FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPRO | OVAL | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|
| 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* BECKER JAN | | | | | | 2. Issuer Name and Ticker or Trading Symbol AUTODESK INC [ADSK] | | | | | | | | | | ck all applic Directo | ector | | 10% Ov | /ner | |
|--|---|--|---|--------|---|---|--|--------|-----------------------------------|-------------------------------------|--|---------------------|--|----------------|---|--|---|---------------------|--|--|--|
| (Last) | (F NNIS PAR | • | (Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 09/26/2013 | | | | | | | | | | below) | Officer (give title below) Sr VP, Human R | | Other (s below) , Corp RE | · | |
| (Street) SAN RAFAEL CA 94903 | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | Line) | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| (City) | (S | · · · · · · · · · · · · · · · · · · · | (Zip) | a Dori | ivetiv | | - Ouri | tion A | - | uirod F |)ioi | 20004 0 | forD | onof | ficially | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | | | nsaction | n 'ear) | A. Deemed kecution Date, any lonth/Day/Year) | | 3. Transaction Code (Instr. | | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 | | | A) or | 5. Amour Securitie Beneficia Owned F | s ally ollowing | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | | | Code | v | Amount | (A) (D) | or I | Price | Reported Transact (Instr. 3 a | ion(s) | | | (Instr. 4) | |
| Common Stock 09/26/ | | | | | | | /2013 | | | M | | 15,000 |) / | 1 | \$29.5 | 5 95,898 ⁽³⁾ | | D | | | |
| Common | Stock | | | 09/2 | 26/201 | 13 | | | | S ⁽²⁾ | | 15,000 |)] | | \$42 | 80, | 898 | | | | |
| | | | Table II - | | | | | | | | | sed of, onvertib | | | | Owned | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution I if any (Month/Day | Date, | 4. Transaction Code (Instr. 8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | Ex | Date Exer piration I onth/Day | Date | | 7. Title and Amour of Securities Underlying Derivative Security (Instr. 3 and 4) | | curity | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securitie: Beneficia Owned Following Reported Transacti (Instr. 4) | e s ally g | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Da: | ite ercisable | | Expiration Date | Title | or Nu of | umber | | | | | | |
| Non- Qualified Stock Option (right to | \$29.5 | 09/26/2013 | | | M | | | 15,000 | 03/ | /26/2012 ⁽ | 1) | 03/26/2017 | Commo Stock | | 5,000 | \$0 | 26,61 | 1 | D | | |

Explanation of Responses:

- 1. The option vests over a 4-year period beginning on 03/26/2010 at the rate of 15,000 shares on each of the first, second and third anniversaries, and 11,611 shares on the fourth anniversary.
- 2. The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on April 4, 2012.
- ${\it 3. Includes shares acquired in March 2013 pursuant to the Issuer's Employee Stock Purchase Plan.}\\$

Nancy R. Thiel, Attorney-in-Fact for Jan Becker 09/27/2013

** Signature of Reporting Person

Date

 $Reminder: Report \ on \ a \ separate \ line \ for \ each \ class \ of \ securities \ beneficially \ owned \ directly.$

- * 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.