SEC Form 4

**FORM 4**

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

### 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[*] COGNOS, INC. | 2. Issuer Name **and** Ticker or Trading Symbol AVID TECHNOLOGY, INC. [ AVID ] | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) |
|---|---|---|

| (Last) (First) (Middle) 1685 REGIONAL ROAD 174 OTTAWA, ON K4C 1H5 |  |  |
|---|---|---|

| | Director | 10% Owner |
|---|---|---|
| X | Officer (give title below) | Other (specify below) |

Vice President of Finance

| 3. Date of Earliest Transaction (Month/Day/Year) 05/18/2010 |
|---|

| (Street) CANADA |
|---|

| (City) (State) (Zip) |
|---|

| 4. If Amendment, Date of Original Filed (Month/Day/Year) 05/20/2010 | 6. Individual or Joint/Group Filing (Check Applicable Line) |
|---|---|

| X | Form filed by One Reporting Person |
|---|---|
| | Form filed by More than One Reporting Person |

### 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 | | | |

### 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 Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | Code | V | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |
| Employee Stock Option (Right to Buy)[1] | $14.3225[1] | 05/18/2010[1] | | A[1] | | 32,000[1] | | 05/18/2011[1] | 05/18/2017[1] | Common Stock[1] | 32,000[1] | $0[1] | 32,000[1] | D[1] | |
| Performance Rights (Restricted Stock Units)[1] | [1] | 05/18/2010[1] | | A[1] | | 16,000[1] | | [1] | 03/31/2021[1] | Common Stock[1] | 16,000[1] | $0[1] | 16,000[1] | D[1] | |

**Explanation of Responses:**

1. See Remarks below.

**Remarks:**

The Form 4 to which this amendment relates contained an incorrect CIK code, which mistakenly caused "Cognos Inc." to appear as the name of the reporting person in the filed report on EDGAR instead of "Jason Burke." The Form 4 should be disregarded. A separate Form 4 under the correct CIK code for Mr. Burke will be filed.

| /s/ John S. LaMountain as Attorney-in-Fact for Jason G. Burke | 05/20/2010 |
|---|---|
| ** 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.**