FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

l	OMB APPRO	OVAL
	OMB Number:	3235-0287
l	Estimated average burd	en
l	hours per response:	0.5

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

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>Cebula Wendy M</u>				2. Issuer Name and Ticker or Trading Symbol VISTAPRINT N.V. [VPRT]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X Officer (give title X Other (specify							
(Last) (First) (Middle) VISTAPRINT, 95 HAYDEN AVENUE						3. Date of Earliest Transaction (Month/Day/Year) 07/01/2010								President, Vistaprint N.A. / Member of Management Board					
(Street) LEXING (City)			02421 (Zip)		4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)							Line	Individual or Joint/Group Filing (Check Applicable ne) 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																			
Date			2. Transa Date (Month/D		Execution Date		on Date,	Code (I	Transaction Disposed Of (D) (Instr. 3, 4)					Form: Direct		7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) or (D)	Price	Transac (Instr. 3	tion(s)			(Instr. 4)	
Ordinary Shares 07/01/2				/2010	010		М		7,500	A	\$23.3	1 18,163			D				
Ordinary Shares 07/01/2				/2010	10		S		6,400	D	\$46.46	⁽¹⁾ 18,163			D				
Ordinary Shares 07/01/2				/2010	.010		S		1,100	D	\$47.36	(2) 18	,163		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	Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transactio Code (Inst 8)		on of		6. Date Exercisa Expiration Date (Month/Day/Yea		e	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	e S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				c	Code	v	(A)		Date Exercisal	ole	Expiration Date	Title	Amount or Number of Shares						
Share option (right to	\$23.31	07/01/2010			M			7,500	08/01/200	9 ⁽³⁾	08/04/2016	Ordinary Shares	7,500	\$0.00	19,000	0	D		

Explanation of Responses:

- 1. The price range for sales of these shares was between \$46.18 and \$47.06 per share. Upon appropriate request, the reporting person will provide full information regarding the number of shares sold at each separate price.
- 2. The price range for sales of these shares was between \$47.27 and \$47.55 per share. Upon appropriate request, the reporting person will provide full information regarding the number of shares sold at each separate price.
- 3. This share option vests over a four-year period: On the first anniversary of the grant date, 25% of the number of shares originally granted vest, and 6.25% of the original number of shares vest per quarter thereafter.

Remarks:

The transactions reported on this Form 4 were effected pursuant to a 10b5-1 trading plan adopted by the reporting person on February 18, 2010.

/s/Kathryn L Leach, as attorney-in-fact for Wendy M 07/02/2010 **Cebula**

** 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.