#### JOHNSON RICHARD JAMES

Form 5

February 14, 2005

### FORM 5 UNITED STATES SECURITIES AND EXCHANGE COMMISSION

**OMB APPROVAL** 

**OMB** 3235-0362 Number:

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response... 1.0

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue.

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Washington, D.C. 20549

See Instruction Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, 1(b). Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or Section Reported 30(h) of the Investment Company Act of 1940

Form 4

Transactions Reported

(City)

1. Name and Address of Reporting Person * JOHNSON RICHARD JAMES			2. Issuer Name <b>and</b> Ticker or Trading Symbol IMPAC MORTGAGE HOLDINGS INC [IMH]	5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)		
(Last)	(First) STREET	(Middle)	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2004	Director 10% Owner Selow) Other (give title Other (specification) below)  Chief Financial Officer		
	(Street)		4. If Amendment, Date Original Filed(Month/Day/Year)	6. Individual or Joint/Group Reporting  (check applicable line)		

### NEWPORT BEACH, CAÂ 92660

(State)

(Zip)

\_X\_ Form Filed by One Reporting Person Form Filed by More than One Reporting

					- <b>1</b> , — <b>F</b>		,
1.Title of	2. Transaction Date	2A. Deemed	3.	4. Securities	5. Amount of	6. Ownership	7. Nature of
Security	(Month/Day/Year)	Execution Date, if	Transaction	Acquired (A) or	Securities	Form: Direct	Indirect
(Instr. 3)		any	Code	Disposed of (D)	Beneficially	(D) or	Beneficial
		(Month/Day/Year)	(Instr. 8)	(Instr. 3, 4 and 5)	Owned at end	Indirect (I)	Ownership
				(4)	of Issuer's	(Instr. 4)	(Instr. 4)
				(A)	Fiscal Year		
				or	(Instr. 3 and 4)		
				Amount (D) Price	e		

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

Persons who respond to the collection of information **SEC 2270** contained in this form are not required to respond unless

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

(9-02)the form displays a currently valid OMB control number.

#### 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.	6. Date Exercisable and	7. Title and Amo
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	Number	Expiration Date	Underlying Secu
Security	or Exercise		any	Code	of	(Month/Day/Year)	(Instr. 3 and 4)
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	2	

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	Derivative Security					Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)				
					(A)	(D)	Date Exercisable	Expiration Date	Title	Ai Ni Sh
Incentive Stock Option (right to buy)	\$ 4.18	Â	Â	Â	Â	Â	03/27/2001	03/27/2011	Common Stock	2
Incentive Stock Option (right to buy)	\$ 23.1	Â	Â	Â	Â	Â	08/02/2007(2)	08/02/2008	Common Stock	
Non-Qualified Stock Option (right to buy)	\$ 4.18	Â	Â	Â	Â	Â	03/27/2001	03/27/2011	Common Stock	1

## **Reporting Owners**

Reporting Owner Name / Address	Relationships				
1	Director	10% Owner	Officer	Other	
JOHNSON RICHARD JAMES 1401 DOVE STREET	Â	Â	Chief Financial Officer	Â	
NEWPORT BEACH, CA 92660					

## **Signatures**

Richard James
Johnson

\*\*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).
- The main purpose of this filing is to correct the classification of previously reported stock options. These options were inadvertently (1) reported as all Non-qualified when a portion of the grant was actually Incentive Stock Options. This holding represents the accurate breakout of the previously recorded grant.
- (2) This holding had an incorrect date for the date exercisable. It has been changed to reflect the accurate date.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.

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