FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

ı	OMB APPROVAL									
	OMB Number:	3235-0287								
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	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* GELFOND RICHARD L							2. Issuer Name and Ticker or Trading Symbol IMAX CORP [IMAX]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
GELFUND RICHARD L																r		10% Ow	ner			
(Last) 110 EAS	0 EAST 59TH STREET					3. Date of Earliest Transaction (Month/Day/Year) 04/20/2015									X Officer (give title Other (specification) Chief Executive Officer							
							4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable						
Street) NEW YORK NY 10022					4. II Alliendinent, Date of Original Flied (World)/Day/Teal)									X Form filed by One Reporting Person Form filed by More than One Reporting Person								
(City)	(State)	(Zip)												reisuii							
		Та	ble I - N	on-Der	ivativ	/e Se	curi	ties Ac	quire	d, Di	sposed of	, or Bei	nefic	ially	Owned							
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/						Execution Date,		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a			nd 5)	Beneficially Owned Following		Form:	Direct I Indirect E str. 4)	7. Nature of ndirect Beneficial Dwnership				
									Code	v	Amount	(A) or (D)	Price		Reported Transacti (Instr. 3 a	ion(s)			Instr. 4)			
common shares															10,050			I	oy 'Claudia Gelfond Frust''			
common shares															10,	050		I	oy 'Pamela Gelfond Frust''			
common shares 04/20/20						015			С	П	34,606 ⁽¹⁾ A \$		\$1	8.38	3 150,963		D					
common shares 04/20/20)/2015)15			S		34,606	D	\$36	.3628	28 116,357		D					
			Table II	- Deriv	/ative	Sec	uriti	es Acai	uired.	Dist	osed of, o	or Bene	eficia	ally C	wned							
									-		convertib			-								
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transa Code (8)	action (Instr.	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expir	te Exer ation D th/Day/		7. Title and Amount of Securities Underlying Derivative Security (Instiand 4)			8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s	e S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exerc	cisable	Expiration Date	Title	or	ount nber res		(Instr. 4)	.51(3)					
stock options (to buy)	\$18.38	04/20/2015			С			34,606 ⁽¹⁾	((2)	12/31/2011	common shares	34,	606	\$18.38	100,000		D				

Explanation of Responses:

- 1. Stock options were exercised and sold as common shares pursuant to Rule 10b5-1 Sales Plan adopted on April 25, 2014. Mr. Gelfond's 10b5-1 Sales Plan is scheduled to terminate on April 22, 2015.
- 2. The stock options became exercisable in 2 installments:1,272 on September 1, 2013 and 33,334 on December 31, 2013.

Remarks:

Richard L. Gelfond

** Signature of Reporting Person

04/22/2015

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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.