FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB	APP	PRO	VA
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OMB Number:	3235-0287
Estimated average burden	
	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 or issuer that is inten	e conditions of Rule			
1. Name and Address Tessel Marian	nna		2. Issuer Name and Ticker or Trading Symbol INTUIT INC. [INTU]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify below) below)
(Last) C/O INTUIT INC 2700 COAST AV		(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 08/09/2024	EVP, SBSEG
(Street) MOUNTAIN VIEW	CA	94043	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 Form filed by More than One Reporting Person
(City)	(State)	(Zip)		

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially 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.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr.	(Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	3 and 4)		(111511. 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. Transa Code (I 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 Units (MSPP Purchased Award)	(1)	08/09/2024		A		209		(2)	08/09/2027 ⁽³⁾	Common Stock	209	\$630.2	209	D	
Restricted Stock Units (MSPP Matching Award)	(1)	08/09/2024		A		209		08/09/2027 ⁽⁴⁾	(5)	Common Stock	209	\$0 ⁽⁶⁾	209	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 termination of employment or three years from grant date.
- 3. Represents settlement date for Restricted Stock Units (MSPP Purchased Award); these securities do not expire.
- 4. Represents vesting and settlement date for Restricted Stock Units (MSPP Matching Award).
- 5. Restricted Stock Units (MSPP Matching Award) do not expire; they either vest or are canceled prior to vesting date.
- 6. Reporting person was awarded the Restricted Stock Units (MSPP Matching Award) in connection with voluntary participation in a management stock purchase program (MSPP).

/s/ Erick Rivero, by power-ofattorney

08/13/2024

** 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.