FORM 4

# **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

#### Washington, D.C. 20549

**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).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

#### 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

Name and Address of Reporting Person*						2. Issuer Name <b>and</b> Ticker or Trading Symbol Five9, Inc. [ FIVN ]								Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Burkland Daniel P.						TIVE, IIIC. [ PIVIN ]									Direc	tor		10% Ov	vner
(1						Date of Earliest Transaction (Month/Day/Year)								Off be		er (give title /)	(give title Othe below		specify
(Last) (First) (Middle) C/O FIVE9, INC.						09/04/2024								Pres. & Chief Revenue Officer					
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) SAN RAMON CA 94583														1	Form filed by One Reporting Person				on
SAIN KAIMOIN CA 94383															Form filed by More than One Reporting Person				
(City)	(St	ate) (Z	Zip)																
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transaction Date						Execution Date,			3. 4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4					and 5) Securities		ties	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect
[				(Month/Day/Year)		if any (Month/Day/Year)		Code (Instr. 8)						Beneficially Owned Following Reported		Beneficial Ownership			
									Code	v	Amount	(A) or (D)	Price		Transa	rted action(s) 3 and 4)			(Instr. 4)
Common Stock 09/04/202					24				S		3,628(1)(2)	D	\$30.	).57 <sup>(3)</sup> 1		8,926	Ι	)	
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
				(e.g., pu	ıts, ca	alls, v	varra	ants	, opti	ons,	convertib	le se	curities	s) 					
1. Title of Derivative Security (Instr. 3)	e Conversion Date Execution or Exercise (Month/Day/Year) if any		ition Date, Tran		of Of Der Sec Acc (A) Dis of (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisabl Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		Der	rice of ivative urity tr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownersh Form: Direct (D or Indire (I) (Instr.	wnership orm: rect (D) Indirect	Beneficial Ownership tt (Instr. 4)	
					Code	v	(A)	(D)	Date Exerc	cisable	Expiration Date	Title	Amount or Number of Shares						

### Explanation of Responses:

- 1. The reported sales were to cover taxes upon the vesting of restricted stock units.
- 2. The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on March 13, 2024.
- 3. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$30.21 to \$30.67, 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:

/s/ Leena Mansharamani, **Attorney in Fact** 

09/06/2024

\*\* 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.