FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

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 Daniel P.</u>					2. Issuer Name and Ticker or Trading Symbol Five9, Inc. [FIVN]									5. Relationship of Repo (Check all applicable) Director			g Perso	10% Ov	vner	
(Last)	•	rst) (M		3. Date of Earliest Transaction (Month/Day/Year) 07/31/2024									V	Officer (give title below) Pres. & Chief Re		Revenu	Other (specify below) venue Officer			
3001 BISHOP DR., STE. #350					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check App Line)					.	
(Street) SAN RAMON CA 94583																Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City) (State) (Zip)					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.													ided to	
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
Date				2. Transacti Date (Month/Day	.	2A. Deemed Execution Date, if any (Month/Day/Year)					s Acquired (A) or f (D) (Instr. 3, 4 ar		and 5) Securi Benefi		cially I Following	6. Own Form: I (D) or I (I) (Inst	Direct ndirect r. 4)	7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount	(A) or (D)	Price		Transa	ed ection(s) 3 and 4)			(Instr. 4)		
Common Stock 07/31/2)24	24		Α		5,081(1)	A	\$	0	132,716		D				
Common Stock 08/01				08/01/20)24	24			S		2,637(2)	D	\$43.	55(3)	130,079		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)	ative Conversion Date Execution or Exercise (Month/Day/Year) if any			tion Date, Trans		action (Instr. Securiti Acquire (A) or Dispose of (D) (Instr. 3, and 5)		vative prities pired r osed) r. 3, 4		tion D		7. Title and Amount of Securities Underlying Derivative Security (Insti 3 and 4)		8. Price of Derivative Security (Instr. 5)		9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ov Fo Dii or (I)	wnership orm: rect (D) Indirect (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exerci	isable	Expiration Date	Title	Amount or Number of Shares							

Explanation of Responses:

- 1. Settlement of non-derivative performance-based RSUs
- 2. The reported sales were to cover taxes upon the vesting of performance-based RSU's.
- 3. The price reported in Column 4 is a weighted average price applied to the transaction by the broker under the Corporations Policy for sales to cover taxes upon vesting of restricted stock units for all individuals, including the reporting person subject to the Corporations Policy on the date such sales occurred. 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.

Remarks:

/s/ Leena Mansharamani,

08/05/2024

Attorney in Fact

** 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.