FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

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

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* Tucker Therese | | 2. Issuer Name and Ticker or Trading Symbol BLACKLINE, INC. [BL] | | | | | | | ck all applicable) | rting Person(s) to Issuer 10% Owner | | |
|--|------------------|--|---|---|--|---------------|------------------|---|--------------------|---|--|--|
| (Last) (First) (Middle) 21300 VICTORY BLVD., 12TH FLOOR | | | 3. Date of Earliest 08/14/2018 | Transact | ion (N | /lonth/Day/Ye | Х | Officer (give title below) below: Chief Executive Officer | | , | | |
| (Street) WOODLAND HILLS (City) (State) | 4. If Amendment, | Date of C | rigina | ıl Filed (Montl | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | | |
| | Table | I - Non-Deriva | tive Securities | Acqui | red, | Disposed | of, o | r Benefi | ciall | y Owned | | |
| Date | | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transaction Code (Instr. 8) | | | | | nd 5) S | 5. Amount of Securities Beneficially Owned | 6. Ownership Form: Direct (D) or Indirect (I) | 7. Nature of Indirect Beneficial Ownership |
| | | | | Code | v | Amount | (A) or (D) | Price | | Following Reported Transaction(s) (Instr. 3 and 4) | (Instr. 4) | (Instr. 4) |
| Common Stock | | 08/14/2018 | | S | | 15,376 | D | \$47.08 | 49(1) | 3,150,224 | I | Brian & Therese Tucker Living Trust |
| Common Stock | | | | | | | | | | 63,672 | D | |
| Common Stock | | | | | | | | | | 1,200,000 | I | Tucker Legacy Trust |
| Common Stock | | | | | | | | | | 577,200 | I | Isaac Tucker 2012 Irrevocable Trust |
| Common Stock | | | | | | | | | | 577,200 | I | Roseanna Tucker 2012 Irrevocable Trust |
| Common Stock | | | | | | | | | | 54,074 | I | Claire Seimetz 2015 Trust |
| Common Stock | | | | | | | | | | 250,916 | I | Tucker Seimetz Safety Net Grat |

| | 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) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transact Code (In 8) | | 5. Number of Expiration Date (Month/Day/Year) Securities Acquired (A) or | | 7. Title and Amount of Securities Underlying | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |

Explanation of Responses:

1. The sale price represents the weighted average price of the shares sold ranging from \$47.00 to \$47.20 per share. Upon request by the Commission staff, the Issuer or a security holder of the Issuer, the Reporting Person will provide full information regarding the number of shares sold at each separate price within the range set forth in this Form 4.

Remarks:

/s/ Karole Morgan-Prager, 08/16/2018 Attorney-in-Fact

** Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

 $^{^{\}star}$ 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).