FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OMB APPROVAL OMB Number: 3235-

OMB Number:	3235-0287					
Estimated average burd	en					
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	Section	on 30(h)	of the I	nvestmer	nt Cor	npany Act	of 194	10									
Name and Address of Reporting Person* Alexy Kimberly							2. Issuer Name and Ticker or Trading Symbol Five9, Inc. [FIVN]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
<u>Alexy Kimberry</u>						X										Dire	ctor		10% Owner				
(Last) (First) (Middle)							3. Date of Earliest Transaction (Month/Day/Year) 05/15/2015										Offic belov	er (give title w)		Other (specify below)			
C/O FIVE9, INC., BISHOP RANCH 8 4000 EXECUTIVE PARKWAY, SUITE 400																							
							4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable							
(Street)																	Line) X Form filed by One Reporting Person						
SAN RA	MON	ON CA 94583					l ' '																
																Form filed by More than One Reporting Person							
(City) (State) (Zip)																							
			Tabl	e I - Nor	n-Deriv	ative	Se	curitie	s Acc	quired,	Dis	posed o	f, or	Ben	efici	ally O	wne	ed					
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						ur) E	2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disp Code (Instr. 5)		Disposed	urities Acquired (A) sed Of (D) (Instr. 3,			nd Se Be	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	, π	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Common	5/2015	/2015					27,173	3	A \$0		00 52,173		2,173	I)								
Common											10,000			I	By trust								
			Та									sed of, onvertib					ned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercis Price of Derivative Security	on l	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,		Transaction Code (Instr.				6. Date Exercisable Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Ins and 4)				9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	nership m: ect (D) ndirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
						Code	v	(A)	(D)	Date Exercisal		Expiration Date	or Nu of		ount mber ires								

Explanation of Responses:

Remarks:

/s/ David Hill, attorney-in-fact 05/19/2015

** Signature of Reporting Person 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.

 $^{^{\}star}$ 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).