FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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

1. Name and Address of Reporting Person*  SMILEY MICHAEL C  2. Date of Event Requiring Statement (Month/Day/Year) 08/01/2019			nent	3. Issuer Name <b>and</b> Ticker or Trading Symbol  TWIN DISC INC [ TWIN ]								
(Last) 1375 S 1470 (Street) PROVO	(First) E UT	(Middle) 84606				utionship of Reporting Perso call applicable) Director Officer (give title below)	10% Own Other (spe	er	(Mon	nth/Day/Year) dividual or Joint icable Line) Form filed b	date of Original Filed  /Group Filing (Check  y One Reporting Person  y More than One erson	
(City)	(State)	(Zip)										
Table I - Non-Derivative Securities Beneficially Owned												
1. Title of Security (Instr. 4)					int of Securities ially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		4. Nature of Indirect Beneficial Ownership (Instr. 5)				
Common Stock						22,934	D					
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)												
1. Title of Derivative Security (Instr. 4)  2. Date Exercisable a Expiration Date (Month/Day/Year)		ate	nd 3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion		Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)				
			Date Exercisable	Expiratio Date	n Title	3	Amount or Number of Shares	Price of Derivation	ative	Direct (D) or Indirect (I) (Instr. 5)		

Explanation of Responses:

/s/ Michael C. Smiley

08/22/2019

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

 $<sup>^{\</sup>star}$  If the form is filed by more than one reporting person, see Instruction 5 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).