FORM 4

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

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington D.C. 20549

| wasinington, | D.O. 20040 |  |
|--------------|------------|--|
|              |            |  |

| STATEMENT | <b>OF CHANGES</b> | IN BENEFICIAL | <b>OWNERSHIP</b> |
|-----------|-------------------|---------------|------------------|

OMB APPROVAL

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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>Kozanian Panos</u>  |  |       |              |         | 2. Issuer Name and Ticker or Trading Symbol Five9, Inc. [ FIVN ]  |   |  |   |       |   |             |             | Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner |   |   |  |  |                                    |            |
|--|--|-------|--------------|---------|---|---|--|---|-------|---|-------------|-------------|--|---|---|--|--|------------------------------------|------------|
| (Last)<br>C/O FIVE9  | (First   | :) (N | fiddle)      |         |   | 3. Date of Earliest Transaction (Month/Day/Year) 12/06/2023 |  |   |       |   |             |             |  | X   | below)  | Officer (give title below)  EVP, Product                                 |  | Other (specify below)  Engineering |            |
| 3001 BISHOP DR., STE. #350   |  |       |              | 4. If A | 4. If Amendment, Date of Original Filed (Month/Day/Year)  |   |  |   |       |   |             |             | 6. Individual or Joint/Group Filing (Check Applicable Line)                              |   |   |  |  |                                    |            |
| (Street) SAN RAMON CA 94583  |  |       |              |         |   |   |  |   |       |   |             | X           | X Form filed by One Reporting Person Form filed by More than One Reporting Person        |   |   |  |  |                                    |            |
| (City)   | (State   | e) (Z | ip)          |         | Rule 10b5-1(c) Transaction Indication  Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10. |   |  |   |       |   |             | satisfy the |  |   |   |  |  |                                    |            |
|  | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned   |       |              |         |   |   |  |   |       |   |             |             |  |   |   |  |  |                                    |            |
| Date   |  |       |              | e Ex    |   | 2A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) |  | 3.<br>Transaction<br>Code (Instr.<br>8) |       | 4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4                              |             |             | Securities<br>Beneficially Owned   |   | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4) |  | 7. Nature of Indirect Beneficial Ownership                         |                                    |            |
|  |  |       |              |         |   |   |  |   |       | v   | Amount      | (A)<br>(D)  | or Pri   | ce  | Transaction(s)<br>(Instr. 3 and 4)                                |  |  |                                    | (Instr. 4) |
| Common Stock 12/06.  |  |       |              | 6/2023  |   |   |  | F                                       |       | 1,116   | 1) <b>I</b> | \$          | 31.59  | 72,935  |   |  | 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)  2. Conversion or Exercise Price of Derivative Security  3. Transaction Date (Month/Day/Year)  3. Transaction Date (Month/Day/Year)  3. Transaction Date (Month/Day/Year) |  | Date, | Code (Instr. |         | 5. Number<br>of Derivative<br>Securities<br>Acquired (A)<br>or Disposed<br>of (D) (Instr.<br>3, 4 and 5)  |   | 6. Date Exercisable a<br>Expiration Date<br>(Month/Day/Year) |   | te    | nd 7. Title and Am<br>of Securities<br>Underlying<br>Derivative Sec<br>(Instr. 3 and 4) |             | ity         | 3. Price<br>of<br>Derivative<br>Security<br>(Instr. 5)                                   | 9. Number<br>derivative<br>Securities<br>Beneficial<br>Owned<br>Following<br>Reported<br>Transactio | ly C  | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |                                    |            |
|  |  | Code  | v            | (A)     | (D)   | Date<br>Exercisa  | ıble   | Expiration<br>Date                      | Title | Amou<br>or<br>Numb<br>of Sh   | per         |             | (Instr. 4)   | JII(8)  |   |  |  |                                    |            |

## **Explanation of Responses:**

1. Shares withheld by the Issuer to satisfy tax withholding obligation due to the vesting of Restricted Stock Units ("RSUs").

## Remarks:

/s/ David Hill, Attorney in Fact 12/08/2023

\*\* 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.