

PCS EDVENTURES COM INC  
 Form 4/A  
 September 01, 2005

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

OMB APPROVAL  
 OMB Number: 3235-0287  
 Expires: January 31, 2005  
 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 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 *<br>MAHER ANTHONY A |          |          | 2. Issuer Name and Ticker or Trading Symbol<br>PCS EDVENTURES COM INC [PCSV] | 5. Relationship of Reporting Person(s) to Issuer<br><br>(Check all applicable)  |
| (Last)   | (First)  | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year)<br>10/21/2002               | <input checked="" type="checkbox"/> Director<br><input checked="" type="checkbox"/> Officer (give title below) CEO<br><input type="checkbox"/> 10% Owner<br><input type="checkbox"/> Other (specify below)    |
|  | (Street) |          | 4. If Amendment, Date Original Filed(Month/Day/Year)<br>06/13/2005           | 6. Individual or Joint/Group Filing(Check Applicable Line)<br><input checked="" type="checkbox"/> Form filed by One Reporting Person<br><input type="checkbox"/> Form filed by More than One Reporting Person |
| (City)   | (State)  | (Zip)    |  |   |

**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) |
|---------------------------------|--------------------------------------|--|--------------------------------|---|---|--|---|
|                                 |                                      |  | Code                           | V   | Amount  | (A) or (D)   | Price   |
| Common Stock                    | 06/10/2005                           |  | S                              |   | 10,000  | D  | \$ 0.56   |
| Common Stock                    |                                      |  |                                |   | 10,000  | I  | for Louise Maher                                      |
| Common Stock                    |                                      |  |                                |   | 35,000  | I  | as TTEE for Nick Maher Foundation                     |
| Common Stock                    |                                      |  |                                |   | 10,000  | I  | Maher Family Partnership LLP                          |

Edgar Filing: PCS EDVENTURES COM INC - Form 4/A

|              |       |   |                |
|--------------|-------|---|----------------|
| Common Stock | 9,500 | I | Sullivan Maher |
| Common Stock | 4,500 | I | E.L. Sullivan  |

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

**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 control number.**

SEC 1474  
(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) |                 |              |                      |
|--|--|--------------------------------------|--|--------------------------------|---|--|-----|---|-----------------|--------------|----------------------|
|  |  |                                      |  | Code                           | V   | (A)  | (D) | Date Exercisable  | Expiration Date | Title        | Amount Number Shares |
| Option to purchase Common Stock            | \$ 0.19  | 04/01/2005                           | 04/01/2005   | A                              |   | 20,270   |     | 04/01/2005  | 04/01/2016      | Common Stock | 20,270               |
| Option to purchase Common Stock            | \$ 0.09  | 10/21/2002                           |  | A                              |   | 166,666  |     | 10/21/2002  | 10/21/2012      | Common Stock | 166,666              |

## Reporting Owners

| Reporting Owner Name / Address | Relationships |           |         |       |
|--------------------------------|---------------|-----------|---------|-------|
|                                | Director      | 10% Owner | Officer | Other |
| MAHER ANTHONY A                |               |           | X       | CEO   |

## Signatures

/s/ Anthony A. Maher 08/31/2005

\*\*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) Column 5 is only portion changed on amended Form 4.

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.