FORM 4

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

Washington, D.C. 20549

OMB APPROV	0	MB	AP	PF	O	VA
------------	---	----	----	----	---	----

OMB Number:	3235-0287
Estimated average burden	
houre per reenonee:	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).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

purchase or sale issuer that is inte	of equity securities of ended to satisfy the se conditions of Rule enstruction 10.									
1. Name and Addre Burton Eve I	ess of Reporting Pers	son*	2. Issuer Name and Ticker or Trading Symbol INTUIT INC. [ INTU ]		5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Buiton Eve I	<u> </u>		, ,	X	Director	10% Owner				
(Last)	(First)	(Middle)			Officer (give title below)	Other (specify below)				
C/O INTUIT IN	` ,	( 22 2)	3. Date of Earliest Transaction (Month/Day/Year) 07/26/2024							
2700 COAST A	VENUE		07/20/2024							
(Street)			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv	vidual or Joint/Group Filing	(Check Applicable Line)				
MOUNTAIN VIEW	CA	94043		X	Form filed by One Rep Form filed by More than	orting Person n One Reporting Person				
(City)	(State)	(Zip)								

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

	2. Transaction Date (Month/Day/Year)	3. Transaction Code (Instr. 8)		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. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		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 Units	(1)	07/26/2024		A		47		07/26/2024 <sup>(2)</sup>	07/26/2031(3)	Common Stock	47	\$633.36 <sup>(4)</sup>	47	D	

## Explanation of Responses:

- 1. 1-for-1.
- 2. Represents vesting date for these restricted stock units.
- 3. Represents release date for these restricted stock units. Restricted stock units do not expire; they either vest or are canceled prior to vesting date.
- 4. Fair Market Value of Intuit Inc. Common Stock on date of grant; restricted stock units awarded pursuant to reporting person's election to receive payment of director's fees in the form of restricted stock units.

s/ Erick Rivero, by power-ofattorney

07/29/2024

\*\* 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.