FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPRO	OVAL							
	OMB Number:	3235-0287							
l	Estimated average burden								
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

							. ,				<u>'</u>											
Name and Address of Reporting Person* Quinn Sean Edward							2. Issuer Name and Ticker or Trading Symbol CIMPRESS N.V. [CMPR]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
<u>Quinn S</u>	<u>sean Edw</u>	<u>ard</u>			1	CHAIR TODO IV. V. [CIVII IV]										Direc	ctor	10	% O	wner		
,		-										X Office below		er (give title v)		Other (specify below)						
(Last) (First) (Middle)							3. Date of Earliest Transaction (Month/Day/Year)									EX	,					
C/O CIM	PRESS	10/	10/02/2017									EVP, Chief Financial Officer										
275 1437	MANI CTDI																					
275 WYMAN STREET																						
							4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable						
(Street)														٦٢	Line)							
WALTHAM MA 02451																X Form filed by One Reporting Person						
WALITIAW WA 02451				_											Form filed by More than One Reporting Person							
																reis	OII					
(City)	(St	ate) (Zip)																			
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																						
1. Title of Security (Instr. 3) 2. Transac							ction 2A. Deemed				3. 4. Securities Acquired (A)					5. Amo	ount of	6. Ownersh	р	7. Nature		
	(,		Date		ay/Year) Execution Date, if any (Month/Day/Year)			Transaction Disposed Of (D) (Instr. 3, Code (Instr. 5)					nd			Form: Direc		of Indirect Beneficial Ownership			
				(Month/	Day/Yea								Benet		cially I Following	(D) or Indire (I) (Instr. 4)	ct					
						(Month/Day/Tear)					1			Reported `		(1) (111311. 4)		(Instr. 4)				
							Code	l۷	Amount		(A) or (D)) or Price		Transaction(s) (Instr. 3 and 4)								
0.11	C1		2/2045	(2017			-(1)		4.656	$\overline{}$	D 61		100 1500		. 500		\dashv					
Ordinary	Shares	2/2017				S ⁽¹⁾		1,659	9 D \$		\$1	1,526		1,526	D							
Table II. Devivative Convities Assuring Disposed of as Baneficially Outred																						
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																						
(e.g., puts, cails, warrants, options, convertible securities)																						
1. Title of	2.	3. Transaction	3A. Deem		4.	- 4 !			6. Date Expiratio					8. Price of		9. Number o			11. Nature			
Derivative Security	Conversion or Exercise	Date (Month/Day/Year)	Execution if any			Transaction Code (Instr.						Amount of Securities			Derivative Security		derivative Securities	Ownership Form:	nip	of Indirect Beneficial		
(Instr. 3)	Price of	(monanbayrrear)	(Month/Da	ay/Year)			Securities					Und	Underlying			r. 5)	Beneficially	Direct (Ownership		
	Derivative				· ' '		Acquired		Derivative					. [`		Owned	or Indire		(Instr. 4)			
Security							(A) or Disposed of (D) (Instr. 3, 4		Security (I and 4)					str. 3		Following Reported		(I) (Instr. 4)	· 4)			
										"			unu 4)				Transaction	(s)	_			
																	(Instr. 4)		_			
							and 5)								l				_			
													ount									
												or Nur	nber									
									Date		Expiration		of									
					Code	٧	(A)	(D)	Exercisal	ble	Date	Title	: Sha	res					_			

Explanation of Responses:

1. The transactions reported on this Form 4 were effected pursuant to a 10b5-1 trading plan adopted by the reporting person on March 14, 2017.

Remarks:

/s/Kathryn L. Leach, as attorney-in-fact for Sean E. 10/04/2017 Quinn

** 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.