FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, [D.C. 20549
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Check this box if no longer subject to Section 16. Form 4 or Form 5	STATEMENT OF CH
obligations may continue. See	
Instruction 1(b).	Filed pursuant to Se

IANGES 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

Name and Address of Reporting Person* Yamamoto Mika					2. Issuer Name and Ticker or Trading Symbol BLACKLINE, INC. [BL]										Relationshi heck all app X Direc	,	ng Per	rson(s) to Is 10% Ov		
(Last)	(Fi	rst) (M	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 05/09/2024									Offic belov	er (give title v)		Other (s below)	specify	
21300 VICTORY BLVD., 12TH FLOOR					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)	LAND CA	Λ 9	1367													i filed by On i filed by Mo on		•		
HILLS 			1507		Rul	Rule 10b5-1(c) Transaction Indication														
(City)	(St	ate) (2	Zip)		Check this box to indicate that a transaction was made pursuant to satisfy the affirmative defense conditions of Rule 10b5-1(c). See In									it to a c	a contract, instruction or written plan that is intended to struction 10.					
		Table	I - Noi	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or l	Ben	eficia	ally Own	ed				
1. Title of Security (Instr. 3) 2. Transac Date (Month/D:				Executy/Year) if an		Deemed cution Date, ly nth/Day/Year)		3. Transaction Code (Instr. 8) 4. Securitie Disposed 0 5)		es Acquired (A) o Of (D) (Instr. 3, 4		(A) or 3, 4 a	nd Securi Benefi	cially I Following	Form (D) o	n: Direct or Indirect ostr. 4)	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A (D) or)	Price	Transa	action(s) 3 and 4)			(Instr. 4)	
Common Stock 05/09/					/2024				A ⁽¹⁾		3,390(2)) A		\$0	1	12,720		D		
	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)	tive Conversion Date Execution Date, or Exercise (Month/Day/Year) if any				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)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code V		(A)	(D)	Date Expiration Date		Title	or Nur of	ount mber ares							

Explanation of Responses:

- 1. Reflects automatic annual restricted stock unit ("RSU") awards pursuant to the Issuer's Outside Director Compensation Policy.
- 2. The reported securities awarded on May 9, 2024, (the "Award Date") represent RSUs which vest in full upon the earlier of the one (1) year anniversary of the Award Date or the day prior to the Issuer's next annual meeting of the stockholders and in each case subject to the Reporting Person's continued service on the Issuer's board of directors through each vesting date.

/s/ Karole Morgan-Prager, 05/10/2024 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.