

IMAX CORP  
Form 4  
September 06, 2016

**FORM 4**

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

OMB APPROVAL

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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 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

(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)  
09/01/2016

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 & ESVP 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 Ownership (Instr. 4)
common shares (opening balance)				(A) or (D) Price	53,007	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 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)		
				Code	V (A) (D)	Date Exercisable	Expiration Date	Title	Amount of Number of Shares
restricted share units <sup>(1)</sup>	<sup>(2)</sup>	09/01/2016		A	51,286	<sup>(3)</sup>	10/01/2019	common shares	51,286
stock options (to buy)	\$ 30.71	09/01/2016		A	136,187	<sup>(4)</sup>	09/01/2023	common shares	136,187

**Reporting Owners**

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

**Signatures**

Greg Foster 09/06/2016

                      
 \*\*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) Each restricted share unit represents a contingent right to receive one common share of IMAX Corporation.
- (2) Each restricted share unit is the economic equivalent of one common share of IMAX Corporation.
- (3) The restricted share units vest and will be converted to common shares in three installments: 17,095 on September 1, 2017; 17,096 on September 1, 2018 and 17,095 on September 1, 2019.
- (4) The stock options will become exercisable in three installments: 45,396 on September 1, 2017; 45,396 on September 1, 2018; and 45,395 on September 1, 2019.
- (5) Mr. Foster's aggregate outstanding option, restricted share unit and common share balances following this grant will be 782,626; 97,088 and 53,007 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.