Edgar Filing: AUTODESK INC - Form 4

AUTODESK	K INC									
Form 4										
October 06, 2	2014									
FORM	14							OMB AF	PROVAL	
	UNITED	STATES SEC V	URITIES AN Vashington, I			NGE CO	OMMISSION	OMB Number:	3235-0287	
Check th								Expires:	January 31,	
	if no longer subject to STATEMENT OF CHANGES IN BENEF					L OWN	ERSHIP OF	Estimated average		
Section 1	6. SECURITIES							burden hours per		
Form 4 o Form 5								response	0.5	
obligatio	n o *	suant to Section				•				
may cont			•	•	· ·	•	1935 or Section	l		
<i>See</i> Instru 1(b).	uction	30(n) of the	Investment C	ompan	у Ас	t of 1940	J			
(Print or Type I	Responses)									
			2. Issuer Name and Ticker or Trading Symbol AUTODESK INC [ADSK]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
			h/Day/Year)				XDirector		Owner	
111 MCINN	NIS PARKWAY	10/03	6/2014				Officer (give t below)	below)	r (specify	
(Street)		4. If A	4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check			
		Filed(Month/Day/Year)				Applicable Line)			
SAN RAFA	EL, CA 94903						_X_ Form filed by O Form filed by Mo Person			
(City)	(State)	(Zip) T	able I - Non-De	rivative	Secur		ired, Disposed of,	or Beneficiall	v Owned	
1.Title of	2. Transaction Date					_	5. Amount of		-	
Security	(Month/Day/Year)	Execution Date,		4. Securit (A) or Di			Securities	6. Ownership	7. Nature of Indirect	
(Instr. 3)	` ` ´	any	Code (Code (Instr. 3, 4 and 5)				Form: Direct		
		(Month/Day/Yea	r) (Instr. 8)	(Instr. 8)			Owned Following	(D) or Indirect (I)	Ownership	
							Following Reported	Indirect (I) (Instr. 4)	(Instr. 4)	
					(A) or		Transaction(s)	· · ·		
			Code V A	Amount		Price	(Instr. 3 and 4)			
Common Stock	10/03/2014				D	\$ 58.472	16,484	D		

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

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. 6. Date Exercisable a onNumber Expiration Date of (Month/Day/Year) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr	
			Code V	,		Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships								
	Director	10% Owner	Officer	Other					
RAFAEL BETSY 111 MCINNIS PARKWAY SAN RAFAEL, CA 94903	Х								
Signatures									
Andy Sewell, Attorney-in-Fact Rafael	beth	10/06/2014							
<u>**</u> Signature of Reporting Pe		Date							

Explanation of Responses:

* 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. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.