FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

		ROVA
CHAIC	AFF	RUVA

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

### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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 <u>Karpas Peter J</u>	of Reporting Person*		2. Issuer Name <b>and</b> Ticker or Trading Symbol  INTUIT INC [ INTU ]		onship of Reporting Person( all applicable) Director Officer (give title	s) to Issuer  10% Owner Other (specify
(Last) C/O INTUIT INC 2700 COAST AVI		(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 08/24/2007	, A	SVP, Quicken Heal	below) th Group
(Street) MOUNTAIN VIEW (City)	CA (State)	94043 (Zip)	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indivi	dual or Joint/Group Filing (Cf Form filed by One Reportir Form filed by More than On	ng Person

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

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution Date,		tion str.	4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			Securities Beneficially Owned Following Reported	Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)

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

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. Transac Code (Ir 8)		Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount 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	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)		
Restricted Stock Unit	(1)	08/24/2007		A		17,000		(2)	(2)	Common Stock	17,000	(3)	17,000	D	
Restricted Stock Unit (MSPP Purchased Award)	(1)	08/24/2007		P		1,354		(4)	(4)	Common Stock	1,354	\$27.9	1,354	D	
Restricted Stock Unit ( MSPP Matching Award)	(1)	08/24/2007		A		1,354		(5)	(5)	Common Stock	1,354	(6)	1,354	D	

### Explanation of Responses:

- 1. 1-for-1
- 2. Two step vesting schedule applies to this award. (1) FY08 performance vesting criteria must be met and (2) if that criteria is met, all restricted stock units vest on August 1, 2010.
- 3. Reporting person was awarded the restricted stock units in connection with his employment.
- 4. Restricted Stock Units (MSPP Purchased Award) are fully vested upon grant; however, settlement occurs upon the earlier of three years from grant date or termination of employment.
- 5. Restricted Stock Units (MSPP Matching Award) vest and settle three years from grant date.
- 6. Reporting person was awarded the Restricted Stock Units (Matching Award) in connection with voluntary participation in a management stock purchase program (MSPP).

### Remarks:

/s/ Christina Hall, under a Confirming Statement

08/27/2007

\*\* 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.