Edgar Filing: Gilberg Leann Rae - Form 4

| Gilberg Lean Form 4 | in Rae | | | | | | | | | | |
|--|--|-------------------|------|---|------------------------|--|----------------------|---|--|----------|--|
| October 18, 2 | 2011 | | | | | | | | | | |
| FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION | | | | | | | OMB AF | B APPROVAL | | | |
| Washington, D.C. 20549 | | | | | | | OMB Number: | 3235-0287 | | | |
| Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). Check this box if no longer 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 1(b). | | | | | | | | | | | |
| (Print or Type R | Responses) | | | | | | | | | | |
| Gilberg Leann Rae Symbol | | | | | | 5. Relationship of Reporting Person(s) to Issuer | | | | | |
| PCS ED [PCSV] | | | | OVENTURES COM INC | | | | | ck all applicable) | | |
| (Month | | | | e of Earliest Transaction h/Day/Year) 4/2011 | | | | Director 10% Owner X Officer (give title Other (specify below) CFO | | | |
| | | | | ² Amendment, Date Original d(Month/Day/Year) | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | |
| EAGLE, ID | 83616 | | | | | | | Form filed by M Person | | | |
| (City) | (State) | (Zip) | Tabl | e I - Non-D |) erivative | Secur | ities Acq | uired, Disposed of | , or Beneficial | ly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Dat (Month/Day/Year) |) Executio any | | 3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or | | | d of (D) | Beneficially Owned Following Reported Transaction(s) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | |
| Common Stock | 10/14/2011 | | | Code V A | Amount 7,011 (1) | | Price \$ 0.104 | (Instr. 3 and 4) 14,310 | D | | |

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.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

Reporting Owners

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| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 4. Transactic Code (Instr. 8) | 5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | Secur | unt of rlying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr |
|---|---|---|--|---|---------------------|--------------------|-------|--|---|--|
| | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Addres | S | Relationships | | | | | | | |
|--|-----------|---------------|---------|-------|--|--|--|--|--|
| 1 | Director | 10% Owner | Officer | Other | | | | | |
| Gilberg Leann Rae 2642 E GREENBROOK DR EAGLE, ID 83616 | | | CFO | | | | | | |
| Signatures | | | | | | | | | |
| /s/Leann Gilberg | 0/18/2011 | | | | | | | | |

**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) Common Stock issued for additional compensation for services for the period of 10/01/11-10/15/2011

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.