## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

**OMB APPROVAL** 3235-0287 Estimated average burden hours per response: 0.5

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*  BARTZ CAROL						2. Issuer Name and Ticker or Trading Symbol AUTODESK INC [ ADSK ]							(Che	Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner				
(Last) (First) (Middle) 111 MCINNIS PARKWAY						3. Date of Earliest Transaction (Month/Day/Year) 05/10/2005								Officer ( below)	(give title		(specify	
(Street) SAN RAFAEL CA 94903 (City) (State) (Zip)					4.									Advividual or Joint/Group Filing (Check Applicable e)  X Form filed by One Reporting Person Form filed by More than One Reporting Person				
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
1. Title of Security (Instr. 3)  2. Transaci Date (Month/Dat						ar) E	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4 a			5. Amount of Securities Beneficially Owned Followir		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
							(,		Code	v	Amount	(A) or (D)	Price	Reported Transact (Instr. 3 a	ion(s)	(,, (,	(Instr. 4)	
Common	05/10	05/10/2005				M		50,000	A	\$6.0313	13 1,050,392		D					
Common Stock 05/10					)/2005	5			S <sup>(1)</sup>		10,000	D	\$34.514	5147 1,040,39		D		
Common Stock 05/1					)/2005	5			S <sup>(1)</sup>		10,000	D	\$34.470	4 1,03	0,392	D		
Common Stock 05/10/2					)/2005	2005			S <sup>(1)</sup>		10,000	D	\$34.452	25 1,020,392		D		
Common Stock 05/10/2						:005			<b>S</b> <sup>(1)</sup>		10,000	D	\$34.457	76 1,010,392		D		
Common Stock 05/10/2						005			S <sup>(1)</sup>		10,000	D	\$34.479	97 1,000,392		D		
			Table II								oosed of, convertib			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 Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)		5. Number n of		6. Date Exercis Expiration Date (Month/Day/Yea		sable and	7. Title and Amoun of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Ownersh Form: Direct (D or Indire (I) (Instr.	Beneficial Ownership ct (Instr. 4)	
					Code	v	(A)		Date Exercisa	ıble	Expiration Date	Title	Amount or Number of Shares					
Non- Qualified Stock Option (right to	\$6.0313	05/10/2005			M			50,000	09/08/20	01 <sup>(2)</sup>	09/08/2009	Common Stock	50,000	\$0	362,52	4 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 May 21, 2002, as amended.
- 2. The option vests over a three-year period beginning on 09/08/1999 at the rate of 272,000 shares on the first anniversary, 264,000 shares on the second anniversary and 263,996 shares on the third anniversary.

Nancy R. Thiel, Attorney-infact for Carol Bartz

05/10/2005

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.