## FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

3235-0287 OMB Number:

Estimated average burden hours per response: 0.5

	Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).	
Ц	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 Addres	ss of Reporting Pers	on <sup>*</sup>	2. Issuer Name and Ticker or Trading Symbol       5. Relationship of Reporting Person(s) to Issuer         INTUIT INC [ INTU ]       Director         3. Date of Earliest Transaction (Month/Day/Year)       Officer (give title Other (specify below)         8/20/2010       SVP, Consumer Group         4. If Amendment, Date of Original Filed (Month/Day/Year)       6. Individual or Joint/Group Filing (Check Applicable Line)         X       Form filed by One Reporting Person			
Maurer Dan					Director	10% Owner
(Last)	(First)	(Middle)	-	X		
C/O INTUIT IN		(made)			SVP, Consum	ner Group
2700 COAST AV	VENUE					
(Street)			4. If Amendment, Date of Original Filed (Month/Day/Year)	6 Indiv	idual or Joint/Group Filing	(Check Applicable Line)
MOUNTAIN VIEW	CA	94043	4. In Americanent, Date of Original Flice (Month/Day, Fear)		1 0	, ,
			-		Form filed by More that	n One Reporting Person
(City)	(State)	(Zip)				

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

······································	2. Transaction Date (Month/Day/Year)	Transaction Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			Securities Beneficially Owned Following Reported	(Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
		Code	v	Amount	(A) or (D)	Price	<ul> <li>Transaction(s) (Instr. 3 and 4)</li> </ul>		(1150.4)

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 (li 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 (MSPP Purchased Award)	(1)	08/20/2010		Р		1,832		(2)	(2)	Common Stock	1,832	\$44.6	1,832	D	
Restricted Stock Unit (MSPP Matching Award)	(1)	08/20/2010		A		1,500		(3)	(3)	Common Stock	1,500	\$0 <sup>(4)</sup>	1,500	D	

Explanation of Responses:

1. 1-for-1

2. Restricted Stock Units (MSPP Purchased Award) are fully vested upon grant; however, settlement occurs upon the earlier of three years from grant date or temination of employment.

3. Restricted Stock Units (MSPP Matching Award) vest and settle three years from grant date and may terminate earlier in the event of termination of the reporting person's employment.

4. Reporting person was awarded the Restricted Stock Units (MSPP Matching Award) in connection with voluntary participation in a management stock purchase program (MSPP).

#### Remarks:

# /s/ Christina Hall, under a Confirming Statement

\*\* Signature of Reporting Person

08/23/2010

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.

OMB APPROVAL