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(h)

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 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*     Burkland Daniel P.					2. Issuer Name <b>and</b> Ticker or Trading Symbol Five9, Inc. [ FIVN ]										all app Direc	licable)	ng Person(s) to Is 10% O Other (		wner
(Last) (First) (Middle) C/O FIVE9, INC. 3001 BISHOP DR., STE. #350					3. Date of Earliest Transaction (Month/Day/Year) 09/03/2021									below)		below)		opeoy	
(Street) SAN RAMON CA 94583 (City) (State) (Zip)				4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								. Indivine)	ividual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person					
		Table	I - No	on-Deriva	tive S	Secui	rities	Ac	quire	ed, Di	isposed o	f, or E	Benefic	ially	Own	ed			
Date			2. Transaction Date (Month/Day/Y	Executi (ear) if any		emed ion Date, /Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired Disposed Of (D) (Instr		red (A) or str. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	v	Amount	(A) or (D)	Price		Transa	saction(s) r. 3 and 4)			(111511.4)	
Common Stock				09/03/2021					S		1,164(1)	D	\$166.0	05 <sup>(2)</sup> 9		94,861		D	
Common Stock 09/0				09/07/202	21				S		2,323(1)	D	\$169.5	58 <sup>(3)</sup>	92,538			D	
Common Stock				09/03/202	2021				S		1(1)	D	\$170	.48	92,537			D	
		Tal	ole II -								posed of, convertil				Owne	d			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execution Date, if any (Month/Day/Year)    Kany		Deriv Secu Acqu (A) or Dispo of (D) (Instr and 5	rative rities ired r osed ) : 3, 4	Expi (Moi	iration nth/Day	//Year)	Amou Secur Under Derive Secur 3 and	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)  Amount or Number of Title Shares		Price of ivative curity str. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transaction (Instr. 4)	y   i	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

## **Explanation of Responses:**

- 1. The reported sales were to cover taxes upon the vesting of restricted stock units.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$166.05 to \$166.32, 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 price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$169.26 to \$170.23, 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 09/08/2021

\*\* 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.