FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

| | | Washington, D.C. 20549 | | OMB Number: | 3235-0287 |
|---|-------------------|--|--|---|-------------------------------|
| | STATEM | ENT OF CHANGES IN BENEFICIAL OWNER | SHIP | Expires: | December 31, 2014 |
| Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). | Fi | led pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 | | Estimated average hours per response: | ge burden 0.5 |
| 1. Name and Address of Reporting Person [*] ADSIT DENNIS | | 2. Issuer Name and Ticker or Trading Symbol <u>INTUIT INC</u> [INTU] | 5. Relationship of Rep (Check all applicable) Director | , | 10% Owner |
| (Last) (First) | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) 06/13/2003 | X Officer (give below) | SVP, Operation | Other (specify below) S |
| (Street) | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Individual or Joint/C X Form filed b | Group Filing (Chec by One Reporting I | , |
| (City) (State) | (Zip) | | Form filed b | y More than One | Reporting Person |
| | Table I - Non-Der | ivative Securities Acquired, Disposed of, or Beneficia | lly Owned | | |

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | Transaction Code (Instr. | | 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) | | 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) | 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) | | |
| Matching Unit Stock Bonus Award | 0 ⁽¹⁾ | 06/13/2003 | | A | | 201 | | 06/13/2007 ⁽²⁾ | 08/08/1988 ⁽³⁾ | Common Stock | 201 | \$ 0 | 201 | D | |

Explanation of Responses:

1.1 - for - 1

2. Matching Unit Stock Bonus Award settles in stock only and automatically vests 4 years from date of grant if reporting person is continuously employed by issuer through vesting date; vesting may be accelerated if reporting person is terminated prior to vesting date

3. Reporting person may elect to defer issuance of stock under Matching Unit Stock Bonus Award to a date not later than the first day of the fiscal year following termination of employment with the issuer.

Janelle M. Wolf under a Confirming Statement ** Signature of Reporting Person

Date

06/16/2003

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.