FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPRO

OMB Number:	3235-0287
Estimated average burden	
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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

Name and Address of Reporting Person* DALZELL RICHARD L			2. Issuer Name and Ticker or Trading Symbol INTUIT INC [INTU]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
DALZELL KI	<u>лаки L</u>		[]	X	Director	10% Owner			
(Last)	(Eiret)	(Middle)			Officer (give title below)	Other (specify below)			
C/O INTUIT INC.			3. Date of Earliest Transaction (Month/Day/Year) 01/23/2015		,	,			
2700 COAST AVE	ENUE								
(Street) MOUNTAIN VIEW	CA	94043	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individ	dual or Joint/Group Filing (Che Form filed by One Reporting Form filed by More than One	Person			
(City)	(State)	(Zip)							

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

1. Title of Security (Instr. 3)	Date (Month/Day/Year)	Execution Date,	Transaction Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported	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)		5. Numb Derivati Securiti Acquire or Dispo of (D) (II 4 and 5)	ve es d (A) osed nstr. 3,	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Derivative	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)	01/23/2015		A		2,907		01/01/2016 ⁽²⁾	01/23/2022 ⁽³⁾	Common Stock	2,907	\$0	2,907	D	
Restricted Stock Unit	(1)	01/23/2015		A		838		01/01/2016 ⁽⁴⁾	01/23/2022 ⁽³⁾	Common Stock	838	\$0	838	D	
Restricted Stock Unit	(1)	01/23/2015		A		950		01/31/2015 ⁽⁵⁾	01/23/2022 ⁽³⁾	Common Stock	950	\$89.42 ⁽⁶⁾	950	D	

Explanation of Responses:

- 1. 1-for-1
- 2. Represents vesting date for restricted stock units.
- 3. This award is subject to deferred release. The reported date represents the release date for vested restricted stock units. Restricted stock units have no expiration date; they vest or are canceled prior to the vesting date.
- $4. \ Represents \ earliest \ vesting \ date \ for \ these \ restricted \ stock \ units. 50\% \ of \ the \ restricted \ stock \ units \ vest \ on \ each \ of \ 1/1/2016 \ and \ 1/1/2017. \\$
- $5. \ Represents \ earliest \ vesting \ date \ for these \ restricted \ stock \ units. \ 25\% \ of \ the \ awarded \ restricted \ stock \ units \ vest \ on \ each \ of \ 1/31/2015, \ 4/30/2015, \ 7/31/2015, \ and \ 10/31/2015.$
- 6. Fair Market Value of Intuit Inc. Common Stock on date of grant; award pursuant to reporting person's election to receive payment of director's fees in the form of restricted stock units.

Remarks:

/s/ Kerry McLean, by power-of-attorney

01/26/2015

<u>attorney</u>

** 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.