Instruction 1(b).

FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |
|-------------|------|-------|
|-------------|------|-------|

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

| OMB APPROVAL             |      |  |  |  |  |  |  |  |  |  |
|--------------------------|------|--|--|--|--|--|--|--|--|--|
|                          |      |  |  |  |  |  |  |  |  |  |
| OMB Number: 3235-02      |      |  |  |  |  |  |  |  |  |  |
| Estimated average burden |      |  |  |  |  |  |  |  |  |  |
| hours per response       | . 05 |  |  |  |  |  |  |  |  |  |

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*  Alexy Kimberly |   |          |         |   | 2. Issuer Name <b>and</b> Ticker or Trading Symbol Five9, Inc. [ FIVN ] |  |              |  |        |           |   |  |                   |   | ationship<br>k all app<br>Direc                                    | ,  | ng Per  | son(s) to Is  |            |  |
|--|---|----------|---------|---|---|--|--------------|--|--------|-----------|---|--|-------------------|---|--|--|---|---------------|------------|--|
| (Last)   | `   | rst) (M  | Middle) |   |   | 3. Date of Earliest Transaction (Month/Day/Year) 05/18/2022                                |              |  |        |           |   |  |                   | A   |  | er (give title                               |   | Other (below) |            |  |
| 3001 BISHOP DR., STE. #350                               |   |          |         |   |   | 4. If Amendment, Date of Original Filed (Month/Day/Year)                                   |              |  |        |           |   |  |                   | 6. Individual or Joint/Group Filing (Check Applicable Line)             |  |  |   |               |            |  |
| (Street)<br>SAN RA                                       | MON C   | A 9      | 4583    |   |   |  |              |  |        |           |   |  | X                 | •   |  |  |   |               |            |  |
| (City)   | (S  | rate) (Z | Zip)    |   |   |  |              |  |        |           |   |  |                   |   |  |  |   |               |            |  |
|  |   | Table    | I - Nor | n-Deriva  | tive S  | Secu   | rities       | Acq  | uired, | Dis       | oosed of                                  | , or B   | Benef             | icially   | / Own  | ed   |   |               |            |  |
| 1. Title of Security (Instr. 3)  2. Transa Date (Month/D |   |          |         | Execution D   |   | Date,  | Code (Instr. |  |        |           |   | , 4 and Secur<br>Benef   |                   | cially<br>Following   | Form   | nership<br>: Direct<br>· Indirect<br>str. 4) | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |               |            |  |
|  |   |          |         |   |   |  |              |  | Code   | v         | Amount                                    | Amount (A) or (D)  |                   | rice  | Transaction(s)<br>(Instr. 3 and 4)                                 |  |   |               | (11311. 4) |  |
| Common Stock 05/18/2                                     |   |          |         |   | /2022   |  |              | A  |        | 2,132 A   |   | \  | \$ <mark>0</mark> | 11,117  |  |  | D   |               |            |  |
|  |   | Tal      |         |   |   |  |              |  |        |           | sed of, onvertib                          |  |                   |   | Owne   | d  |   |               |            |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)      | privative conversion or Exercise (Month/Day/Year) Frice of Derivative Security  Execution Date, if any (Month/Day/Year) |          |         | ansaction of United Health of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) |   | 6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Expiration Exercisable Date |              | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>Security (Ins<br>3 and 4) |        | De Se (In | Price of<br>rivative<br>curity<br>str. 5) | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 4) |                   | 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) |  |   |               |            |  |

**Explanation of Responses:** 

## Remarks:

/s/ David Hill, attorney-in-fact 05/20/2022

\*\* Signature of Reporting Person

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.

<sup>\*</sup> If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).