FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL									
1	OMB Number:	3235-0287								
	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).

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* BEVERIDGE CRAWFORD W						2. Issuer Name and Ticker or Trading Symbol <u>AUTODESK INC</u> [ADSK]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
DEVEKTORE CKAWLOKE W											2	Director	r	10% Ov	vner		
(Last) (First) (Middle) 111 MCINNIS PARKWAY						3. Date of Earliest Transaction (Month/Day/Year) 06/17/2004							(give title	Other (s below)	specify		
						4. If Amondment, Date of Original Filed (Month/Dov/Moss)							6 Individual or Joint/Croup Filing (Chack Applicable				
			— I	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)												X Form filed by One Reporting Person					
SAN RAFAEL 94903												Form filed by More than One Reporting					
				—— I								Person		an one repe	9		
(City)	(S	tate)	(Zip)														
		Tol	ala I. Nan I)orivo	in a Ca		- A	aguired D	ionocod o	f or Bor	oficially	ı Oumad					
		Iai	ole I - Non-I	Jenva	ive Se	curitie	SAC	equirea, D	sposea d	oi, or Ber	iencian	y Owned					
1. Title of Security (Instr. 3) 2. Transa Date (Month/Di					ction 2A. Deemed 3. 4. Securities Acquired (A) Execution Date, Transaction Disposed Of (D) (Instr. 3,							5. Amour Securitie			7. Nature of Indirect		
					y/Year)	if any		Code (Instr. 5)			71 (D) (1115ti. 3, 4 anu		Beneficially (D)		Beneficial		
ľ					I ' ' '			ar) 8)				Owned Following Reported			Ownership (Instr. 4)		
				Code V				Amount	(A) or	Price	Transact	ion(s)		(
										(D)		(Instr. 3 a	ınu 4)				
			Table II - De									Owned					
			(e.	.g., pu	ts, cal	ls, warı	ant	s, options,	converti	ble secu	rities)						
1. Title of Derivative Security	2. Conversion or Exercise	3. Transaction Date (Month/Day/Year)			nsaction le (Instr.	5. Number of Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year) 7. Title and Ar of Securities Underlying		es	8. Price of Derivative Security	9. Number of derivative Securities	10. Ownership Form:	11. Nature of Indirect Beneficial			
(Instr. 3)	Price of	of vative	(Month/Day/Ye		c (mou	Securities Acquired (A) or		(onazuji rou)		Derivative	Security	(Instr. 5)	Beneficially	Direct (D)	Ownership		
	Derivative Security							(Instr. 3 and			ıd 4)		Owned Following	or Indirect (I) (Instr. 4)	(Instr. 4)		
						Dispose							Reported Transaction(s	1			
						of (D) (Instr. 3, 4 and 5)							(Instr. 4)	"			
						İ					Amount	1					
											or Number						
								Date	Expiration		of						
				Cod	le V	(A)	(D)	Exercisable	Date	Title	Shares						
Non-																	
Qualified Stock	\$30.11	06/17/2004				20,000		0.0 (4 7) (20.0 7(1)	00/17/2014	Common	20.000	* 0.0000	20.000				
Option	\$39.11	06/17/2004		A		20,000		06/17/2005 ⁽¹⁾	06/17/2014	Stock	20,000	\$0.0000	20,000	D			
(right to buy)																	
					+	1								+	+		
Restricted Stock										Common							
Award (right to	\$0.01	06/17/2004		A		690		06/17/2004	09/16/2004	Stock	690	\$0.0000 ⁽²⁾	690	D			

Explanation of Responses:

- 1. Options shall vest and become exercisable on the date of the next annual meeting.
- 2. Restricted Stock Award granted under the 2000 Directors' Option Plan in lieu of \$22,500 cash compensation for services as a director.

Nancy R. Thiel, Attorney-infact for Crawford W. Beveridge 06/29/2004

** Signature of Reporting Person Da

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.