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							
OMB Number: 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* ELLIS GEORGE H				2. Issuer Name and Ticker or Trading Symbol BLACKBAUD INC [BLKB]								Relationship of Reporting Person(s) to Issue (Check all applicable) X Director 10% Owner								
(Last)	(Fir	,	Middle))		3. Date of Earliest Transaction (Month/Day/Year) 11/07/2023								Office	er (give title v)		Other (s	specify		
65 FAIRCHILD STREET				4. If /	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street)														X Form filed by One Reporting Person						
CHARLESTON SC 29492												Form filed by More than One Reporting Person								
(City) (State) (Zip)					Ru	Rule 10b5-1(c) Transaction Indication														
Check satisfy							Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.													
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye			Executio ear) if any		on Date,		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an			nd 5) Se Be Ow		ecurities eneficially wned Following		Direct	7. Nature of Indirect Beneficial Ownership			
					c		ode	V	mount	(A) or (D)	Price	Trans		orted saction(s) tr. 3 and 4)		4)	(Instr. 4)			
Common Stock 11/07/202			11/07/202	.3			S		2,500	D	\$73.561	5613(1)		8,451		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	3. Transaction Date (Month/Day/Year)	Exec if any	Deemed ution Date, / th/Day/Year)	4. Transaction Code (Instr. 8) 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			Expiration Date (Month/Day/Year) Amore (Month/Day/Year) Unde Deriv Secu 3 and			le and unt of rities rlying ative rity (Instr.	Der Sec	rice of ivative urity tr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	/ OF D O (I	0. Dwnership orm: Direct (D) r Indirect) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code V (A) (D)			Date Exe	e rcisable	Expiration Date	Title	Amount or Number of Shares								

Explanation of Responses:

1. This transaction was executed in multiple trades ranging from \$73.3723 to \$73.7042. The price reported in Column 4 is a weighted average price. The reporting person hereby undertakes to provide upon request to the SEC staff, the Issuer or a security holder full information regarding the number of shares and prices at which the transactions were effected.

Remarks:

/s/ Donald R. Reynolds, Attorney-In-Fact

11/09/2023

** 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.