FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

						UI V	Section	1 30(11)	or tire	iiivesiii	ient C	ompany Act o	01 1940							
1. 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)					ssuer
Burkianu Michael														X	Direc	ctor		10% (Owner	
(Last)		(First) (1	Middle)		3. D	Date of Earliest Transaction (Month/Day/Year)							$\overline{}$	X		Officer (give title pelow)		Other below	(specify)
C/O FIVE9, INC. BISHOP RANCH 8, 4000						10/	10/17/2016									CE	CEO, President and Chairman			an
EXECUTIVE PARKWAY, SUITE 400																				
						- 4 If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable					
(Street) SAN RAMON CA 94583				""	T. II / Wild Market, Date of Original Filed (World Day/Teal)								Line) X Form filed by One Reporting Person							
JAN MAINON GA 34303															Form filed by More than One Reporting					
(City)		(State	e) (2	Zip)												Pers	on			
			Tabl	e I - N	on-Deriv	ative	Sec	uritie	s Ac	quire	d, Di	sposed o	f, or B	enefic	ially	Owne	ed			
Date				2. Transact Date (Month/Day		Execution Date			3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a			and 5) Secu Bene Own		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			action(s) 3 and 4)			(Instr. 4)
Common Stock 10/1				10/17/2	2016						24,000	D	\$14.1	L4 ⁽¹⁾	125,500			I	The Burkland Family Revocable Trust	
Common Stock													95		953,000		D			
			Та	ble II								osed of, convertib				wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercis Price of Derivative Security	on E	3. Transaction Date (Month/Day/Year)	Executi if any			ransaction ode (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		e Exerc ation D h/Day/		7. Title and Amount of Securities Underlying Derivative Security (Instrand 4)		Dei Sed (Ins	Price of rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
							Code V		(A) (D)		isable	Expiration Date	Title	Number of Shares						

Explanation of Responses:

1. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$14.04 to \$14.24, 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.

Remarks

The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the Burkland Family Revocable Trust on March 14, 2016.

/s/ David Hill, attorney-in-fact 10/18/2016

** 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.