Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | |
|--------------------------|-----|--|--|--|--|--|--|--|
| OMB Number: 3235-0287 | | | | | | | | |
| Estimated average burden | | | | | | | | |
| hours per response: | 0.5 | | | | | | | |

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* Klein Russell Scott | | | | | 2. Issuer Name and Ticker or Trading Symbol BigCommerce Holdings, Inc. [BIGC] | | | | | | | | | Check | all app | onship of Reporti all applicable) Director Officer (give title | | rson(s) to Is 10% O Other (s | wner |
|---|--|---|---------------|-------|---|---|-----|---|-----------------|---------|--|---------------|------------------------|---|--|---|--------------------------------------|---|------------|
| (Last) (First) (Middle) 11305 FOUR POINTS DRIVE BUILDING II, THIRD FLOOR | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/28/2021 | | | | | | | | X | belov | | nercia | below) | |
| (Street) AUSTIN (City) | | 7 | 78726 Zip) | | 4. If <i>i</i> | 4. If Amendment, Date of Original Filed (| | | | | | uy/Year | | Individual or Joint/Group Filing (Check Applic Line) X Form filed by One Reporting Person Form filed by More than One Reportin Person | | | | | on |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Yell) | | | | Year) | Execution Date, | | · | 3. Transaction Code (Instr. 8) | | | | | nd 5) Secur Benef | | rities F ficially (I ed Following (I | | n: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | | Code | v | Amount | (A) or (D) | Price | Trans | | action(s) 3 and 4) | | | (111341.4) |
| Series 1 Common Stock 05/28/202 | | | | |)21 | | | | S | | 11,775(1) | D | \$55.4 | .4644 20 | | 262,225 | | 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) | vative Conversion Date Execution Date, urity or Exercise (Month/Day/Year) if any | | | | Transaction Code (Instr. 8) | | of | | Expiration Date | | 7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4) | | nt | | 9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownersh Form: Direct (D) or Indirect (I) (Instr. | | Beneficial Ownership t (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exer | cisable | Expiration Date | Title | Number of Shares | | | | | | |

Explanation of Responses:

1. Reflects units sold by the reporting person to cover tax withholding obligations in connection with the vesting and settlement of RSUs granted on May 27, 2020. The sale was to satisfy tax withholding obligations to be funded by a mandatory "sell to cover" transaction and does not represent a discretionary transaction by the reporting person.

Remarks:

/s /Jeff Mengoli, Attorney-in-Fact for Russell Scott Klein

06/02/2021

** 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.