FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGE	S IN BENEFI	CIAL OW	/NERSHIP

l	OMB APPRO	VAL
l	OMB Number:	3235-0287
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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)

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* <u>Burkland Michael</u>					2. Issuer Name <b>and</b> Ticker or Trading Symbol Five9, Inc. [ FIVN ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner						
(Last) (First) (Middle) C/O FIVE9, INC. BISHOP RANCH 8, 4000 EXECUTIVE PARKWAY, SUITE 400						3. Date of Earliest Transaction (Month/Day/Year) 04/15/2019								Offic belo	er (give title v)		Other (s below)	pecify	
EXECUTIVE PARKWAY, SUITE 400					_ 4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. I Lin	Individual or Joint/Group Filing (Check Applicable ne)					
(Street) SAN RAMON CA 94583													Forn	Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S	tate)	(Zip)			1 0.55.													
		Tab	le I - No	on-Deri	ivativ	e Se	curit	ties Ac	quired	, Di	sposed o	f, or Be	neficial	ly Owne	d				
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)				Execution Date,		3. Transaction Code (Instr. 8)  4. Securities Acqu Disposed Of (D) (Instr. Properties of the control of the con			Acquired (A) or D) (Instr. 3, 4 and 5)		Securities Beneficially Owned Following		n: Direct or Indirect   1 ostr. 4)	7. Nature of Indirect Beneficial Ownership					
									Code	v	Amount	(A) or (D)	Price	Repor Trans (Instr.	ted action(s) 3 and 4)			(Instr. 4)	
Common Stock 04/15/2					5/2019	019		M		15,300	A	\$4.25	5 9	5,771		D			
Common Stock 04/15/2					5/2019	019		S		15,300 <sup>(1</sup>	) D	\$52.02	(2) {	0,471		D			
Common Stock													6	77,355		I	By Trust		
		٦	Table II								oosed of, convertil			Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execution Date, Transaction of			ivative urities uired or oosed O) (Instr.	6. Date Exercisable and Expiration Date (Month/Day/Year)  7. Title and Am of Securities Underlying Derivative Sect (Instr. 3 and 4)				ies g Security	8. Price of Derivativ Security (Instr. 5)		e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercisa	ıble	Expiration Date	Title	Amount or Number of Shares						
Employee Stock Option (right to	\$4.25	04/15/2019			M			15,300	(3)		11/05/2024	Common Stock	15,300	\$0	34,48	6	D		

## **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 14, 2018.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$51.40 to \$52.67, 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.
- 3. The option dated November 5, 2014 is fully vested.

## Remarks:

/s/ David Hill, attorney-in-fact 04/17/2019

\*\* Signature of Reporting Person

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.