FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

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| 1. Name and Address of Reporting Person [*] Nelson Donald R (Last) (First) (Middle) C/O CIMPRESS 275 WYMAN STREET | | | 2. Issuer Name and Ticker or Trading Symbol <u>CIMPRESS N.V.</u> [CMPR] 3. Date of Earliest Transaction (Month/Day/Year) 11/30/2015 | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title X Other (specify below) Chief Operating Officer / Member of Management Board | | | | |
|--|---------------|----------------|---|---|--|--|--|--|
| (Street) WALTHAM (City) | MA (State) | 02451 (Zip) | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. 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. Transaction Date (Month/Day/Year) | | | ction Instr. | | | | Securities Beneficially | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
|---------------------------------|--|--|------|-----------------|--------|---------------|------------------------------|------------------------------------|---|---|--|
| | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (1130.4) | |
| Ordinary Shares | 11/30/2015 | | М | | 884(1) | Α | \$0.00 ⁽²⁾ | 39,689 | D | | |
| Ordinary Shares | 11/30/2015 | | F | | 417 | D | \$90.92 | 39,272 | D | | |

 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) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transa Code (8) | | of Deriv Secu Acqu (A) or Dispo of (D) | nr osed)) r. 3, 4 | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
|---|---|--|---|------------------------------|---|--|-----------------------------|---------------------------|--|--------------------|---|--|--|--|--|
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |
| Restricted Share Units (right to acquire) | \$0.00⁽²⁾ | 11/30/2015 | | М | | | 884 | 05/31/2014 ⁽³⁾ | 05/31/2017 | Ordinary Shares | 884 | \$0.00 | 5,304 | D | |

Explanation of Responses:

1. The shares acquired represent the number of shares that automatically vested pursuant to a grant of Restricted Share Units ("RSUs").

2. Each restricted share unit represents Cimpress' commitment to issue one ordinary share.

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 Donald Nelson

12/01/2015

** 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.