FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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OMB APPROVAL								
OMB Number:	3235-0287							
Estimated averag	e burden							

0.5

hours per response:

	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 intended to satisfy the affirmative defense conditions of Rule 10b5-

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(c). S	ee Instruction 1	0.																		
Name and Address of Reporting Person* Cumins Nicholas					2. Issuer Name and Ticker or Trading Symbol BENTLEY SYSTEMS INC [BSY]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
<u>Cumms richords</u>				1										✓ Director			10% Ov			
(Look) (First) (Middle)					3 Da	3. Date of Earliest Transaction (Month/Day/Year)								-	▼ Office belo	er (give title w)		Other (s	specify	
(Last) (First) (Middle)				12/12/2024									Chief Executive Officer							
C/O BENTLEY SYSTEMS, INCORPORATED 685 STOCKTON DRIVE																				
003 310	CKION D	KIVE			4. If Amondment, Date of Original Filed (Month/Day/Mass)								-	C. Individual on Init/Crown Filing (Charle Applicable						
(Street)					4. 11 /	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
EXTON	PA	. 1	9341												Forn	n filed by On	e Rep	orting Perso	on	
															Form filed by More than One Reporting Person				orting	
(City)	(Sta	ate) (Ž	Zip)												Feis	OH				
		Table	I - Nor	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or	Ben	eficia	ally Owr	ned				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da						Execution Da		Date,	Code (Instr.						nd Secur Benef	icially d Following	Form (D) o	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	v	Amount	(A (D	() or ()	Price	Trans	action(s) . 3 and 4)			(msu. 4)		
Class B C	Common Sto	ock		12/12/	2024			A ⁽¹⁾		406		A	\$0.0	00 3'	375,603		D			
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																				
1. Title of Derivative Conversion or Exercise Price of Derivative Security 1. Title of Conversion or Exercise Price of Derivative Security 2. Conversion Date (Month/Day/Year) 3. Transaction Date Execution Date, if any (Month/Day/Year)			on Date,		ransaction of ode (Instr. Derivative		rative rities pired r osed)	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 (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	or Nur of	ount nber ires						

Explanation of Responses:

1. Represents dividend equivalent rights that accrued to the Reporting Person in connection with a dividend paid by the Issuer on awards previously granted and vest on the same terms as the awards to which they relate.

> /s/ Michael T. Fischette, Attorney-in-Fact

12/16/2024

** 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.