## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

**OMB APPROVAL** 3235-0287 Estimated average burden 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

Name and Address of Reporting Person*     Smith Karyn						2. Issuer Name and Ticker or Trading Symbol TWILIO INC [ TWLO ]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  X Officer (give title Other (specify				
(Last) C/O TW	O TWILIO INC.					3. Date of Earliest Transaction (Month/Day/Year) 04/15/2017							General Counsel and Secretary				
375 BEALE STREET, SUITE 300																	
(Street) SAN FRANCISCO CA 94			94105		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)							Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person				
(City)	(S	tate)	(Zip)														
		Tal	ole I - Non	-Deriv	ative	e Se	curitie	es Acc	quired, Dis	posed o	f, or Ben	eficiall	y Owned				
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)						ear)	2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disposed Code (Instr. 5)		ies Acquired (A) or Of (D) (Instr. 3, 4 and		5. Amour Securitie Beneficia Owned F	s ally ollowing	Form:	Direct Indirect Etr. 4)	7. Nature of Indirect Beneficial Ownership
								Code V	Amount	(A) or (D)	Price	Reported Transact (Instr. 3 a	on(s)		(	(Instr. 4)	
									uired, Disp options,				Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Da if any (Month/Day/	ate, Tr	ransac ode (li		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)
				C	ode	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	on(s)		
Class B Common Stock <sup>(1)</sup>	(1)	04/15/2017			F			693 <sup>(2)</sup>	(1)	(1)	Class A Common Stock	693	\$0	21,858 <sup>(3)</sup>		D	
Class B Common Stock <sup>(1)</sup>	(1)	04/17/2017			G	v		1,186	(1)	(1)	Class A Common Stock	1,186	\$0	20,672 <sup>(</sup>	(3)	D	
Class B Common Stock <sup>(1)</sup>	(1)	04/17/2017			G	V	1,186		(1)	(1)	Class A Common Stock	1,186	\$0	14,073	3	I	By The Karyn Smith Revocable Trust <sup>(4)</sup>

## **Explanation of Responses:**

- 1. Each share of Class B common stock is convertible into one share of Class A common stock at the option of the holder and has no expiration date.
- 2. Represents shares of Class B common stock that were withheld by the Issuer to satisfy tax withholding obligations of the Reporting Person in connection with the vesting of RSUs.
- 3. A portion of these shares represent Restricted Stock Units ("RSUs"). Each RSU represents a contingent right to receive one share of the Issuer's Class B common stock.
- 4. The Karyn Smith Revocable Trust U/A/D 9/15/06 Amended 12/23/11, Karyn Smith Trustee.

/s/ Mariam Sattar as attorney in fact for Reporting Person

04/18/2017

\*\* 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.