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Five9, Inc. Form 4											
November 1	7. 2016										
FORM	Л	отатро	SECU			CILA	NCEO	OMMESION	r	APPROVAL	
Washington, D.C. 20549									OMB Number:	3235-0287	
Check the if no long	ter								Expires:	January 31 2005	
subject to STATEMENT OF CHANGE Section 16. SE Form 4 or					RITIES				Estimated burden ho response.	d average ours per	
Form 5 obligations may continue. See Instruction 1(b). Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940											
(Print or Type I	Responses)										
Burkland Michael Symbol				er Name an e Inc. [FIV]		Tradi	ng	5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (I	Middle)	3. Date o	of Earliest T	ransaction			(Check all applicable)			
				/Day/Year)				_X_ Director 10% Owner _X_ Officer (give title Other (specify below) below) CEO, President and Chairman			
(Street) 4. If Ame				endment, Date Original				6. Individual or Joint/Group Filing(Check			
SAN RAMO	ON, CA 94583		Filed(Mo	nth/Day/Yea	r)			Applicable Line) _X_ Form filed by 0 Form filed by M Person			
(City)	(State)	(Zip)	Tab	le I - Non-l	Derivative	Secur	rities Acq	uired, Disposed o	f, or Beneficia	ally Owned	
1.Title of Security (Instr. 3)	2. Transaction Date 2A. Deem (Month/Day/Year) Execution any (Month/D		Date, if	Code (Instr. 8)	4. Securities Acquired on(A) or Disposed of (D) (Instr. 3, 4 and 5) (A) or			5. Amount of Securities6.BeneficiallyForm:OwnedDirect (D)Followingor IndirectReported(I)Transaction(s)(Instr. 4)(Instr. 3 and 4)(Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	11/15/2016			Code V S	Amount 24,000	(D) D	Price \$ 14.97 (1)	101,500	I	The Burkland Family Revocable Trust	
Common Stock								953,000	D		

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

Persons who respond to the collection of
information contained in this form are not
required to respond unless the formSEC 1474
(9-02)

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displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. 6. Date Exercisable orNumber Expiration Date of (Month/Day/Year) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,		ate	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
			Code V	4, and 5) (A) (D)	Date Exercisable	Expiration Date	Amount or Title Number of Shares		

Reporting Owners

Reporting Owner Name / Address		Relationships							
	Director	10% Owner	Officer	Other					
Burkland Michael C/O FIVE9, INC. BISHOP RANCH 8, 4000 EXECUTIVE PARKWAY, SUITE 400 SAN RAMON, CA 94583) X		CEO, President and Chairman						
Signatures									
/s/ Barry Zwarenstein, attorney-in-fact	11/17/2016								
**Signature of Reporting Person	Date								
Explanation of Response	es:								

- * 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).

The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from

\$14.17 to \$15.43, 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 Revoc

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.