Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SEC

Washington, D.C. 20549

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OMB APF	PROVAL					
OMB Number:	3235-028					

Filed p

T OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-0287			
	Estimated average burden				
ursuant to Section 16(a) of the Securities Exchange Act of 1934	hours per response:	0.5			
or Section 30(h) of the Investment Company Act of 1940					

transac contrac the pur securiti intende defense	chase or sale or es of the issue d to satisfy the	pursuant to a written plan for fequity that is																				
1. Name ar	nd Address of	Reporting Person*				2. Issuer Name and Ticker or Trading Symbol										5. Relationship of Reporting Person(s) to Issuer						
<u>Temper</u>	ley Dess	<u>islava</u>			<u>CI</u>	CIMPRESS plc [CMPR]										(Check all applicable) Director 10% Owner						
,					-								'	Officer	(give title		Other (s	pecify				
(Last)	,	,	Middle)		3. [3. Date of Earliest Transaction (Month/Day/Year)									7	below)			below)			
		IRST FLOOR B				09/15/2024																
FINNAE	SAIR BUSI	NESS & TECHN	NOLOGY	PARK																		
(Street)					4. I	f Ame	ndmen	t, Date	of O	riginal Fi	led ((Month/Da	ıy/Year)			6. Individual or Joint/Group Filing (Check Applicable						
DUNDA																Line) Form filed by One Reporting Person						
COUNT LOUTH.						Form filed by More than One Reporting																
IRELAN						Person																
,					-																	
(City)	(Si	ate) (Zip)																			
		Tab	le I - Nor	n-Deriv	vative	e Se	curiti	es A	cqui	ired, D	isp	osed o	f, or E	ene	ficial	y Owned						
1. Title of S	Security (Inst	r. 3)		2. Trans	saction		2A. Dec			3.		4. Securi				5. Amou				. Nature		
				Date (Month	/Day/Ye	ear)	Executi if any (Month		· 1	Transact Code (In: 8)		Disposed 5)	1 OT (U) (instr.	3, 4 and	Benefici	ally following	(D) o	or Indirect (Instr. 4)	of Indirect Beneficial Ownership Instr. 4)		
										Code	′	Amount	(A) (D)	or	Price	Transact (Instr. 3	ion(s)			msu. 4)		
Ordinary Shares 09/					5/202	4				M		436	.	4	\$0 (1)	1,	890		D			
Ordinary Shares 09/15					5/202	4				F		210)	\$82.6	5 1,	580		D			
		Т	able II -	Deriva	tive	Seci	uritie	s Ac	quir	ed, Dis	spo	sed of,	or Be	nefi	cially	Owned			J.			
				(e.g., p	outs,	call	s, wa	rrant	s, o	ptions	, co	onvertil	ole se	curit	ties)							
1. Title of Derivative Security 2. Conversion or Exercise Price of Derivative Security 3. Transaction Date Execution Date if any (Month/Day/Year) 3. Transaction Date (Month/Day/Year) (Month/Day/Year) (Month/Day/Year)				Date,	4. Transaction Code (Instr. 8)				6. Date Exercisable and Expiration Date (Month/Day/Year)				7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	i i illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code V (A) (D) Exercisable Date							xpiration ate	Title	Or No	umber								
Restricted Share Units (right to acquire)	\$0 ⁽¹⁾	09/15/2024			М			436	09/1	5/2022 ⁽²⁾	09	9/15/2025	Ordinar Shares		436	\$0	435		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). 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.

Remarks:

/s/Kathryn L. Leach, as attorney-in-fact for Dessislava 09/16/2024

Temperley ** Signature of Reporting Person

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.