

OMB APPROVAL	
OMB Number:	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).

**STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP**

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* <u>SPT Invest Management Sarl</u> <hr/> (Last) (First) (Middle) <u>21 RUE EDMOND REUTER</u> <hr/> (Street) <u>5326 CONTERN N4</u> <hr/> (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>BENTLEY SYSTEMS INC [ BSY ]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director <input checked="" type="checkbox"/> 10% Owner Officer (give title below) Other (specify below)
	3. Date of Earliest Transaction (Month/Day/Year) <u>07/06/2021</u>	
4. If Amendment, Date of Original Filed (Month/Day/Year)		

**Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned**

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	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			
Class B Common Stock	07/06/2021		J <sup>(1)</sup>		10,700,000	D	(1)	24,869,645	D	

**Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)		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 Security (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	V		(A)	(D)					

1. Name and Address of Reporting Person\*  
SPT Invest Management Sarl  


---

 (Last) (First) (Middle)  
21 RUE EDMOND REUTER  


---

 (Street)  
5326 CONTERN N4  


---

 (City) (State) (Zip)

1. Name and Address of Reporting Person\*  
SIEMENS AG  


---

 (Last) (First) (Middle)  
WERNER VON SIEMENS STR. 50  


---

 (Street)  
91052 ERLANGEN 2M  


---

 (City) (State) (Zip)

**Explanation of Responses:**

1. Represents a transfer to Siemens Fonds Invest GmbH for the benefit of Siemens-Fonds SPT MM, an investment fund managed by Siemens Fonds Invest GmbH.

**Remarks:**

SPT Invest Management Sarl,  
By: /s/ Thomas Gruenewald, 07/07/2021  
Name: Thomas Gruenewald,  
Title: Director

[SPT Invest Management Sarl](#), [07/07/2021](#)

[By: /s/ Ramon Stoeckle](#),

[Name: Ramon Stoeckle, Title:](#)

[Director](#)

[Siemens AG, By: /s/ Thomas](#)

[Fredrich, Name: Thomas](#)

[Fredrich, Title: Head of CF R](#) [07/07/2021](#)

[6 3](#)

[Siemens AG, By: /s/ Peter](#)

[Kastenmeier, Name: Peter](#)

[Kastenmeier, Title: Head of](#) [07/07/2021](#)

[CF R 6 1](#)

\*\* 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.**