FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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| OMB Number: | 3235-0287 |
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| hours per response: | 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 purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

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 Address of Reporting Person* Hotz Lauren D | | | 2. Issuer Name and Ticker or Trading Symbol INTUIT INC. [INTU] | | onship of Reporting Person(s) all applicable) Director Officer (give title below) | to Issuer 10% Owner Other (specify below) | |
|---|---------|----------|--|--|--|---|--|
| (Last) C/O INTUIT INC 2700 COAST AVI | | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) 06/27/2025 | | SVP, Chief Accounting Officer | | |
| (Street) MOUNTAIN VIEW CA 94043 | | 94043 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | dual or Joint/Group Filing (Chec 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 | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transac Code (Ir 8) | | | (D) (Instr. 3, 4 and 5) | | Securities Beneficially Owned | Form: Direct (D) or Indirect | 7. Nature of Indirect Beneficial Ownership |
|---------------------------------|------------|---|---------------------------------|---|-----------|-------------------------|---------------------------|----------------------------------|---------------------------------|--|
| | | | Code | v | Amount | (A) or (D) | Price | (Instr. 3 and 4) | | (Instr. 4) |
| Common Stock | 06/27/2025 | | S | | 1,738.347 | D | \$784.0867 ⁽¹⁾ | 454.5452 ⁽²⁾ | D | |

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 | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transac Code (li 8) | | Derivative E | | 6. Date Exerc Expiration Day/\(\text{(Month/Day/\)}\) | ate | Securities Underlying Derivative Security (Instr. | | Derivative Security (Instr. 5) | Reported | 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) | | |

Explanation of Responses:

1. This transaction was executed in multiple trades ranging from \$784.0867 to \$784.135. The price reported above reflects the weighted average sales price. The reporting person hereby undertakes to provide upon request to the SEC staff, the issuer, or a security holder of the issuer full information regarding the number of shares and prices at which the transaction was effected.

2. Includes 2.84 shares acquired by the reporting person on 6/15/2025 through the Intuit Inc. Employee Stock Purchase Plan.

Remarks:

/s/ Erick Rivero, by power-ofattorney

06/27/2025

** 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.