1. Name and Address of Reporting Person
Hope Stephen W.

(Last) (First) (Middle)
ONE MARKET, SUITE 400
SAN FRANCISCO CA 94105

2. Issuer Name and Ticker or Trading Symbol
Autodesk, Inc. [ADSK]

3. Date of Earliest Transaction (Month/Day/Year)
01/10/2023

4. If Amendment, Date of Original Filed (Month/Day/Year)

5. Relationship of Reporting Person(s) to Issuer (Check all applicable)
X Director
X Officer (give title below)
VP & Chief Accounting Officer

6. Individual or Joint/Group Filing (Check Applicable Line)
X Form filed by One Reporting Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

<table>
<thead>
<tr>
<th>Title of Security (Instr. 3)</th>
<th>Transaction Date (Month/Day/Year)</th>
<th>Deemed Execution Date, if any (Month/Day/Year)</th>
<th>Transaction Code (Instr. 8)</th>
<th>Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)</th>
<th>Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)</th>
<th>Ownership Form: Direct (D) or Indirect (I) (Instr. 4)</th>
<th>Nature of Indirect Beneficial Ownership (Instr. 4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Common Stock</td>
<td>01/10/2023</td>
<td></td>
<td>p(1)</td>
<td>275 D</td>
<td>$192.47</td>
<td>D</td>
<td></td>
</tr>
<tr>
<td>Common Stock</td>
<td>01/11/2023</td>
<td></td>
<td>s(3)</td>
<td>394 D</td>
<td>$195.66</td>
<td>D</td>
<td></td>
</tr>
</tbody>
</table>

Explanation of Responses:
1. Shares withheld to cover taxes.
2. The total securities beneficially owned includes 3,074 shares of unvested Restricted Stock Units.
3. The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on 12/11/2020; first amendment on 8/26/2021 and second amendment on 06/06/2022.

Remarks:
Melissa Hoge, Attorney-in-Fact for Stephen Hope 01/11/2023
** 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).
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.