FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
OMB Number:	3235-0287									
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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* <u>LEEBRON DAVID W</u>						2. Issuer Name and Ticker or Trading Symbol IMAX CORP [IMAX]							(Che	5. Relationship of Reporting (Check all applicable) X Director			Person(s) to Issuer		
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 06/09/2023								Officer (give title below)			Other (specify below)		
1701 HERMANN DR. SUITE 31G						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					
(Street) HOUSTON 77004						Form filed by More than One Reporting Person												ing	
(City)	(S	tate)	(Zip)		- R	Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a complete the affirmative defense conditions of Rule 10b5-1(c). See Instruction 1													
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						ar)	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Disposed Of			Beneficia Owned F	s Illy ollowing	Form	: Direct 0 Indirect 1 str. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) or (D)	Price	Reported Transacti (Instr. 3 a	on(s)			Instr. 4)	
common shares (opening balance)														108	,501		D		
common shares (opening balance)														1,3	1,300			oy spouse	
common shares 06/09/2						2023			M		6,778(1)	A	\$0.00(2	2) 115,279			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)	ve Conversion Date Execution D or Exercise (Month/Day/Year) if any		oate, Transaction					6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	derivative Securities Beneficia Owned Following Reported	e s ally	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisable		Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)				
restricted share units ⁽³⁾	\$0.00 ⁽²⁾	06/09/2023					6,778 ⁽⁴⁾		(5)		(5)	common shares	6,778	(2)	6,778		D		
restricted share units ⁽³⁾	\$0.00 ⁽²⁾	06/09/2023			M			6,778 ⁽¹⁾	(5)	(5)	common shares	6,778	(6)	0		D		

Explanation of Responses:

- 1. Represents the conversion upon vesting of restricted share units into common shares.
- 2. Each restricted share unit is the economic equivalent of one common share of IMAX Corporation.
- 3. Each restricted share unit represents a contingent right to receive one common share of IMAX Corporation.
- 4. Mr. Leebron received a grant of restricted share units in connection with his membership on the IMAX Corporation Board of Directors.
- 5. The restricted share units vest and convert to common shares on the date of grant, June 9, 2023.
- 6. Pursuant to Instruction 4(C)(iii), this response has been left blank.

Remarks:

/s/ David W. Leebron

06/13/2023

** 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.