### Edgar Filing: INTUIT INC - Form 4

INTUIT INC Form 4	2										
July 05, 201	7										
FORM	14								OMB AF	PROVAL	
	UNITED	STATES		RITIES A shington,			NGE C	OMMISSION	OMB Number:	3235-0287	
Check th if no lon; subject to Section 1 Form 4 c Form 5	ger o <b>STATEM</b> 16. or	FATEMENT OF CHANGES IN BENEFICIAL OWN SECURITIES							Estimated average burden hours per response		
obligatio may con <i>See</i> Instr 1(b).	tinue. Section 17(a uction	a) of the I	Public U		ding Cor	npan	y Act of	e Act of 1934, 1935 or Sectior 0	1		
(Print or Type ]	Responses)										
1. Name and Address of Reporting Person <u>*</u> Goodarzi Sasan K			2. Issuer Name <b>and</b> Ticker or Trading Symbol INTUIT INC [INTU]				ng	5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (M	Aiddle)	3. Date of Earliest Transaction				(Check	c all applicable	)		
C/O INTUI AVENUE	T INC., 2700 CO.	AST	(Month/E 07/01/2	-				Director X_ Officer (give below) EVP, Sma		Owner r (specify oup	
	(Street)			endment, Da nth/Day/Year	-	ıl		6. Individual or Joi Applicable Line) _X_ Form filed by O	ne Reporting Per	son	
MOUNTAI	IN VIEW, CA 940	)43						Form filed by M Person	ore than One Rej	porung	
(City)	(State)	(Zip)	Tabl	le I - Non-D	Derivative	Secur	ities Acq	uired, Disposed of,	or Beneficiall	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Transaction Date2A. Deemedonth/Day/Year)Execution Date, if any (Month/Day/Year)		3. 4. Securities Acquired Transactior(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or			d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common				Code V	Amount	(D)	Price	(msu: 5 and 4)			
Stock	07/01/2017			М	4,233	А	\$0	4,233	D		
Common Stock	07/01/2017			М	5,827	А	\$0	10,060	D		
Common Stock	07/01/2017			М	6,258	А	\$0	16,318	D		
Common Stock	07/01/2017			F	7,417	D	\$ 132.81	8,901	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

#### Edgar Filing: INTUIT INC - Form 4

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 control number.

# 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. 5. Number Transaction Derivative Code Securities (Instr. 8) 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 Underlying Securities (Instr. 3 and 4)	
				Code V (	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Restricted Stock Unit	<u>(1)</u>	07/01/2017		М	4,233	07/01/2017(2)	(3)	Common Stock	4,233
Restricted Stock Unit	(1)	07/01/2017		М	5,827	07/01/2017(2)	(3)	Common Stock	5,827
Restricted Stock Unit	<u>(1)</u>	07/01/2017		М	6,258	07/01/2017(2)	(3)	Common Stock	6,258

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships						
reporting officer runner readers	Director	10% Owner	Officer	Other			
Goodarzi Sasan K C/O INTUIT INC. 2700 COAST AVENUE MOUNTAIN VIEW, CA 94043			EVP, Small Business Group				
Signatures							
/s/ Kerry McLean, by power-of-attorney		07/05/20	17				

\*\*Signature of Reporting Person

Date

### **Explanation of Responses:**

\* 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).

(1) 1-for-1

(2) Represents vest date for Restricted Stock Units.

### Edgar Filing: INTUIT INC - Form 4

(3) Restricted Stock Units do not expire; they either vest or are cancelled prior to vest date.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.