## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

<b>STATEMENT</b>	OF CHANGES	S IN BENEFICIA	L OWNERSHIP

	OMB APPROVAL							
	OMB Number:	3235-0287						
l	Estimated average burd	en						
l	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*  Burkland Michael						2. Issuer Name <b>and</b> Ticker or Trading Symbol Five9, Inc. [ FIVN ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Burkland Michael					X Dire									ctor	10% Owner		Owner		
(Last)		First)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year)							$\dashv$	X	Offic belov	er (give title v)	!	Other below	(specify )	
C/O FIV	E9, INC.	BISHOP RANG	CH 8, 400	0	12/	12/19/2016									CE	CEO, President and Chairman			an
EXECUTIVE PARKWAY, SUITE 400				4 If	A If Amandment Date of Original Filed (Atanta Day No. )									6 Individual or Joint/Croup Filing (Check Applicable					
(Street)					4. "	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
SAN RA	MON	CA	94583												X Form filed by One Reporting Person				
			5 1505													Form filed by More than One Reporting			
(City)		Ctoto)	(7in)												Person				
(City)		State)	(Zip)																
		Ta	able I - N	on-Deriv	ative	Seci	uritie	s Ac	quire	d, Di	sposed o	f, or B	enefic	ially	Owne	ed			
			2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			id 5)	5. Amount of Securities Beneficially Owned 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			12/19/2016					S		3,700	D	\$14.0	\$14.02(1)		77,500		I	The Burkland Family Revocable Trust	
Common Stock													9!		953,000		D		
			Table II								osed of, convertib				wned			<u> </u>	
1. Title of Derivative Security (Instr. 3)	conversion or Exercise Price of Derivative Security  Date (Month/Day/Year)  Execution Date, if any (Month/Day/Year)		4. Transa Code (I 8)				6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Expiration Page 1			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)  Amount or Number of Title		nt er		9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	y G	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

## **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 \$14.00 to \$14.03, 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 12/20/2016

\*\* Signature of Reporting Person

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.