

IMAX CORP

Form 4

March 14, 2017

FORM 4
UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

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 OF
SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,
Section 17(a) of the Public Utility Holding Company Act of 1935 or Section
30(h) of the Investment Company Act of 1940

OMB APPROVAL

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(Print or Type Responses)

1. Name and Address of Reporting Person *
FOSTER GREG

(Last) (First) (Middle)

12582 WEST MILLENNIUM

(Street)

PLAYA VISTA, CA 90094

(City) (State) (Zip)

2. Issuer Name **and** Ticker or Trading
Symbol

IMAX CORP [IMAX]

3. Date of Earliest Transaction
(Month/Day/Year)

03/10/2017

4. If Amendment, Date Original
Filed(Month/Day/Year)

5. Relationship of Reporting Person(s) to
Issuer

(Check all applicable)

____ Director ____ 10% Owner
____ Officer (give title below) ____ Other (specify below)

CEO IMAX Entertain & EVP IMAX

6. Individual or Joint/Group Filing(Check
Applicable Line)
X Form filed by One Reporting Person
____ Form filed by More than One Reporting
Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	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	03/10/2017		C	Amount (1) 69,758	A \$ 18.98 167,018	D	
common shares	03/10/2017		S	Amount (1) 69,758	D \$ 33.1786 67,018	D	
common shares	03/13/2017		C	Amount (1) 30,242	A \$ 18.98 167,018	D	
common shares	03/13/2017		S	Amount (1) 30,242	D \$ 33.243 67,018	D	

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

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(9-02)

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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	8. Amount or Number of Shares
stock options (to buy)	\$ 18.98	03/10/2017		C	69,758 (1)	07/01/2013 04/30/2017	common shares	69,758
stock options (to buy)	\$ 18.98	03/13/2017		C	30,242 (1)	07/01/2013 04/30/2017	common shares	30,242

Reporting Owners

Reporting Owner Name / Address	Relationships
	Director 10% Owner Officer Other
FOSTER GREG 12582 WEST MILLENNIUM PLAYA VISTA, CA 90094	CEO IMAX Entertain & EVP IMAX

Signatures

Greg Foster 03/14/2017
 **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).
- (1) Stock options were exercised and common shares sold pursuant to Rule 10b5-1 Sales Plan adopted on December 9, 2016. Mr. Foster's 10b5-1 Sales Plan is scheduled to terminate on April 28, 2017.
- (2) This represents the number of Options for this transaction only. Mr. Foster's aggregate remaining outstanding option, restricted share unit and common share balances following this transaction will be 532,626; 73,110 and 67,018 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.