FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden 0.5 hours per response:

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>GELFOND RICHARD L</u>					<u>1</u>	2. Issuer Name and Ticker or Trading Symbol IMAX CORP [IMAX]										able)	1	ner	
(Last) 110 EAS SUITE 2	Т 59TH ST	irst) REET	(Middle)				Date of Earliest Transaction (Month/Day/Year) /19/2011							X	below)	give title	Other (specify below)		pecify
(Street) NEW YO	DRK N	Y	10022	_	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line)	Individual or Joint/Group Filing (Check Applic Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S	itate)	(Zip)																
1. Title of Security (Instr. 3)			2. Tran	2. Transaction		2A. Deemed Execution Date,		3. Transaction Code (Instr.		4. Securiti	sed of, or Benefic Securities Acquired (A) o sposed Of (D) (Instr. 3, 4 a		or	5. Amount of Securities Beneficially Owned Following		6. Owners Form: Dire (D) or Indi (I) (Instr. 4	ct I ect E	7. Nature of Indirect Beneficial Ownership	
								Code	v	Amount	(A)	or F	rice	Reported Transaction (Instr. 3 au	on(s)			(Instr. 4)	
common s	shares			12/1	19/20)11			С		80,720	(2)	A	\$4.85	282,	370	D		
common s	shares			12/1	19/20)11			S		80,720	(2)	D :	\$20.23	201,	650	D		
common shares		12/20/2011)11			С	96,095		(2)	A	\$4.85	297,	745	D				
common s	shares			12/2	20/20)11			S		96,095	(2)	D :	\$20.14	201,	650	D		
common s	shares														10,050		I		oy 'Pamela Gelfond Frust"
common s	shares														10,0)50	I		oy 'Claudia Gelfond Frust"
common shares													108,	750	I		y 'Richard Gelfond IRA"		
			Table II -	Deriv	ativ	e Sed	curit Ils. v	ies Acqu varrants,	ired, [Disp	osed of,	or Be	nefic curiti	ially O	wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution D if any (Month/Day/	ate,	4. Transa Code (action	5. Number of Derivative		6. Date Exerci Expiration Dat (Month/Day/Ye		sable and	7. Title and Amof Securities Underlying Derivative Secu (Instr. 3 and 4)		nount	8. Price of Derivative Security (Instr. 5)	9. Numb derivativ Securitie Benefici Owned Followin Reporter	re Over Ses Fo Direction or (I)	nership m: ect (D) ndirect Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	e V	(A)	(D)	Date Exercisa		Expiration Date	Title		ount or ober of res		Transact (Instr. 4)	1011(2)		
stock options (to buy)	\$4.85	12/19/2011			С			80,720 ⁽²⁾	(1)		04/23/2012	commo		720(2)	\$4.85	191,2	80	D	
stock options (to buy)	\$4.85	12/20/2011			С			96,095 ⁽²⁾	07/01/20	003	04/23/2012	commo		095(2)	\$4.85	95,18	35	D	

Explanation of Responses:

- 1. 6,000 stock options became exercisable on July 1, 2002 and 74,720 stock options became exercisable on July 1, 2003.
- 2. 176,815 options scheduled to expire April 23, 2012 were exercised and shares sold pursuant to September 13, 2011 Amendment No. 1 to Rule 10b5-1 Sales Plan adopted on May 26, 2011. Mr. Gelfond's Sales Plan is scheduled to terminate on January 19, 2012.

Richard L Gelfond

12/21/2011

** 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.