FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPRO	OVAL				
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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>Gupta Sagar</u>		Requiring S (Month/Day	2. Date of Event Requiring Statement (Month/Day/Year) 12/08/2024 3. Issuer Name and Ticker or Trading Symbol Five9, Inc. [FIVN]							
(Last) C/O FIVE9		(Middle)			4. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner			5. If Amendment, Date of Original Filed (Month/Day/Year)		
3001 BISHO	OP DR., STE.	. #350			✓ Director Officer (give		(specify	6. Individual or Jo (Check Applicable		
(Street)				title below)	below		Form filed by One Reporting Person			
SAN RAMON	CA	94583						Form filed Reporting	by More than One Person	
(City)	(State)	(Zip)								
Table I - Non-Derivative Securities Beneficially Owned										
		Та	ble I - Non	-Derivati	ve Securities Benefic	cially O	wned			
1. Title of Sec	urity (Instr. 4)	Та	ble I - Non	2	ve Securities Benefic 2. Amount of Securities Beneficially Owned (Instr. 1)	3. Owner Form: E (D) or Ir (I) (Instr	ership 4 Direct C	4. Nature of Indire Ownership (Instr.		
1. Title of Sec	urity (Instr. 4)		Table II - D	erivative	2. Amount of Securities Beneficially Owned (Instr.	3. Owner Form: D (D) or Ir (I) (Insti	ership 4 Direct C ndirect r. 5)			
	urity (Instr. 4)	(e.g.,	Table II - D	Perivative S, warrar	2. Amount of Securities Beneficially Owned (Instr. I) Securities Beneficia	3. Owner Form: I (D) or Ir (I) (Instributed Securities	ership 4 Direct C ndirect r. 5)	Ownership (Instr.		

Explanation of Responses:

No securities are beneficially owned.

/s/ Sagar Gupta

12/10/2024

** Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

 $^{^{\}star}$ If the form is filed by more than one reporting person, see Instruction 5 (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).