FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
-------------	------	-------

STATEMENT OF CHAN

	<u> </u>	U 17 1.
GES IN BENEFICIAL OWNERSHIP	OMB Number: Estimated average burn	3235-0287 den

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

OMB APPROVAL								
OMB Number: 3235-028								
Estimated average burden								
hours per response	: 0.5							

1. Name and Address of Reporting Person* Griswold Kirk B.					2. Issuer Name and Ticker or Trading Symbol BENTLEY SYSTEMS INC [BSY]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
GIISWOIG KIIK D.															X Director			10% Ov	vner	
(Last)	`	,	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 03/20/2023								Offi belo	er (give title w)		Other (s below)	pecify		
C/O BENTLEY SYSTEMS, INCORPORATED 685 STOCKTON DRIVE				4. I	4. If Amendment, Date of Original Filed (Month/Day/Year)								Lin	6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)					-										X Form filed by One Reporting Person Form filed by More than One Reporting					
EXTON	PA	Α	19341												Person					
					- R	ule	10b	5-1(c)) Tr	rans	acti	ion Ind	ication							
(City)	(S	tate)	(Zip)		Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.								I to							
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Trans. Date (Month/I				Execution Date,		,	Transaction Disposed Code (Instr. 5)		ties Acquired (A) or I Of (D) (Instr. 3, 4 and		Secu Bene Own	5. Amount of Securities Beneficially Owned Following Reported		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership					
									•	Code	v	Amount	(A) or (D)	Price	Trans	action(s) 3 and 4)			(Instr. 4)	
Class B C	Common Sto	ock		03/2	0/202	/2023			M		10,000 A		\$5.30)5	512,306		D			
Class B Common Stock 03/20				0/202	/2023			F ⁽¹⁾		1,289 D		\$41.1	.8	8 511,017		D				
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
						- Oui	-		_						1				1	
Derivative Conversion Date Execution Date, Tourist Security or Exercise (Month/Day/Year) if any C					ansaction 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 Derivati Security (Instr. 5		re es ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)				
					Code	v	(A)	(D)	Dat Exe	te ercisab		Expiration Date	Title	Amount or Number of Shares						
Stock Options (Right to Buy)	\$5.305	03/20/2023			М			10,000		(2)	C	05/28/2023	Class B Common Stock	10,000	\$5.305	0		D		

Explanation of Responses:

- 1. Represents shares withheld by the Issuer to cover the exercise price in connection with a cashless exercise of stock options by the Reporting Person.
- 2. These options were fully vested and have been exercised in full.

/s/ Michael T. Fischette, 03/21/2023 Attorney-in-Fact

** 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.