FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

TATEMENT OF CHANCES IN DENEFICIAL (

l	OMB APPRO	VAL				
	OMB Number:	3235-0287				
l	Estimated average burd	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).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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*							2. Issuer Name <b>and</b> Ticker or Trading Symbol									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Trollope Rowan M							Five9, Inc. [ FIVN ]									all app Direc	,	10%	Owner		
																	er (give title		er (specify		
(Last)	(1		3. Date of Earliest Transaction (Month/Day/Year)									X below) Other (spe				w)					
C/O FIVE9, INC., BISHOP RANCH 8							07/01/2019								Chief Executive Officer						
4000 EXECUTIVE PARKWAY, #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 RAMON CA 94583															Form filed by More than One Reporting						
															Person						
(City)	(:	State) (	Zip)																		
		Tabl	e I - Noi	n-Deriva	ative	Sec	curitie	s Acc	uired,	Dis	posed o	f, or	r Bene	eficia	ally O	wne	ed				
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)						Day/Year) if		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disposed Code (Instr. 5)		ities Acquired (A) d Of (D) (Instr. 3, 4			4 and Secu		cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code V		Amount	nount (A		Price	Trans		ction(s) 3 and 4)		(msu. 4)						
Common	Stock	7/01/2019						7,500(	1)	D	D \$52		2 <sup>(2)</sup> 431,990		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)	ative Conversion Date Execution Date, if any			Date,	4. Transaction Code (Instr. 8)		of I		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		str. 3	8. Price Derivati Security (Instr. 5)		9. Number of derivative Securities Beneficially Owned Following Reported Transactions (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
					Code		(A)		Date Evercisa		Expiration	Title	or Nun of	ount nber							

## **Explanation of Responses:**

- 1. The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on December 13, 2018.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$51.42 to \$53.01, inclusive. The reporting person undertakes to provide Five9, Inc., any security holder of Five9, Inc., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in this footnote.

## Remarks:

/s/ David Hill, attorney in fact 07/02/2019

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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).

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.