FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	S IN BENEFICIAL	. OWNERSHIP

	OMB APPRO	VAL
1	OMB Number:	3235-0287
	Estimated average burde	en
	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

Name and Address of Reporting Person* BECKER JAN						2. Issuer Name and Ticker or Trading Symbol AUTODESK INC [ADSK] 5. Relationship of Reporting Person(s) to Issuer (Check all applicable)													
					- 1	[Director		10% Owner	
					- _	D - 4 -	- 4 🗆	:+ T	ti (A	4 41- /	D 0 ()		_	X	Officer below)	(give title		Other (s below)	pecify
(Last)	(F	First)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 12/21/2005									,	ID and C	om	,	_
111 MCINNIS PARKWAY					12/21/2005 SVP, HR and Corp. Real Estate												e e		
(Ctro ot)					4.1	If Ame	endme	nt, Date	of Origina	l Filed	l (Month/Day	y/Year)		6. Indi Line)	vidual or J	oint/Group	Filing	(Check App	licable
(Street) SAN RA	FAEL C	:A	94903											X	Form fi	ed by One	Repo	rting Person	ı
					_											ed by More	e than	One Report	ing
(City)	(5	State)	(Zip)												Person				
		Ta	ble I - No	n-Deri	ivativ	e Se	curi	ties Ac	quired	, Dis	sposed o	f, or Bei	nefic	cially	Owned				
Date			2. Trans Date (Month		ear)	2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disposed Code (Instr.		es Acquire Of (D) (Inst	d (A) (r. 3, 4	or and 5)	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		
										v	Amount	(A) or (D)	Pri	се	Reported Transaction(s) (Instr. 3 and 4)				Instr. 4)
Common Stock				12/2	1/200	/2005			М		30,000	A	\$8	3.1407	37,490(2)			D	
Common Stock				12/2	1/200	/2005					100	100 D		44.98	37,3	390 ⁽²⁾		D	
Common Stock 12/2				12/2	1/200	2005		S ⁽¹⁾		29,900 D		\$	44.96	7,490(2)			D		
			Table II -	Deriva	ative	Sec	uriti	es Aca	uired.	Disp	osed of,	or Bene	efici	ally C	wned		I.		
											convertik								
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date, Transa Code (nsaction le (Instr.		of E		6. Date Exercisa Expiration Date (Month/Day/Yea		7. Title and Amou of Securities Underlying Derivative Securit (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
													Amo	ount					
					Code	v	(A)	(D)	Date Exercisa	ble	Expiration Date	Title	Nun of Sha						
Non-							1,,	, -,					5.10						
Qualified Stock Option (right to	\$8.1407	12/21/2005			M			30,000	03/20/20	03 ⁽³⁾	03/20/2011	Common Stock	30,	000	\$0.00	57,710	6	D	

Explanation of Responses:

- 1. The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on September 19, 2005.
- $2.\ Includes\ shares\ acquired\ under\ the\ Issuer's\ Employee\ Stock\ Purchase\ Plan\ on\ September\ 30,\ 2005.$
- 3. The option vests over a four-year period beginning on 03/20/2001 at the rate of 30,000 shares on the first, second and third anniversaries, and 17,716 shares on the fourth anniversary.

<u>Andrew Chew, Attorney-in-fact</u> <u>for Jan Becker</u>

12/22/2005

** 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.