## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

<b>STATEMENT</b>	OF CHANGES	S IN BENEFICIAL	L OWNERSHIP

	OMB APPROVAL							
	OMB Number:	3235-0287						
	Estimated average burde	en						
l	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).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

					or S	Section	30(h)	of the	Ínvestr	ment C	Company Act	of 1940									
1. Name and Address of Reporting Person* <u>Spanicciati Mario</u>						2. Issuer Name <b>and</b> Ticker or Trading Symbol BLACKLINE, INC. [ BL ]								Relationship of Reporting Person(s) to Issuer (Check all applicable)							
														X	Direc	ctor		10%	Owner		
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year)								X	Offic belov		er (give title Other (sp w) below)				
21300 VICTORY BLVD., 12TH FLOOR				07/	07/03/2017									Chief Marketing Officer							
(Street)					1 If	If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable					
WOODLAND CA 91367					in Americanetti, Date of Original Filed (Motiti/Day/Teal)									ine)  X Form filed by One Reporting Person							
HILLS GIT S1507														Form filed by More than One Reporting							
(City)	(SI	tate) (	(Zip)												Pers	son					
		Tabl	le I - N	lon-Deriv	ative	Sec	uritie	s Ac	quire	ed, D	isposed o	f, or B	enefic	cially	y Own	ed					
Date		2. Transaction Date (Month/Day/		Execution Date,		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 ar			d 5)	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		Reporte Transac (Instr. 3	rted action(s) . 3 and 4)			(Instr. 4)		
Common Stock			07/03/20	/2017				S <sup>(1)</sup>		12,750	D	\$35.7	<b>79</b> <sup>(2)</sup>	3,40	3,121		I	Spanicciati Family 2013 Irrevocable Trust			
Common Stock													848,928		8 I		Spanicciati Family 2013 Dynasty Trust				
		Та	able II								posed of, convertib				Owned						
1 Title of	2	2 Transaction	24 Do		4.	u,	_		-					<u> </u>	Drice of	0 Numbo	r of	10.	11 Natura		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execui if any	Execution Date, f any		l. Transaction Code (Instr. B)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		te Exei ation I th/Day		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		De Se (Ir	erivative der security Security Security Ow Fol Rej	9. Numbe derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	i is illy	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date	risahla	Expiration Date	Title	Amount or Number of Shares								

## **Explanation of Responses:**

- 1. The sale transaction reported on this Form 4 was effected pursuant to a Rule 10b5-1 trading plan adapted by the Reporting Person on March 14, 2017.
- 2. The sale price represents the weighted average price of the shares sold ranging from \$35.21 to \$36.13 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:

Karole Morgan-Prager, 07/03/2017 Attorney-in-Fact

\*\* 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.