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INTERNATIONAL MICROCOMPUTER SOFTWARE INC /CA/

Form 4

December 02, 2005

| FORM 4 Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940 | | | | | | | | OMB APPROVAL OMB Number: Services: Compared to the services of the services | | | |
|---|--|--|--|-------|-----------------|------------|--|--|--|--|--|
| 1. Name and Address DIGITAL CREADEVELOPMEN (Last) 200 EAST 82NI | ss of Reporting Person * ATIVE NT CORP (First) (Middle) | 2. Issuer Name and Ticker or Trading Symbol INTERNATIONAL MICROCOMPUTER SOFTWARE INC /CA/ [IMSI] 3. Date of Earliest Transaction (Month/Day/Year) 11/29/2005 | | | | | Relationship of Reporting Person(s) to her (Check all applicable) Director X 10% Owner Officer (give title Other (specify below) | | | | |
| NEW YORK, N | (Street) (Y 10028 (State) (Zip) | Filed(Month/Day/Year) | | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person uired, Disposed of, or Beneficially Owned | | | | |
| 1.Title of Security (Instr. 3) | an | A. Deemed secution Date, if | 3. 4. Securities Acqui Transaction(A) or Disposed of Code (D) (Instr. 8) (Instr. 3, 4 and 5) (A) or | | cquired d of | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| International Microcomputer Software, Inc. (Common Stock) | 11/29/2005 | | S | 5,000 | D | \$ 0.84 | 7,185,758 | D | | | |
| International Microcomputer Software, Inc. (Common Stock) | 11/30/2005 | | S | 2,500 | D | \$ 0.83 | 7,185,758 | D | | | |

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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)

9. Nu Deriv Secur Bene Own Follo Repo Trans

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 Exerc | cisable and | 7. Tit | le and | 8. Price of | 1 |
|-------------|-------------|---------------------|--------------------|----------------------|--------------|----------------------------------|-------------|------------------|--------|-------------|---|
| Derivative | Conversion | (Month/Day/Year) | Execution Date, if | if TransactionNumber | | Expiration Date | | Amou | ınt of | Derivative | į |
| Security | or Exercise | | any | Code | of | (Month/Day/ | Year) | Under | rlying | Security | |
| (Instr. 3) | Price of | | (Month/Day/Year) | (Instr. 8) | 8) Derivativ | e | | Securities | | (Instr. 5) | į |
| | Derivative | | | | Securities | | | (Instr. 3 and 4) | | | |
| | Security | | | | Acquired | Acquired | | | | | 1 |
| | | | | | (A) or | | | | | | 1 |
| | | | | | Disposed | | | | | | |
| | | | | | of (D) | | | | | | |
| | | | | | (Instr. 3, | | | | | | |
| | | | | | 4, and 5) | | | | | | |
| | | | | | | | | | A | | |
| | | | | | | | | | Amount | | |
| | | | | | | Date Expiration Exercisable Date | Expiration | Title Num | | | |
| | | | | | | | Date | | Number | | |
| | | | | G 1 1 | 7 (A) (B) | | | | of | | |
| | | | | Code \ | (A) (D) | | | | Shares | | |

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

DIGITAL CREATIVE DEVELOPMENT CORP 200 EAST 82ND STREET NEW YORK, NY 10028

X

Signatures

/s/ Gary Herman, Secretary 12/02/2005

**Signature of Reporting 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).

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.

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