FORM 4

obligations may continue. See Instruction 1(b).

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, E	D.C. 20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Check this box if no longer subject to Section 16. Form 4 or Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

OMB APPROVAL								
OMB Number:	3235-0287							
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1. Name and Address of Reporting Person*  Weissman Kenneth Ian					2. Issuer Name <b>and</b> Ticker or Trading Symbol IMAX CORP [IMAX]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable)								
weissilali Keilleul lali							_		_							Directo			10% Ow	·			
															_		Officer below)	(give title		Other (s below)	pecify		
(Last)	(Fi	irst) (	(Middle)					Trans	action (	Mont	h/D	ay/Year)					,			,			
902 BROADWAY					06/10/2021										Sr VP & Corporate Secretary								
20TH FLOOR																							
201H FI	LOOK															C. Ladicidad on Taint/Course Filips (Obsola C. 1. 1.1.							
					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)										Individual or Joint/Group Filing (Check Applicable Line)							
(Street)															- 1	,	Form f	iled by One	e Ren	orting Person	n		
NEW Y	ORK N	<b>Y</b>	10010-60	02	1											, , ,							
					1											Form filed by More than One Reporting Person							
(City)	(S	tate) (	(Zip)																				
		Tabl	e I - Nor	1-Deriva	ative S	Secu	urities	AC	quirec	i, Di	sp	osed o	ot, o	r Ben	eticia	lly O	wne	t					
1. Title of Security (Instr. 3) 2. Transa Date					Execution Date								d S	Amou	es Forn		: Direct   c	7. Nature of Indirect					
0			(Month/Day/Year		if any (Month/Day/Yea		y/Year	Code (Instr.   5)		5)				0	Beneficially Owned Following		(I) (Instr. 4)		Beneficial Ownership				
									Code	e v		Amount		(A) or (D)		Reported Transact (Instr. 3 a		ion(s)			Instr. 4)		
common shares (opening balance)									$\top$					+		10,233(3)		233(3)		D			
		T	able II - I													y Ow	ned						
				(e.g., pı	uts, ca	ılls,	warra	ants,	, optic	ons,	CO	onvertil	ble	secur	ities)								
1. Title of Derivative Security (Instr. 3)	rivative Conversion Date Execution Date, curity or Exercise (Month/Day/Year) Execution Date, if any				4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)				Am Sec Und Der	Title and count of curities derlying rivative curity (In 14)	str. 3	Deriv Secu	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Codo		(4)		Date Eversion	-1-1-	Ex	epiration	Ti+1.	0 0	umber								

\$0.00(1)

 $1. \ Each \ restricted \ share \ unit \ is \ the \ economic \ equivalent \ of \ one \ common \ share \ of \ IMAX \ Corporation$ 

06/10/2021

2. The restricted share units vest and will be converted to common shares in three equal installments on each of March 7, 2022, March 7, 2023 and March 7, 2024.

1,706

3. This represents the number of restricted share units for this transaction only. Mr. Weissman's aggregate remaining outstanding option, restricted share unit and common share balances following these transactions will be 23,644; 22,294 and 10,233, respectively.

(2)

## Remarks:

restricted share units

/s/ Kenneth Ian Weissman

commoi shares

(2)

06/10/2021

1,706<sup>(3)</sup>

D

\*\* Signature of Reporting Person

1,706

\$0.00(1)

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.