

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 08/04/2021

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in liqu of such endorsement(s).

It St	UBROGATION IS WAIVED, subjec	et to the terms a	nd conditions of th	ie policy, certain po	olicies may i	require an endor	sement. A sta	atement on
this	certificate does not confer rights	to the certificate	holder in lieu of su	uch endorsement(s))_			
PRODUCER			CONTACT Willis Towers Watson Certificate Center NAME:					
	llis Towers Watson Insurance Services West, Inc.			PHONE (A/C, No, Ext): 1-877-945-7378 FAX (A/C, No): 1-888-467-2378			-467-2378	
	Box 305191			E-MAIL ADDRESS: Certific	cates@willi			
Nashv	ille, TN 372305191 USA			INS	URER(S) AFFOR	RDING COVERAGE		NAIC#
				INSURER A: ACE Ame	erican Insu	rance Company		22667
INSURE	=			INSURER B: Travele	ers Propert	y Casualty Cor	mpany of Ame	25674
Autodesk, Inc. 111 McInnis Parkway			INSURER C: Travelers Indemnity Company of CT 25682			25682		
San Ra	afael, CA 94903			INSURER D:				
				INSURER E :				
				INSURER F:				
COVE	RAGES CE	RTIFICATE NUM	MBER: W21785329			REVISION NUM	BER:	
	S IS TO CERTIFY THAT THE POLICIE							
	CATED. NOTWITHSTANDING ANY R	,						
	TIFICATE MAY BE ISSUED OR MAY	,					JECT TO ALL T	HE TERMS,
	LUSIONS AND CONDITIONS OF SUCH		S SHOWN MAY HAVE					
INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)		LIMITS	

	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	'S
×	COMMERCIAL GENERAL LIABILITY						EACH OCCURRENCE DAMAGE TO RENTED	\$ 1,000,000 \$ 1,000,000
	CLAIMS-MADE COCCUR						MED EXP (Any one person)	\$ 100,000
				CXCD67243808001	08/12/2021	08/12/2022	PERSONAL & ADV INJURY	\$ 1,000,000
GEN	N'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$ 2,000,000
×	POLICY PRO- JECT LOC						PRODUCTS - COMP/OP AGG	\$ 2,000,000
	OTHER:							\$
AUT	OMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
	ANY AUTO			CXCD67243808001	08/12/2021	08/12/2022	BODILY INJURY (Per person)	\$
	AUTOS ONLY AUTOS						,	\$
×	HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY							\$
								\$
	UMBRELLA LIAB X OCCUR				08/12/2021 08	08/12/2022	EACH OCCURRENCE	\$ 5,000,000
×	EXCESS LIAB CLAIMS-MADE			CUP-7K886525-21-I3			AGGREGATE	\$ 5,000,000
	DED X RETENTION \$ 0							\$
	EMPLOYEDELLIA DILITY						X PER OTH- STATUTE ER	
ANY	PROPRIETOR/PARTNER/EXECUTIVE T N	N/A		CXCD67243808001	08/12/2021	08/12/2022	E.L. EACH ACCIDENT	\$ 1,000,000
(Mar	ndatory in NH)	N/A					E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000
							E.L. DISEASE - POLICY LIMIT	\$ 1,000,000
Err	cors & Omissions incld. Cyber			ZPL 71N09330-21-I3	08/12/2021	08/12/2022	Limit:	\$5,000,000
Ret	ro Date: 08/12/1992							
	AUT X WOF AND ANYYOUR OF If yee DES	GEN'L AGGREGATE LIMIT APPLIES PER: X POLICY PRODUCT LOC OTHER: AUTOMOBILE LIABILITY ANY AUTO OWNED AUTOS ONLY HIRED AUTOS ONLY X HIRED AUTOS ONLY WIMBRELLA LIAB X OCCUR CLAIMS-MADE X EXCESS LIAB CLAIMS-MADE X COCUR CLAIMS-MADE	TYPE OF INSURANCE X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: X POLICY PRODUCT LOC OTHER: AUTOMOBILE LIABILITY ANY AUTO OWNED AUTOS ONLY AUTOS ONLY HIRED AUTOS ONLY AUTOS ONLY UMBRELLA LIAB X OCCUR EXCESS LIAB CLAIMS-MADE DED X RETENTION \$ 0 WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below Errors & Omissions incld. Cyber	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: X POLICY PRODUCT LOC OTHER: AUTOMOBILE LIABILITY ANY AUTO OWNED AUTOS ONLY HIRED AUTOS ONLY X AUTOS ONLY WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below Errors & Omissions incld. Cyber	TYPE OF INSURANCE X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: X POLICY PRODUCY JECT LOC OTHER: AUTOMOBILE LIABILITY ANY AUTO OWNED AUTOS ONLY AUTOS ONLY AUTOS ONLY HIRED AUTOS ONLY X AUTOS ONLY WORKERS COMPENSATION AND EMPLOYERS' LIABILITY WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below Errors & Omissions incld. Cyber ZPL 71N09330-21-13	TYPE OF INSURANCE INSD WVD POLICY NUMBER (MM/DD/YYYY) X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR CXCD67243808001 08/12/2021 GEN'L AGGREGATE LIMIT APPLIES PER: X POLICY PROJECT LOC OTHER: AUTOMOBILE LIABILITY ANY AUTO OWNED AUTOS ONLY AUTOS ONLY HRED AUTOS ONLY X NON-OWNED AUTOS ONLY AUTOS ONLY X OCCUR UMBRELLA LIAB X OCCUR EXCESS LIAB CLAIMS-MADE DED X RETENTION \$ 0 WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANYPROPRIETOR PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below Errors & Omissions incld. Cyber ZPL 71N09330-21-13 08/12/2021	TYPE OF INSURANCE INSD WVD POLICY NUMBER (MM/DD/YYYY) (MM/DD/YYYY) X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR CCXCD67243808001 08/12/2021 08/12/2022 GEN'L AGGREGATE LIMIT APPLIES PER: X POLICY PRODUCT LOC OTHER: AUTOMOBILE LIABILITY ANY AUTO OWNED AUTOS ONLY AUTO	TYPE OF INSURANCE INSD WVD POLICY NUMBER (MM/DD/YYY) (MM/DD/YYY) (MM/DD/YYY) (MM/DD/YYY) (MM/DD/YYYY) (MM/DD/YYYYY) (MM/DD/YYYYY) (MM/DD/YYYYY) (MM/DD/YYYYY) (MM/DD/YYYYY) (MM/DD/YYYYY) (MM/DD/YYYYY) (MM/DD/YYYYYY) (MM/DD/YYYYY) (MM/DD/YYYYY) (MM/DD/YYYYYY) (MM/DD/YYYYYY) (MM/DD/YYYYYY) (MM/DD/YYYYYY) (MM/DD/YYYYYYY) (MM/DD/YYYYYYYYYYYYY) (MM/DD/YYYYYYYYYYYYYYYYYYYYYYYYYYYYYYYYY

