FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OIVID APPROVAL									
OMB Number:	3235-0287								
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	Check this box if no longer subject to
ì	Section 16. Form 4 or Form 5
J	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* Burkland Michael					2. Issuer Name and Ticker or Trading Symbol Five9, Inc. [FIVN]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
					1-	7.00	,		.]						Director			10% Ov	vner
(Loot) (First) (Middle)				3.	Date of Earliest Transaction (Month/Day/Year)								- X	Officer (below)	give title	Other (speci below)		pecify	
(Last) (First) (Middle)						11/05/2014									Chief Executive Officer				
C/O FIVE9, INC., BISHOP RANCH 8																			
4000 EX	ECUTIVI	E PARKWAY, SU	ITE 400		-	If A made	andmont F	Data at	f Ovininal F	اممان	(Manth/Da	()(0.0.11)		C Inc	lividual av 1	int/Cuarra	Tilin a	(Chaali Ann	liaabla
(C++)					4.	п Апте	enament, L	Jale of	f Original F	-iieu	(MOHIH)Da	ly/Year)		Line)	dividual or Jo	oinvGroup	Filing	(Спеск Ард	ilicable
(Street) SAN RA	MON	CA	94583											X	Form fil	ed by One	Repo	rting Persor	1
SAN KA	LIVION	∟A	94505													ed by Mor	e than	One Repor	ting
(6:)		· · · · ·	(,											Person				
(City)		State)	(Zip)																
		Та	ble I - Nor	n-Deriv	/ativ	re Se	ecurities	s Acc	quired,	Disp	osed c	of, or Be	enefi	cially	Owned				
Date				Date	ate Execution Ex		Execution if any	A. Deemed xecution Date, any //onth/Day/Year)		Transaction Disposed Code (Instr.		rities Acquired (A) ed Of (D) (Instr. 3, 4		Securition Securition Securition Benefici Owned I		s lly ollowing	Form (D) or	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership
									Code	v	Amount	(A) (D)	or F	rice	Reported Transacti (Instr. 3 a	ion(s)			(Instr. 4)
Common Stock 11/0					5/20:	14			A		170,0	00 A	1	\$0.00	0 1,073,500			D	
			Table II -						uired, D , option						Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		Execution Date	Code (Instr.			5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisab Expiration Date (Month/Day/Year)			nd 7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		Derivative Security		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
													Amo	ount		(Instr. 4)	ion(s)		
				Co	ode	v	(A)		Date Exercisabl		Expiration Date	Title		nber hares					
Employee Stock Option	\$4.25	11/05/2014			A		319,000		(1)	1	1/05/2024	Common	310	9.000	\$0.00	319.00	00	D	
(right to	Φ4,23	11/05/2014			21		313,000		(-)	1	1/03/2024	Stock		,,,,,,,,,	φυ.υυ	313,00	UU	"	

Explanation of Responses:

1. The option vests in 48 equal monthly installments beginning on the one month anniversary of the date of grant.

Remarks:

/s/ David Hill, attorney-in-fact 11/07/2014

** 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.