SEC Form 4	
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## FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

OMB Number:	3235-0287							
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	Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).
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# STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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 Addres	1 0	on*	2. Issuer Name <b>and</b> Ticker or Trading Symbol Autodesk, Inc. [ ADSK ]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
<u>Anagnost Andrew</u>			,,,,,	X	Director	10% Owner		
(Last)	.ast) (First) (Middle)		3. Date of Earliest Transaction (Month/Day/Year)	x	Officer (give title below)	Other (specify below)		
111 MCINNIS PARKWAY AUTODESK, INC.			12/03/2021	President and CEO				
(Street)			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line)	idual or Joint/Group Filing	g (Check Applicable		
SAN RAFAEL	CA	94903		X	Form filed by One Repo Form filed by More thar	, in the second		
(City)	(State)	(Zip)			Person			

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

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)						5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Transaction(a)		(1150. 4)
Common Stock	12/03/2021		S		4,724	D	\$256.27	0(1)	Ι	Family Trust <sup>(2)</sup>
Common Stock								67,496 <sup>(3)</sup>	D	

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2	3. Transaction	3A. Deemed	4		5. Nu	mhor	6. Date Exerc	icable and	7. Titl	o and	9 Drice of	9. Number of	10.	11. Nature	
Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Iransaction Date (Month/Day/Year)	Execution Date, if any	4. Transa Code ( 8)		of Deriv Secu Acqu (A) of Dispo of (D)	Expiration Date (Month/Day/Year) irites ired r osed ) . 7, 3, 4		Month/Day/Year) Securities Underlying Derivative		Securities Underlying Derivative Security (Instr. 5) 3 and 4) Security (Instr. 5) Security (Instr. 5) Security (Instr. 5) Security Security (Instr. 5) Security Secur		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	s Form: Illy Direct (D) or Indirect g (I) (Instr. 4)	of Indirect Beneficial Ownership (Instr. 4)	ip of Indirect Beneficial ) Ownership ct (Instr. 4)
				Code	v	(A) (D)		Date Exercisable	Expiration Date	Title	Amount or Number of Shares					

### Explanation of Responses:

1. Reflects the transfer of 4,724 shares from the Reporting Person's spouse to the Family Trust (as defined below) prior to the transactions reported on this line.

2. Shares are beneficially owned by the VNTC Cottee Andrew Anagnost and Marie Burkhart Family Support Trust ("Family Trust"), of which Vanguard National Trust Company, Marie Burkhart, and the Reporting Person are trustees. The Reporting Person does not have voting or dispositive power over such shares and disclaims beneficial ownership of such shares except to the extent of any pecuniary interest therein.

3. The total securities beneficially owned includes 56,201 shares of unvested Restricted Stock Units.

### **Remarks:**

<u>Melissa Hoge, Attorney-in-</u> <u>Fact for Andrew Anagnost</u>

12/07/2021

\*\* 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.