burden

hours per response:

4.00

1. Issuer's Identity

CIK (Filer ID Number)

Previous X None **Names**

Entity Type

0001447669

Name of Issuer

X Corporation Limited Partnership

TWILIO INC

Limited Liability Company

Jurisdiction of **Incorporation/Organization**

General Partnership **Business Trust**

DELAWARE

Other (Specify)

Year of Incorporation/Organization

X Over Five Years Ago

Within Last Five Years (Specify Year)

Yet to Be Formed

2. Principal Place of Business and Contact Information

Name of Issuer

TWILIO INC

Street Address 1

Street Address 2

645 Harrison Street

City

State/Province/Country

ZIP/PostalCode

Phone Number of Issuer

San Francisco

CALIFORNIA

94107

877-889-4546

3. Related Persons

Last Name

First Name

Middle Name

Lawson

Jeff

Street Address 1

Street Address 2

645 Harrison Street

City

State/Province/Country

ZIP/PostalCode

San Francisco

CALIFORNIA

94107

Relationship: X Executive Officer X Director Promoter

Clarification of Response (if Necessary):

Last Name

First Name

Middle Name

Ng

Roy

Street Address 1

Street Address 2

645 Harrison Street

City

State/Province/Country

ZIP/PostalCode

San Francisco

CALIFORNIA

Relationship: X Executive Officer Director Promoter

94107

Clarification of Response (if Necessary):

Last Name First Name Middle Name Kirkpatrick Lee **Street Address 1 Street Address 2** 645 Harrison Street State/Province/Country ZIP/PostalCode City **CALIFORNIA** 94107 San Francisco **Relationship:** X Executive Officer Director Promoter Clarification of Response (if Necessary): **Last Name** First Name Middle Name Cooke Evan **Street Address 1 Street Address 2** 645 Harrison Street City State/Province/Country ZIP/PostalCode San Francisco **CALIFORNIA** 94107 **Relationship:** Executive Officer X Director Promoter Clarification of Response (if Necessary): **Last Name First Name Middle Name** Dalzell Rick **Street Address 2 Street Address 1** 645 Harrison Street **State/Province/Country** ZIP/PostalCode City **CALIFORNIA** San Francisco 94107 **Relationship:** Executive Officer X Director Promoter Clarification of Response (if Necessary): **Last Name First Name Middle Name** Deeter Byron **Street Address 2 Street Address 1** 645 Harrison Street State/Province/Country ZIP/PostalCode City San Francisco **CALIFORNIA** 94107 **Relationship:** Executive Officer X Director Promoter Clarification of Response (if Necessary): **Last Name** First Name Middle Name McGeever Jim **Street Address 1 Street Address 2** 645 Harrison Street ZIP/PostalCode City **State/Province/Country** San Francisco **CALIFORNIA** 94107 **Relationship:** Executive Officer X Director Promoter Clarification of Response (if Necessary): **Last Name First Name** Middle Name Scott Raney **Street Address 1** Street Address 2 645 Harrison Street ZIP/PostalCode State/Province/Country City San Francisco **CALIFORNIA** 94107

Relationship: Executive Officer X Director Promoter

Clarification of Response (if Necessary):

Last Name First Name Middle Name

Wenger

Street Address 2 Street Address 1

645 Harrison Street

ZIP/PostalCode City State/Province/Country

San Francisco **CALIFORNIA** 94107

Albert

Relationship: Executive Officer X Director Promoter

Clarification of Response (if Necessary):

Last Name First Name Middle Name

Smith Karyn

> **Street Address 1 Street Address 2**

645 Harrison Street

ZIP/PostalCode **State/Province/Country** City

CALIFORNIA 94107 San Francisco

Relationship: X Executive Officer Director Promoter

Clarification of Response (if Necessary):

4. Industry Group

Agriculture Health Care Retailing

Banking & Financial Services Biotechnology Restaurants Commercial Banking Health Insurance Technology

Insurance Hospitals & Physicians Computers **Investing**

Pharmaceuticals Telecommunications **Investment Banking**

Pooled Investment Fund Other Health Care X Other Technology

Is the issuer registered as Travel Manufacturing an investment company under

Real Estate Airlines & Airports the Investment Company Commercial

Act of 1940? **Lodging & Conventions** Construction Yes Nο Tourism & Travel Services

Other Banking & Financial Services **REITS & Finance** Other Travel

Business Services

Residential Other Energy

Other Real Estate

Environmental Services

Energy Conservation

Other Energy

Oil & Gas

Coal Mining

Electric Utilities

5. Issuer Size

OR **Aggregate Net Asset Value Range Revenue Range**

No Revenues No Aggregate Net Asset Value

\$1 - \$1,000,000 \$1 - \$5,000,000

\$1,000,001 - \$5,000,000 \$5,000,001 - \$25,000,000 \$5,000,001 - \$25,000,001 - \$50,000,000

