FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, I	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

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

	tion 1(b).	nuc. See		Filed							ies Exchang mpany Act o		f 1934		luon	irs per i	response:	0.5	
1. Name and Address of Reporting Person* PRAGER MORGAN KAROLE				2. Issuer Name and Ticker or Trading Symbol BLACKLINE, INC. [BL]								5. Relationship of Reporting Person(s) to Issue (Check all applicable) Director 10% Owner Officer (give title Other (spe				wner			
(Last) 21300 V 12TH FL	(Fi ICTORY B .OOR	,	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 08/20/2021									A be	elow) (below)	Other (specify below) ministrative	
(Street) WOODL HILLS (City)	C.		1367 Zip)											ine) X Fe	·				
(City)	(30			on-Deriva	tive S	Secui	rities	Acc	uired	. Dis	posed of	. or E	Benefic	ially O	wned				
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day			Execution Date,			Transaction Disposed Code (Instr. 5)		s Acquired (A) of (D) (Instr. 3, 4		nd See Bei Ow	Amount of curities neficially rned Following	Foi (D)	rm: Direct or Indirect (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)					
							Code	v	Amount	(A) or (D) Pri		Tra	Transaction(s) (Instr. 3 and 4)			(1130.4)			
Common Stock 08/20				08/20/2	9021		F		1,427(1)	D	\$106	36,994			D				
		Tal	ole II								osed of, convertib				ned				
1. Title of Derivative Security (Instr. 3)	rative Conversion Date Execution or Exercise (Month/Day/Year) if any		eemed Ition Date, h/Day/Year)	ion Date, Transaction Code (Instr.		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)		ate	7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		8. Price Derivati Security (Instr. 5	tive derivative Securities	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amount or Number of Shares						

Explanation of Responses:

Remarks:

/s/ Karole Morgan-Prager

08/24/2021

** 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.

^{1.} The reported shares were withheld to cover the Reporting Person's tax liability in connection with the vesting of restricted stock units.