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Form 4	RICHARD L									
January 03, FORN	ЛЛ	STATES	SECU	RITIES A	AND EXO	CHAN	IGE C	OMMISSION	OMB AF	PPROVAL
				shington					Number:	3235-0287
Check this box if no longer subject to Section 16. Form 4 or Form 5 Eiled pursuant				SECU		Expires: Estimated a burden hou response	•			
obligatio may cor <i>See</i> Insta 1(b).	ons Section 17(a) of the H	Public U		ding Con	npany	Act of	e Act of 1934, 1935 or Section 0	1	
(Print or Type	Responses)									
	Address of Reporting ORICHARD L	Person <u>*</u>	Symbol	er Name and		Trading	5	5. Relationship of Issuer	Reporting Pers	son(s) to
(Last)	(First) (I	IMAX CORP [IMAX] (Che Middle) 3. Date of Earliest Transaction						(Check	k all applicable)	
, , ,	DWAY, 20TH FI	,		Day/Year)	luisueton			Director Officer (give below)		Owner er (specify er
	(Street)			endment, Da nth/Day/Yea	-			6. Individual or Jo Applicable Line) _X_ Form filed by O Form filed by M	One Reporting Pe	rson
	K 10010-6002							Person		F 0
(City)	(State)	(Zip)	Tab	le I - Non-I	Derivative	Securit	ies Acq	uired, Disposed of	, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, if any (Month/Day/Year)			Code (Instr. 8)	4. Securiti on(A) or Dis (Instr. 3, 4	(A) or	of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
common shares (opening balance)				Code V	Amount	(D)	Price	168,703	D	
common shares								7,550	Ι	by "Pamela Gelfond Trust"
common shares								7,550	I	by "Claudia Gelfond Trust"

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common shares	01/01/2018	М	65,280 (1)	А	\$0	233,983	D
common shares	01/01/2018	F	36,604 (2)	D	\$ 23.15	197,379	D

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

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Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Ni	umber of	6. Date Exercis	sable and	7. Title and	Amount
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	TransactionDerivative		Expiration Date		of Underlying	
Security	or Exercise		any	Code	Secu	rities	(Month/Day/Year)		Securities	
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)					(Instr. 3 and 4)	
	Derivative				or Di	isposed of				
	Security				(D)					
					(Instr. 3, 4,					
					and 5)					
							Date Exercisable	Expiration Date	Title	Amount or Number
				Code V	(A)	(D)				of Shares
restricted share units (3)	\$ 0 <u>(4)</u>	01/01/2018		М		65,280 (1)	01/01/2018	01/31/2020	common shares	65,280

Reporting Owners

Reporting Owner Name / Address	Relationships							
Reporting Owner Mane / Muress	Director	10% Owner	Officer	Other				
GELFOND RICHARD L 902 BROADWAY 20TH FLOOR NEW YORK 10010-6002			Chief Executive Officer					

Signatures

Richard L. Gelfond 01/03/2018

<u>**</u>Signature of Reporting Person

Date

Explanation of Responses:

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).

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- (1) Represents the conversion upon vesting of restricted share units into common shares.
- (2) Mr. Gelfond is reporting the withholding by IMAX Corporation of 36,604 common shares to satisfy the tax withholding obligations in connection with the delivery of common shares upon conversion of the restricted share unit transaction.
- (3) Each restricted share unit represents a contingent right to receive one common share of IMAX Corporation.
- (4) Each restricted share unit is the economic equivalent of one common share of IMAX Corporation.
- (5) This represents the number for transactions reported on this Form 4 only. Mr. Gelfond's aggregate remaining outstanding option, restricted share unit and common share balances following these transaction will be 2,420,689; 195,308 and 197,379 respectively.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.