\$25,000,000

\$25,000,001 -

\$100,000,000 \$50,000,001 - \$100,000,000

Over \$100,000,000

X Decline to Disclose
Not Applicable

Over \$100,000,000

Decline to Disclose
Not Applicable

6. Federal Exemption(s) and Exclusion(s) Claimed (select all that apply)

	Investment Company Act Section 3(c)		
Rule 504(b)(1) (not (i), (ii) or (iii))	Section 3(c)(1)	Section 3(c)(9)	
Rule 504 (b)(1)(i) Rule 504 (b)(1)(ii) Rule 504 (b)(1)(iii)	Section 3(c)(2)	Section 3(c)(10)	
	Section 3(c)(3)	Section 3(c)(11)	
Rule 505	Section 3(c)(4)	Section 3(c)(12)	
Rule 506(b) Rule 506(c)	Section 3(c)(5)	Section 3(c)(13)	
Securities Act Section 4(a)(5)	Section 3(c)(6)	Section 3(c)(14)	
	Section 3(c)(7)		

7. Type of Filing

X New Notice Date of First Sale 2015-02-23 First Sale Yet to Occur Amendment

8. Duration of Offering

Does the Issuer intend this offering to last more than one year? Yes X No

9. Type(s) of Securities Offered (select all that apply)

X Equity Pooled Investment Fund Interests
Debt Tenant-in-Common Securities
Option, Warrant or Other Right to Acquire Another Security Mineral Property Securities

Security to be Acquired Upon Exercise of Option, Warrant or

Other (describe)

10. Business Combination Transaction

Is this offering being made in connection with a business combination transaction, such as a merger, acquisition or exchange offer?

Clarification of Response (if Necessary):

11. Minimum Investment

Minimum investment accepted from any outside investor \$0 USD

12. Sales Compensation

Recipient CRD Number X None

(Associated) Broker or Dealer X None (Associated) Broker or Dealer CRD Number X None

Street Address 1 Street Address 2

City State/Province/Country ZIP/Postal Code

State(s) of Solicitation (select all that apply)
Check "All States" or check individual States

All States Foreign/non-US

13. Offering and Sales Amounts

Total Offering Amount \$6,346,159 USD or Indefinite

Total Amount Sold \$6,346,159 USD

Total Remaining to be Sold \$0 USD or Indefinite

Clarification of Response (if Necessary):

14. Investors

Select if securities in the offering have been or may be sold to persons who do not qualify as accredited investors, and enter the number of such non-accredited investors who already have invested in the offering. Regardless of whether securities in the offering have been or may be sold to persons who do not qualify as accredited investors, enter the total number of investors who already have invested in the offering:

28

15. Sales Commissions & Finder's Fees Expenses

Provide separately the amounts of sales commissions and finders fees expenses, if any. If the amount of an expenditure is not known, provide an estimate and check the box next to the amount.

Sales Commissions \$0 USD Estimate Finders' Fees \$0 USD Estimate

Clarification of Response (if Necessary):

16. Use of Proceeds

Provide the amount of the gross proceeds of the offering that has been or is proposed to be used for payments to any of the persons required to be named as executive officers, directors or promoters in response to Item 3 above. If the amount is unknown, provide an estimate and check the box next to the amount.

\$0 USD Estimate

Clarification of Response (if Necessary):

Signature and Submission

Please verify the information you have entered and review the Terms of Submission below before signing and clicking SUBMIT below to file this notice.

Terms of Submission

In submitting this notice, each issuer named above is:

- Notifying the SEC and/or each State in which this notice is filed of the offering of securities described and undertaking to furnish them, upon written request, in the accordance with applicable law, the information furnished to offerees.*
- Irrevocably appointing each of the Secretary of the SEC and, the Securities Administrator or other legally designated officer of the State in which the issuer maintains its principal place of business and any State in which this notice is filed, as its agents for service of process, and agreeing that these persons may accept service on its behalf, of any notice, process or pleading, and further agreeing that such service may be made by registered or certified mail, in any Federal or state action, administrative proceeding, or arbitration brought against the issuer in any place subject to the jurisdiction of the United States, if the action, proceeding or arbitration (a) arises out of any activity in connection with the offering of securities that is the subject of this notice, and (b) is founded, directly or indirectly, upon the provisions of: (i) the Securities Act of 1933, the Securities Exchange Act of 1934, the Trust Indenture Act of 1939, the Investment Company Act of 1940, or the Investment Advisers Act of 1940, or any rule or regulation under any of these statutes, or (ii) the laws of the State in which the issuer maintains its principal place of business or any State in which this notice is filed.
- Certifying that, if the issuer is claiming a Regulation D exemption for the offering, the issuer is not disqualified from relying on Regulation D for one of the reasons stated in Rule 505(b)(2)(iii) or Rule 506(d).

Each Issuer identified above has read this notice, knows the contents to be true, and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

For signature, type in the signer's name or other letters or characters adopted or authorized as the signer's signature.

Issuer Signature Name of Signer Title Date						
			Name of Signer	Title	Date	

Issuer	Signature	Name of Signer	Title	Date
TWILIO INC	/s/ Karyn Smith	Karyn Smith	General Counsel	2015-03-02

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.

* This undertaking does not affect any limits Section 102(a) of the National Securities Markets Improvement Act of 1996 ("NSMIA") [Pub. L. No. 104-290, 110 Stat. 3416 (Oct. 11, 1996)] imposes on the ability of States to require information. As a result, if the securities that are the subject of this Form D are "covered securities" for purposes of NSMIA, whether in all instances or due to the nature of the offering that is the subject of this Form D, States cannot routinely require offering materials under this undertaking or otherwise and can require offering materials only to the extent NSMIA permits them to do so under NSMIA's preservation of their anti-fraud authority.