FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL								
OMB Number:	OMB Number: 3235-0104							
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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* Brenek Jason 2. Date of Event Requiring Stateme (Month/Day/Year) 02/09/2015		nent	3. Issuer Name and Ticker or Trading Symbol IMAX CORP [IMAX]									
(Last) (First) (Middle) C/O IMAX CORPORATION					tionship of Reporting Perso all applicable) Director	10% Owner		5. If Amendment, Date of Original Filed (Month/Day/Year)				
12582 WEST MILLENNIUM (Street) PLAYA VISTA CA 90094					X	X Officer (give title below) Executive Vice Pr	Other (specify below) resident		6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State)	(Zip)										
Table I - Non-Derivative Securities Beneficially Owned												
1. Title of Security (Instr. 4)				2. Amount of Securities Beneficially Owned (Instr. 4) 3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		ct (D) (4. Nature of Indirect Beneficial Ownership (Instr. 5)					
common shares					0(1)	D						
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)												
1. Title of Derivative Security (Instr. 4) 2. Date Exercisable at Expiration Date (Month/Day/Year)		ate	Underlying Derivative Security (Instr. 4) Convor Ex		4. Conver or Exer Price of	rcise Form:		6. Nature of Indirect Beneficial Ownership (Instr. 5)				
			Date Exercisable	Expiration Date	n Title		Amount or Number of Shares	Derivat Securit	ive	Direct (D) or Indirect (I) (Instr. 5)		

Explanation of Responses:

1. Mr. Brenek became a senior Officer of IMAX Corporation on February 9, 2015. No IMAX securities are benefically owned

Remarks:

<u>Jason Brenek</u> <u>02/17/2015</u>

** 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 5 (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.