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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
obligations may continue. See
Instruction 1(b).

## STATEMENT OF CHANGES 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

1. Name and Address of Reporting Person* BOOR ANTHONY W					2. Issuer Name and Ticker or Trading Symbol BLACKBAUD INC [ BLKB ]									(Chec	k all app Direc	tor		10% O	wner	
(Last)	(I CHILD S	,	Middle)			te of E 1/202		t Trans	action (N	Month	/Day/Year)			X Officer (give title Other (spe below)  CFO & Exec VP of Fin. & Admin					·	
(Street) CHARLESTON SC 29492				4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(;		Zip) • I - No	n-Deriva	ivative Securities Acquired, Disposed of, or Beneficially Owned															
1. Title of Security (Instr. 3) 2. Tra				2. Transac	Transaction ate		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)			A) or 5. Am Secur Benef Owne		unt of ies cially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
						Code	v	Amount	(A) o (D)	r Pri	ce	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)				
Common	05/01/2020				A		279(1)	A	\$	0.00	106,752			D						
Common	02/10/2021				A		24,438(2)	2) A S		0.00	0 131,190			D						
Common Stock				02/10/2	2021				A		7,166 <sup>(3)</sup>		\$	\$0.00		138,356		D		
Common Stock				02/12/2	/2021				A		22,311(4)	311 <sup>(4)</sup> A		0.00	0 160,667			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)	2. Conversion or Exercise Price of Derivative Security		if any	emed ion Date, /Day/Year)	4. Transa Code ( 8)		of Deriv Secu Acqu (A) o Disport of (D	r osed ) r. 3, 4	6. Date Expirati (Month/	ion Da		7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		De Se (In	Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	Code V (A) (D)					Expiration Date		Amoun or Numbe of Shares	r						

## **Explanation of Responses:**

- 1. Represents restricted stock units granted on May 1, 2020 that will vest in full on May 1, 2021, subject to continued employment.
- 2. Represents a restricted stock award which vests in four equal annual installments beginning on February 10, 2022, subject to continued employment.
- 3. The Compensation Committee determined that performance restricted stock awards granted in 2020 would vest in full on May 1, 2021 based on the Issuer achieving performance goals for the period ended December 31, 2020, subject to continued employment.
- 4. The Compensation Committee determined that performance restricted stock units granted in 2020 would vest in three equal annual installments beginning on February 12, 2021 based on the Issuer achieving performance goals for the period ended December 31, 2020.

## Remarks:

/s/ Donald R. Reynolds, 02/12/2021 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.