FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	S IN BENEFICIA	L OWNERSHIP

l	OMB APPROVAL									
	OMB Number:	3235-0287								
l	Estimated average bu	ırden								
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).

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* Trollogo Down M.						2. Issuer Name and Ticker or Trading Symbol Five9, Inc. [FIVN]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
<u>Trollope Rowan M</u>															X Dir		ctor 10%		.0% O	wner	
(Last) (First) (Middle)					3. D	Date of Earliest Transaction (Month/Day/Year)								\dashv			Officer (give title elow)		Other (specify below)		
C/O FIVE9, INC., BISHOP RANCH 8					08/	08/01/2019								Chief Executive Officer							
4000 EXECUTIVE PARKWAY, #400																					
(Street)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
SAN RAMON CA 94583													X Form filed by One Reporting Person								
															Form filed by More than One Reporting Person					orting	
(City)	(5	state) (Zip)																		
		Tabl	e I - No	on-Deriv	ative	Sec	uritie	s Ac	quired	l, Dis	sposed o	f, or	Ben	eficia	ally (Owne	ed				
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day)						Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 a				and 5) Secur Benet		icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)					
									Code	v	Amount	(A) or (D) Prio		Price		Transaction(s) (Instr. 3 and 4)				(111311. 4)	
Common Stock 08/01/20									S		7,500(1)	I)	\$58.0	58.03 ⁽²⁾ 424,4		24,490	D			
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																				
Security or Exercise (Month/Day/Year) if any				5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		ative rities ired osed	6. Date Exercisable and Expiration Date (Month/Day/Year)		te	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		nstr. 3	8. Price of Derivative Security (Instr. 5)		9. Number of derivative Securities Beneficially Owned Following Reported Transactions (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	(D) rect	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	or Nui of	nount mber ares							

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 \$57.04 to \$59.72, 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 08/02/2019

** 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.