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

International Policies

The Named Insured includes Autodesk, Inc. and its subsidiaries and affiliates including, but is not limited to the International Policies following:

ADSK Ireland Limited

Assemble Systems, LLC

Autodesk (China) Software Research and Development Co., Ltd.

CERTIFICATE HOLDER	CANCELLATION
	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
Autodesk, Inc. 111 McInnis Parkway San Rafael, CA 94903	AUTHORIZED REPRESENTATIVE Mod Pull

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AGENCY CUSTOMER ID:	
LOC #:	



ADDITIONAL REMARKS SCHEDULE

Page 2 of 3

Willis Towers Watson Insurance Services West, Inc.		NAMED INSURED Autodesk, Inc. 111 McInnis Parkway	
POLICY NUMBER See Page 1		San Rafael, CA 94903	
CARRIER	NAIC CODE		
See Page 1	See Page 1	EFFECTIVE DATE: See Page 1	

ADDITIONAL REMARKS

THIS ADDITIONAL DEMADES FORM IS A SCHEDULE TO ACORD FORM
THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER:25 FORM TITLE: Certificate of Liability Insurance
Autodesk (EMEA) Sárl
Autodesk AB
Autodesk Americas LLC
Autodesk ApS
Autodesk Asia Pte. Ltd.
Autodesk Australia Pty. Ltd.
Autodesk B.V.
Autodesk Canada Co.
Autodesk Colombia, S.A.S.
Autodesk de Argentina S.A.
Autodesk de Mexico, S.A. de C.V.
Autodesk de Venezuela, S.A.
Autodesk Development B.V.
Autodesk Development S.á.r.l.
Autodesk Direct Limited
Autodesk do Brasil Ltda
Autodesk Far East Limited
Autodesk France
Autodesk Ges.mbH
Autodesk Global, Inc.
Autodesk GmbH
Autodesk Holdings LLP
Autodesk Hungary Kft.
Autodesk India Private Limited
Autodesk International Holding Co.
Autodesk Ireland Operations Limited
Autodesk Israel Ltd.
Autodesk Korea Limited
Autodesk Limited
Autodesk Limited
Autodesk Ltd. Japan
Autodesk Netherlands Holdings B.V.
Autodesk S.R.L.
Autodesk S.r.l.
Autodesk SA
Autodesk Software (China) Co., Ltd.
Autodesk Sp. Z o.o.
Autodesk spol. s.r.o.
Autodesk Taiwan Limited
Autodesk UK Holdings Limited
Autodesk Yazilim Hizmetleri Ticaret Limited Sirketi
Autodesk, S.A.
CadSoft Computer GmbH
BuildingConnected, Inc.
Crispin Systems Limited
Delcam (Malaysia) Sdn. Bhd
Delcam Australia Pty Limited
Delcam Consulting and Technology Services Limited
Delcam Indonesia
Delcam Limited

ACORD 101 (2008/01)

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CERT: W21785329

AGENCY CUSTOMER ID:	
1.00 #	



ADDITIONAL REMARKS SCHEDULE

Page 3 **of** 3

AGENCY Willis Towers Watson Insurance Services West, Inc.		NAMED INSURED Autodesk, Inc. 111 McInnis Parkway
POLICY NUMBER		San Rafael, CA 94903
See Page 1		
CARRIER	NAIC CODE	
See Page 1	See Page 1	EFFECTIVE DATE: See Page 1

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER:25 FORM TITLE: Certificate of Liability Insurance
Delcam Partmaker Limited
Delcam Professional Services Limited
Delcam Software (India) Private Limited
Delta Soft LLC
Hankook Delcam Limited
Limited Liability Company Autodesk (CIS)
netfabb GmbH
PlanGrid, Inc.
Shotgun Software, Inc.
TradeTapp, Inc.
Within Technologies Limited
Pype, Inc.
Pype Technologies Private, Ltd.
Innovyze, Inc.
Innovyze Ltd.
Innovyze Pty Ltd.
Innovyze AI, Inc.
Upchain Inc.
Upchain USA Inc.
Upchain d.o.o.

ACORD 101 (2008/01)

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