## Edgar Filing: INTUIT INC - Form 4

Form 4 March 12, 2									
March 12, 2007 FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								PPROVAL 3235-0287	
Check th if no lon subject to Section Form 4 Form 5 obligation may cor <i>See</i> Insta 1(b).	so 16. or Filed pur <sup>Dns</sup> section 17(	rsuant to Section (a) of the Public I	OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES o Section 16(a) of the Securities Exchange Act of 1934, e Public Utility Holding Company Act of 1935 or Section h) of the Investment Company Act of 1940					January 31, Expires: 2005 Estimated average burden hours per response 0.5	
(Print or Type	Responses)								
STIEFLER JEFFREY E Symbol			Issuer Name <b>and</b> Ticker or Trading bol FUIT INC [INTU]			5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Mon			Date of Earliest Transaction Ionth/Day/Year) 8/09/2007			Director 10% Owner X Officer (give title Other (specify below) below) SVP,Financial Institutions Div			
			onth/Day/Year) Applicable Line)				oint/Group Filing(Check		
MOUNTA	IN VIEW, CA 94	043				Form filed by Person	More than One R	eporting	
(City)	(State)	(Zip) Ta	ble I - Non-D	<b>Derivative</b>	Securities A	cquired, 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)	3. Transaction Code (Instr. 8) Code V	Disposed (Instr. 3, 4	(A) or 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)	
Reminder: Re	port on a separate line	e for each class of see	curities benef	icially ow	ned directly of	or indirectly.			

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	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and A
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying S
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4

## Edgar Filing: INTUIT INC - Form 4

(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8)	Acquired (A) Disposed of ( (Instr. 3, 4, a) 5)	(D)		
				Code V	(A)	(D) Date Exercisable	Expiration Date	Title
Employee Non-Qualified Stock Option (right to buy)	\$ 28.22	03/09/2007		А	100,000	02/06/2009 <u>(1)</u>	03/08/2014	Common Stock
Restricted Stock Unit	<u>(3)</u>	03/09/2007		А	100,000	(4)	(4)	Common Stock

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships					
r o o	Director	10% Owner	Officer	Other		
STIEFLER JEFFREY E C/O INTUIT INC. 2700 COAST AVENUE MOUNTAIN VIEW, CA 94043			SVP, Financial Institutions Div			
Signatures						
/s/ Christina Hall, under a Confirm Statement	ning		03/12/2007			
**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) Pro-rata vesting for options may occur under certain circumstances if the reporting person's employment with the issuer terminates prior to February 6, 2009.
- (2) Reporting person was awarded the options in connection with his employment.
- (3) 1-for-1

Two-step vesting schedule applies to this award: (1) performance vesting criteria must be met and (2) if that criteria is met, all shares vest(4) on August 6, 2009. Vesting for restricted stock units may occur under certain circumstances if the reporting person's employment with the issuer terminates prior to August 6, 2009.

(5) Reporting person was awarded the restricted stock units in connection with his employment.

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.