FORM 4

UNITED S

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

STATES SECURITIES AND EXCHANGE COMMISSION

	OMB APPROVAL				
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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.

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* <u>Gasperment Sophie</u>		Person*	2. Issuer Name and Ticker or Trading Symbol CIMPRESS plc [CMPR]		5. Relationship of Reporting Person(s) to Issuer (Check all applicable)		
				1	Director	10% Owner	
		(Middle) OOR BUILDING 3 FECHNOLOGY PARK	3. Date of Earliest Transaction (Month/Day/Year) 11/15/2024		Officer (give title below)	Other (specify below)	
(Street) DUNDALK, COUNTY LOUTH, IRELAND			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indivi	l <u>-</u>		
(City)	(State)	(Zip)					

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 2. Transaction 2A. Deemed 7. Nature 5. Amount of 6. Ownership 1. Title of Security (Instr. 3) **Execution Date** Transaction Securities Form: Direct of Indirect if any (Month/Day/Year) Code (Instr. 8) Beneficially Owned Following (Month/Day/Year) Beneficial (I) (Instr. 4) Ownership Reported (Instr. 4) Transaction(s) (Instr. 3 and 4) Code ν Amount Price 11/15/2024 M **\$0**(1) 1,997 D Ordinary Shares A 351 11/15/2024 M 1.128 **\$0**(1) 3.125 D **Ordinary Shares** Α 11/15/2024 M 494 A **\$0**(1) D **Ordinary Shares** 3.619 11/15/2024 F 949 D \$80.48 2,670 D **Ordinary Shares**

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) 6. Date Exercisable and 11. Nature 1. Title of 3. Transaction 3A. Deemed 5. Number 7. Title and 8. Price of 9. Number of 10. Expiration Date (Month/Day/Year) Amount of Securities Underlying Derivative Derivative Conversion Date **Execution Date** Transaction derivative Ownership of Indirect Code (Instr. 8) (Month/Day/Year) Form: Direct (D) Security (Instr. 3) or Exercise if any (Month/Day/Year) Derivative Security (Instr. 5) Securitie Securities Beneficially Ownership Acquired (A) or Disposed Derivative **Derivative Security** Owned or Indirect (Instr. 4) Security (Instr. 3 and 4) Following (I) (Instr. 4) Reported of (D) (Instr. 3, 4 Transaction(s) (Instr. 4) and 5) Amount Number Expiration (A) (D) Exercisable Title Shares Restricted Share Ordinary **\$0**⁽¹⁾ Units 11/15/2024 M 351 11/15/2022(2) 11/15/2025 351 \$<mark>0</mark> 351 D (right to acquire) Restricted Share Ordinary

11/15/2023(2)

11/15/2024(2)

11/15/2026

11/15/2027

1,128

494

Explanation of Responses:

\$0⁽¹⁾

\$0⁽¹⁾

- 1. The shares acquired represent the number of shares that automatically vested pursuant to an award of restricted share units (RSUs). Each RSU represents Cimpress' commitment to issue one ordinary share.
- 2. These RSUs vest over a four year period: 25% of the original number of shares vest on the Date Exercisable in Table II and 25% vest per year thereafter.

M

M

Remarks:

Units

Units

(right to acquire)

(right to acquire) Restricted Share

> /s/ Matthew F. Walsh, as attorney-in-fact for Sophie

1,128

494

\$0

\$0

11/19/2024

2,255

1,481

D

D

Gasperment

Ordinary

** Signature of Reporting Person

Date

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

11/15/2024

11/15/2024

^{*} 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.