FORM 4

to Section 16. Form 4 or Form 5

obligations may continue. See

Instruction 1(b)

Check this box if no longer subject

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB Number: 3235-0287

Expires: January 31, 2005 Estimated average burden hours per response. . .0.5

Filed By

Romeo and Dye's

Section 16 Filer www.section16.net

OMB APPROVAL

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

 Name and Address of Reporting Person* Issuer Name and Ticker or Trading Symbol Relationship of Reporting Person(s) to Issuer (Check all applicable) Avid Technology, Inc. (AVID) Director Jacks Ethan E 10% Owner 3. I.R.S. Identification Number X Officer (give title below) _ Other (specify below) (Last) (First) (Middle) 4. Statement for of Reporting Person, Month/Day/Year 04/23/03 Vice President of Business Development & Chief Legal Counsel 86 Concord Street if an entity (voluntary) (Street) 5. If Amendment, 7. Individual or Joint/Group Filing (Check Applicable Line) Date of Original X Form filed by One Reporting Person Weston, MA 02493 _ Form filed by More than One Reporting Person (Month/Day/Year) (City) (State) Table I — Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned (Zip) Title of Security 2. Trans-2A. Deemed 3. Trans-4. Securities Acquired (A) or Disposed of (D) 5. Amount of 6. Owner-7. Nature of Indirect ship Form: Beneficial Ownership action Code (Instr. 3, 4 & 5) Securities (Instr. 3) Execution action Date Date. Instr. 8) Beneficially Direct (D) (Instr. 4) Month/ Day if any Code Amount (A) Price Owned Followor Indirect (I) Month/Day/ ing Reported Transactions(s) (Instr. 4) Year) (Instr. 3 & 4) (D) 04/23/03 \$11.375 D Common Stock M 8,000 Α 04/23/03 \$27.01 Common Stock S 1,200 D D Common Stock 04/23/03 S 6,800 D \$27.00 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) 5. Number of Derivative 6. Date Exercisable 8. Price of 9. Number of 10. 1. Title of 2. Conver-3. Trans-3A. 7. Title and 11. Nature Trans-Securities Acquired (A) Derivative laction Deemed and Expiration Amount of Derivative Derivative Ownerof Indirect lsion or Security Exercise Date Execution action or Disposed of (D) Date Underlying Security Securities ship Beneficial Month/Day/ Price of Date, Code Securities (Instr. 5) Beneficially Form Ownership (Month if any Owned (Instr. 4) Derivative (Instr. 3, 4 & 5) (Instr. 3 & 4) lof (Instr. 3) Day/ (Month

1	Security	Year)	Day	(mstr.	٠.							Following	Deriv-	
			Day/ Year)	8)	-							Reported	ative	
			" /		-							Transaction(s)	Security:	
				Code	V	(A)	(D)	Date Exer-	Expira-	Title	Amount	(Instr. 4)	Direct	
						, ,		cisable	tion		or		(D)	
									Date		Number		or	
											of		Indirect	
											Shares		(I)	
													(Instr. 4)	
Non-Qualified	\$11.375	04/23/03		M	П		8,000	05/09/00(1)	11/09/09	Common	8,000	4,500	D	
Stock Option										Stock				
(right to buy)	1			1 1								1 1		

Explanation of Responses:

FORM 4 (continued)

(1) The option becomes exercisable in four equal installments commencing on the date listed in the "Date Exercisable" column.

By: /s/ Ethan E. Jacks

04/23/03

**Signature of Reporting Person

**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.

^{*} If the form is filed by more than one reporting person, see Instruction 4(b)(v).