FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Nashington,	D.C.	20549	

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average	burden								
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*  GAVIN JOHN J JR					2. Issuer Name <b>and</b> Ticker or Trading Symbol CIMPRESS plc [ CMPR ]									heck all a	pplic	able)	g Pers	son(s) to Iss				
GAVINJOIINJJK															X Di	ecto	or		10% Ov	vner		
, ,	<b>/-</b> :		· · · · · ·													icer ow)	(give title		Other (s	specify		
(Last)	•	rst)	(Middle)		3. D	3. Date of Earliest Transaction (Month/Day/Year)									be	Ow)			below)			
CIMPRE	SS PLC				08/	08/15/2020																
BUILDING D, XEROX TECHNOLOGY PARK																						
(Street)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable						
DUNDA	LK,													Li	Line)							
COUNT	Y														X Form filed by One Reporting Person							
LOUTH,	ı															rm fi rson		e thar	n One Repo	rting		
IRELAN	D														Pe	15011						
(City)	(S	tate)	(Zip)		-																	
		-	le I - Nor	n-Deriv	/ative	Sec	ruriti	ies Ar	nuire	d D	isnose	d 0	of or Re	neficia	IIv Ow	160	1					
			101			_			<del>-</del>		<del>-</del>		-						[			
1. Title of S	Security (Ins	tr. 3)		2. Transa Date	action		A. Dee xecuti	med on Date,	3. Trai	sactio			ies Acquir Of (D) (Ins			mou uritie				7. Nature of Indirect		
				(Month/I	h/Day/Year)		if any (Month/Day/Year		Code (Instr.		tr. 5)					Beneficially Owned Following				Beneficial Ownership		
						(wontingay)		(MOIIIII/Day/Teal)		_			1	_	Rep	Reported		(I) (Instr. 4)		(Instr. 4)		
									Cod	e V	Amo	unt	(A) o (D)	r Price		ransaction(s) Instr. 3 and 4)						
Ordinary Shares				08/15	5/2020				M		1,3	39(1	1) A	\$(		1,339		D				
Ordinary Shares 0			08/15	5/2020				F		(	43	D \$9		31	696		D					
Ordinary Shares															32.	,029			By			
Ordinary Stidies																	,023			Trust <sup>(2)</sup>		
		Т	able II -										or Ben ble sec		y Own	ed						
1. Title of	2.	3. Transaction	3A. Deeme		4.	Cans	·	umber	<u> </u>				7. Title ar		8. Price	of	9. Number	r of	10.	11. Nature		
Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative Security	Date (Month/Day/Year)	Execution if any (Month/Da	Date,	Transa Code ( 8)		on of		Expira	i. Date Exercisab :xpiration Date Month/Day/Year)		lu	Amount of Securities Underlyin Derivative (Instr. 3 a	of s ng e Security		erivative ecurity	derivative Securities Beneficiali Owned Following Reported Transactio (Instr. 4)	iy	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
					Code	de V		(D)	Date Exerci	sable	Expirat Date	on	Title	Amount or Number of Shares								
Restricted Share Units (right to acquire)	\$0.0 <sup>(1)</sup>	08/15/2020			M			1,339	08/15/	2020	08/15/2	)20	Ordinary Shares	1,339	\$0		0		D			

## Explanation of Responses:

- 1. Each restricted share unit represents Cimpress' commitment to issue one ordinary share.
- 2. These shares are owned by The CLG Trust of which the reporting person is a trustee. The inclusion of these shares in this report shall not be deemed an admission of beneficial ownership for purposes of Section 16 or any other purpose and the reporting person disclaims beneficial ownership of these shares except to the extent of his pecuniary interest therein.

## Remarks:

/s/Kathryn L. Leach as Attorney in Fact for John J.

08/17/2020

Gavin, Jr.

\*\* 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.