FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPI	ROVAL
OMB Number:	3235-028
Estimated average b	urden

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

4. None and Address of Demonstrat Demons

			OWB / WITHOUT	<u> </u>
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP		RSHIP	OMB Number: 323	35-0287
Estimated aver				
Filed	hours per response:	0.5		
i licu	pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940			
	2 Issuer Name and Ticker or Trading Symbol	5 Relationship of R	enorting Person(s) to Issue	r

1. Name and Address of Reporting Person*  WELCH SCOTT  (Last) (First) (Middle)  C/O FIVE9, INC. BISHOP RANCH 8, 4000  EXECUTIVE PARKWAY, SUITE 400						Issuer Name and Ticker or Trading Symbol Five9, Inc. [ FIVN ]  3. Date of Earliest Transaction (Month/Day/Year) 06/25/2018									tionship of Reporting all applicable) Director Officer (give title		ig Pers	son(s) to Iss 10% Ov Other (s	ner
															below)  EVP, Cloud Op			below)	, ,
(Street)	MON, C		94583		_ 4. l	4. If Amendment, Date of Original Filed (Month/Day/Year)									lividual or Joint/Group Filing Form filed by One Repo Form filed by More than Person			orting Person	
(City)	(5		(Zip)	on Dori	vative	. 500	rit	ios Ao	auiroc	1 Di	sposod o	or Do	noficia	ally	Ownor	<b>-</b>			
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Yea		on 2A. Deemed Execution Date,		3. Transaction Code (Instr.		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4		d (A) or	5. Amount of Securities Beneficially Owned Following		unt of es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
							Code	v	Amount	(A) or (D)	Price			ted action(s) 3 and 4)			(Instr. 4)		
Common	Stock			06/25/	/2018				M		1,032	A	\$16.	25	92	,155	D		
Common	Stock			06/25/	/2018				S		1,032(1)	) D	\$34.3	<sup>7(2)</sup>	91	,123 D		D	
Common	Stock														11	,325		I	by Trust
		Т	able II								posed of converti				wned				
Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deer Execution if any (Month/I			ransaction		5. Number n of		Exerci on Da Day/Yo		7. Title and Amount of Securities Underlying Derivative Securi (Instr. 3 and 4)		De Se (In	Price of erivative ecurity estr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	is Ily	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficia Ownershi (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amoun or Numbe of Shares						
Employee Stock Option (right to	\$16.25	06/25/2018			M			1,032	(3)		02/23/2027	Common Stock	1,032		\$0	33,005	5	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 February 28, 2018.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$34.11 to \$35.01, 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.
- 3. The option vests in 48 equal monthly installments beginning on the one month anniversary of February 23, 2017.

## Remarks:

/s/ Barry Zwarenstein, attorney-in-fact

06/26/2018

\*\* 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.