Five9, Inc. Form 3 April 03, 2014

## FORM 3

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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 Responses)

1. Name and Address of Reporting 2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol Person \* Statement Five9, Inc. [FIVN] À Mosaic Venture Partners II (Month/Day/Year) Limited Partnership 04/03/2014 (First) (Last) (Middle) 4. Relationship of Reporting 5. If Amendment, Date Original Person(s) to Issuer Filed(Month/Day/Year) 6300 NORTHAM DRIVE,Â (Check all applicable) (Street) 6. Individual or Joint/Group Filing(Check Applicable Line) \_\_X\_\_ 10% Owner Director Form filed by One Reporting Officer Other Person (give title below) (specify below) MISSISSAUGA, \_X\_ Form filed by More than One ONTARIO. A6Â L4V 1H7 Reporting Person (City) (State) (Zip) Table I - Non-Derivative Securities Beneficially Owned 4. Nature of Indirect Beneficial 1. Title of Security 2. Amount of Securities Beneficially Owned Ownership Ownership (Instr. 4) (Instr. 5) (Instr. 4) Form: Direct (D) or Indirect (I) (Instr. 5) Â  $D^{(1)}$ Common Stock 6,307,484 Reminder: Report on a separate line for each class of securities beneficially SEC 1473 (7-02) owned directly or indirectly. Persons who respond to the collection of information contained in this form are not

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

required to respond unless the form displays a

currently valid OMB control number.

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative	5. Ownership Form of Derivative Security:	6. Nature of Indirect Beneficial Ownership (Instr. 5)
		Title	Security	Direct (D)	

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Date Expiration Amount or or Indirect
Exercisable Date Number of (I)
Shares (Instr. 5)

### **Reporting Owners**

Reporting Owner Name / Address	Relationships			
toporting of the remaining of the remain	Director	10% Owner	Officer	Other
Mosaic Venture Partners II Limited Partnership 6300 NORTHAM DRIVE MISSISSAUGA, ONTARIO, A6 L4V 1H7	Â	ÂX	Â	Â
Samuel David G. C/O BIRCH HILL EQUITY PARTNERS 100 WELLINGTON ST, W. SUITE 2300, PO BOX 22 TORONTO, ONTARIO, A6 M5K 1A1	Â	ÂX	Â	Â
1369904 Ontario, Inc. C/O MOSAIC VENTURE PARTNERS II, L.P. 6300 NORTHAM DRIVE MISSISSAUGA, ONTARIO, A6 L4V 1H7	Â	ÂX	Â	Â
Lobo Vernon F C/O MOSAIC VENTURE PARTNERS II, L.P. 6300 NORTHAM DRIVE MISSISSAUGA, ONTARIO, A6 L4V 1H7	Â	ÂX	Â	Â

## **Signatures**

/s/ Vernon Lobo, authorized signatory of 1369904 Ontario Inc., the general partner of the Reporting Person				
	**Signature of Reporting Person	Date		
/s/ Frances Dea, attorney-in-fact		04/03/2014		
	**Signature of Reporting Person	Date		
/s/ Vernon Lobo, authorized signatory of the Reporting Owner				
	**Signature of Reporting Person	Date		
/s/ Vernon Lobo		04/03/2014		
	**Signature of Reporting Person	Date		

# **Explanation of Responses:**

- \* If the form is filed by more than one reporting person, see Instruction 5(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).
- Mosaic Venture Partners II, Limited Partnership ("Mosaic") is the record owners of these shares. 1369904 Ontario, Inc. ("Ontario"), as the general partner of Mosaic, has voting and investment control of the shares held by Mosaic. David Samuel and Vernon Lobo are Managing Directors of Ontario and may be deemed to share voting and investment power with respect to the shares held by Mosaic. Mr. Samuel and Mr. Lobo disclaim beneficial ownership of all shares held by Mosaic except to the extent of their pecuniary interest therein.

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#### **Remarks:**

Exhibit List

Reporting Owners 2

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### Exhibit 24 - Limited Power of Attorney

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.