FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

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

OMB APPROVAL 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*  Bellm Brent				2. Issuer Name and Ticker or Trading Symbol BigCommerce Holdings, Inc. [ BIGC ]									(Check	all app		ng Pers	10% O	wner	
	(Fi OUR POIN NG II, THI	,	⁄liddle)		3. Date of Earliest Transaction (Month/Day/Year) 05/28/2021									X	Officer (give title below)  President Chic		Other (below) ef Exec Office		
(Street) AUSTIN TX 78726 (City) (State) (Zip)				4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)									lividual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person					
		Table	I - Non-E	Deriva	tive S	Secu	rities	A C	quire	d, D	isposed o	f, or B	enef	icially	Own	ed			
1. Title of Security (Instr. 3)		Date	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 a			and 5) Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount	(A) or (D)	Price	)		ted action(s) 3 and 4)			(Instr. 4)	
Series 1 (	Common St	ock	04/	1/02/202	21				G <sup>(1)</sup>	V	659,907	D	\$(	0.00	1,0	41,170		D	
Series 1 Common Stock		04/	04/02/2021					G <sup>(1)</sup>	v	659,907	A	\$(	0.00	659,907				By Spouse	
Series 1 Common Stock		05/	05/28/2021					S		31,907(2)	D	\$55	.4644	644 1,009,263			D		
Series 1 (	Common St	ock													10	00,389		I	By Mt. Eden Ltd.
Series 1 Common Stock														496,696			I	By Wild Basin, Ltd	
		Tal									posed of, convertil				Owne	d			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution I if any (Month/Day	Date,	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expi (Mor	ration	ercisable and Date //Year)	7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		Der Sec (Ins	Price of rivative curity str. 5)	9. Number or derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y D o (I	.0. Ownership Form: Direct (D) or Indirect I) (Instr. 4)	Beneficial Ownership (Instr. 4)
				Cc		v	(A)	(D)	Date Exercisable		Expiration e Date	Title	Amou or Numb of Share	er					

## **Explanation of Responses:**

- 1. This transaction involved a gift of securities by the reporting person to his wife, who shares the reporting person's household.
- 2. 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 Brent Bellm

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.