FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | | |
|----------------------|----------|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-028 | | | | | | | | |
| Estimated average by | ırdon | | | | | | | | |

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

| OIVID APPROVAL | | | | | | | | |
|--------------------------|--|--|--|--|--|--|--|--|
| 3235-0287 | | | | | | | | |
| Estimated average burden | | | | | | | | |
| 0.5 | | | | | | | | |
| | | | | | | | | |

| 1. Name an Hansen | | 2. Issuer Name and Ticker or Trading Symbol VISTAPRINT N.V. [VPRT] | | | | | | | | | all app Direct Office | er (give title | v | 10% C | wner (specify | | | | |
|--|--|--|--|------|------------------------------|---|---|--|---|---|---|----------------|------------------|--|---|--|---|--|----|
| (Last) (First) (Middle) VISTAPRINT, 95 HAYDEN AVENUE | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 08/09/2013 | | | | | | | | - X Onlicer (give line X Onlier (specify below) Chief Manufacturing Officer / Member of Management Board | | | | | |
| (Street) LEXING (City) | | |)2421 Zip) | | 4. If | 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. Transacti Date (Month/Day | | | | | | Execution [| | Date, | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4 a | | | and 5) Secui Benet | | cially d Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | | Code | v | Amount | (A) c (D) | (A) or (D) Price | | Transa | action(s) 3 and 4) | | | ,, |
| Ordinary | ordinary Shares 08/09/ | | | 2013 | 013 | | S | | 2,600 | | \$55. | .36(1) | | 8,511 | 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) | th/Day/Year) Execution Date, if any C (Month/Day/Year) 8 | | 4. Transa Code (8) | (Instr. Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) Date Exercisable Expiration Date | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amoun or Numbe of Title Shares | | | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Owner Form Direct or Inc (I) (In | | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |

Explanation of Responses:

1. The price range for sales of these shares was between \$55.28 and \$55.47 per share. Upon appropriate request, the reporting person will provide full information regarding the number of shares sold at each separate price.

Remarks:

/s/Kathryn L. Leach, as attorney-in-fact for Hauke

08/12/2013

Hansen

** 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.