FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

asilington, D.C. 20049		

	OMB APPROVAL									
	OMB Number:	3235-0287								
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	hours per response:	0.5								
- 1										

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

. Name and Address of Reporting Person*  Tucker Therese  (Last) (First) (Midd		BLACKLINE, INC. [ BL ] (Check all a X Dir X Off bel							ionship of Reporting Person(s) if all applicable)  Director 10%  Officer (give title below) below		
21300 VICTORY BLVD., 12TH FLOOR		08/19/2022			- ,		Exec	Executive Chair			
Street) WOODLAND HILLS CA 9136	4. If Amendment, Date	e of Orig	inal Fi	iled (Month/Da		Individual or Joint/Group Filing (Check Applicable Line)     X    Form filed by One Reporting Person     Form filed by More than One Reporting Person					
City) (State) (Zip)	N 5 : "	<u> </u>									
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Yell)		2A. Deemed Execution Date,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 a			5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
		(,	Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)	,,,	(Instr. 4)	
Common Stock	08/19/2022	2	F		3,544(1)	D	\$71.39	201,714	D		
Common Stock								1,509,881	I	Brian & Therese Tucker Living Trust	
Common Stock								100,178	I	Brian & Therese Tucker Charitable Remainder Trust	
Common Stock								100,178	I	Tucker Family CLAT	
Common Stock								874,128	I	Tucker Legacy Trust	
Common Stock								129,897	I	Tucker Legacy Trust II	
Common Stock								577,200	I	Isaac Tucker 2012 Irrevocable Trust	
Common Stock								577,200	I	Roseanna Tucker 2012 Irrevocable Trust	
Common Stock								250,916	I	Tucker Seimetz Safety Net Trust	
Common Stock								54,074	I	Claire Seimetz 2015 Trust	

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 Tal Date (Month/Day/Year)	p∰-IP⊕Defrivat Execution Date, if any (e.g., pt (Month/Day/Year)	ve Se Transa Itsode ( 8)	curit ection Mes, v	ies <sup>N</sup> 4 of V <b>B4</b> 10 Secur Acqu (A) or Dispo	rities ired r	<b>ifeCateDays</b> Expiration Da <b>Options</b> y/ <b>C</b>	<del>5sଧପ</del> aଅନ, ( ଜnvertib	Under Deriva	<del>lying</del> ative ity (Instr.	Derivative Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
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. Transa Code ( 8)		of (D) tipstf Secu Acqu (A) of Dispo of (D)	ative rities ired sed	6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Expiration				Security	Iransaction(s) Institute 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)
Explanatio	n of Respons	es:				and 5	5)								
1. The report	ed shares were	withheld to cover the	Reporting Person's	ax liabil	ity in co	onnecti	on witl	n the vesting of	restricted sto	ck units.	Amount				
Remarks	<b>:</b> :			Code	  v	(A)	(D)	Date Exercisable	Expiration Date /S/K		or Number of I <u>Morgan</u> -	- <u>Prager,</u>	08/22/2022		

Attorney-in-Fact

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.

<sup>\*\*</sup> Signature of Reporting Person

 $<sup>^{\</sup>star}$  If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).