## FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

| Check this box if no longer subject to |
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| Section 16. Form 4 or Form 5           |
| obligations may continue. See          |
| Instruction 1(b).                      |

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

**OMB APPROVAL** OMB Number: Estimated average burden hours per response: 0.5

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*  BLAKE KATRYN  (Last) (First) (Middle)  C/O CIMPRESS  95 HAYDEN AVENUE |  |  |  |            |                         | Issuer Name and Ticker or Trading Symbol CIMPRESS N.V. [ CMPR ]  3. Date of Earliest Transaction (Month/Day/Year) 08/14/2015 |   |       |       |                                    |               |  |   |     |  | Relationship of Reporting Person(s) to Issuer leck all applicable) Director Difficer (give title X Other (specify below)  Person, Vistaprint Business Unit / Member of Management Board |   |  |  |  |  |
|---|--|--|--|------------|-------------------------|--|---|-------|-------|------------------------------------|---------------|--|---|-----|--|---|---|--|--|--|--|
| (Street) LEXINGTON MA 02421  (City) (State) (Zip)   |  |  |  |            | - 08/                   | 4. If Amendment, Date of Original Filed (Month/Day/Year) 08/14/2015  |   |       |       |                                    |               |  |   |     |  | Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person                                      |   |  |  |  |  |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned                                |  |  |  |            |                         |  |   |       |       |                                    |               |  |   |     |  |   |   |  |  |  |  |
| 1. Title of Security (Instr. 3)  2. Transac Date (Month/Da  |  |  |  |            |                         | ear)   i   | 2A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) |       | '     | 3.<br>Transac<br>Code (Ir<br>8)    |               | 4. Securities Acquired (A)<br>Disposed Of (D) (Instr. 3, 4<br>5) |   |     |  | 5. Amou<br>Securitie<br>Benefici<br>Owned F<br>Reporte  | es Fo<br>ally (D)<br>Following (I)  |  | : Direct<br>r Indirect<br>str. 4)  | 7. Nature of Indirect Beneficial Ownership                         |  |
|   |  |  |  |            |                         |  |   |       |       | Code                               | v             | Amount   | (A)<br>(D)  | or  | Price                                  | Transaci<br>(Instr. 3   | tion(s)   |  |  | instr. 4)  |  |
| Ordinary Shares 08/14/  |  |  |  |            |                         | 2015   |   |       |       | M <sup>(1)</sup>                   |               | 1,470  | 1,470 A   |     | \$0.00(1                               | ) 15  | 15,418  |  | D  |  |  |
| Ordinary Shares 08/14/  |  |  |  |            | 4/201                   | 5  |   |       |       | F                                  |               | 693  | I   | )   | \$70.24                                | 14,725(2)   |   |  | D  |  |  |
|   | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |  |  |            |                         |  |   |       |       |                                    |               |  |   |     |  |   |   |  |  |  |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)   | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security  | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deeme<br>Execution<br>if any<br>(Month/Day | d<br>Date, | 4.<br>Transa<br>Code (I |  | 5. Number of  |       | 6. Ex | Date Exe<br>piration I<br>onth/Day | rcisa<br>Date | ble and  | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative Secur<br>(Instr. 3 and 4) |     | ecurity                                | 8. Price of<br>Derivative<br>Security<br>(Instr. 5)   | 9. Number<br>derivative<br>Securities<br>Beneficial<br>Owned<br>Following<br>Reported<br>Transactio<br>(Instr. 4) | Owr<br>Forr<br>Dire<br>or Ir<br>(I) (I | 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) |  |
|   |  |  |  |            | Code                    | v  | (A)   | (D)   | Dai   | te<br>ercisable                    |               | Expiration<br>Date   | Title   | 0 N | Amount<br>or<br>Number<br>of<br>Shares |   |   |  |  |  |  |
| Restricted<br>Share<br>Units<br>(right to   | \$0.00 <sup>(1)</sup>  | 08/14/2015                                 |  |            | М                       |  |   | 1,470 | 05/   | /14/2015 <sup>(</sup>              | (3)           | 05/14/2018   | Ordina<br>Share   |     | 1,470                                  | \$0.00  | 16,179  | )                                      | D  |  |  |

### **Explanation of Responses:**

- 1. The shares acquired represent the number of shares that automatically vested pursuant to a grant of restricted share units. Each restricted share unit represents Cimpress' commitment to issue one ordinary
- 2. This amendment is being filed to correct the number of securities beneficially owned following the reported transactions.
- 3. These restricted share units vest over a four year period: 25% of the original number of shares vest one year after the date of grant and 6.25% vest per quarter thereafter.

# Remarks:

/s/Kathryn L. Leach, as attorney-in-fact for Katryn

08/14/2015

**Blake** 

\*\* 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.