FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL										
OMB Number:	3235-028									

37 Estimated average burden 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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* FILIPPS FRANK P					IN	2. Issuer Name and Ticker or Trading Symbol IMPAC MORTGAGE HOLDINGS INC IMH]										neck all applic	ationship of Reporting c all applicable) Director Officer (give title		10% Ow	ner
(Last) (First) (Middle) 19500 JAMBOREE ROAD					3. Date of Earliest Transaction (Month/Day/Year) 02/12/2020											below)			Other (s below)	респу
(Street)	CA 92612				4.1	f Ame	endmen	t, Date	e of C	Original F	iled	(Month/Da		5. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting						
(City)	(Si	tate)	(Zip)			Persor								1						
		Tab	le I - Noi	n-Deri	vativ	e Se	curiti	es A	cqu	uired, I	Dis	posed o	f, o	r Ben	eficia	ly Owned	l			
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Yea		ar) l	2A. Deemed Execution D if any (Month/Day			3. Transaction Code (Instr. 8)					Benefici Owned I	es ally Following	Form (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership		
										Code	v	Amount		(A) or (D)	Price	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)
Common	Stock															43,3	310(1)		D	
Common	Stock			02/1	2/202	0				A		15,000	(2)	A	\$0	15	,000		D	
		7	Table II -									sed of, onvertil				/ Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,	4. Transactio Code (Inst 8)				Exp	Oate Exer Diration D Donth/Day/	ate			7. Title and Am of Securities Underlying Derivative Secu (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly Di	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Dat Exe	e ercisable		xpiration ate	Title	1	Amount or Number of Shares					
Non- Qualified Stock Option	\$2.73								12/	03/2011 ⁽³	1	2/03/2020		nmon ock	6,000		6,000		D	
Non- Qualified Stock Option	\$5.39								07/2	22/2015 ⁽³	3) 0	7/22/2024		nmon ock	7,500		7,500		D	
Non- Qualified Stock Option	\$20.5								07/2	21/2016 ⁽³	3) 0	7/21/2025		nmon ock	10,000		10,000	0	D	
Non- Qualified Stock	\$17.4								07/	19/2017 ⁽⁴	0	7/19/2026		nmon ock	10,000		10,000	0	D	

Explanation of Responses:

- 1. Includes 39,500 shares of common stock underlying Deferred Stock Units (DSUs), of which 22,834 are vested. The DSUs were granted under the Non-Employee Director Deferred Stock Unit Award
- 2. Represents 15,000 shares of common stock underlying Restricted Stock Units (RSUs) granted under the 2010 Omnibus Plan so that each RSU represents a contingent right to receive one shareof common stock. The RSUs vest 1/3 a year for 3 years beginning on February 12, 2021.
- 3. These options are fully vested.
- 4. The awards vest annually in 1/3 increments and will be fully vested on July 19, 2020.

Frank P. Filipps 02/14/2020

** 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.