

INTUIT INC

Form 4

August 02, 2005

**FORM 4****UNITED STATES SECURITIES AND EXCHANGE COMMISSION  
Washington, D.C. 20549**

OMB APPROVAL

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subject to  
Section 16.  
Form 4 or  
Form 5  
obligations  
may continue.  
See Instruction  
1(b).**STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF  
SECURITIES**Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,  
Section 17(a) of the Public Utility Holding Company Act of 1935 or Section  
30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person \*  
**BENNETT STEPHEN M**

(Last) (First) (Middle)

**C/O INTUIT INC., 2700 COAST  
AVENUE**

(Street)

**SAN JOSE, CA 94043**

(City) (State) (Zip)

2. Issuer Name and Ticker or Trading  
Symbol**INTUIT INC [INTU]**3. Date of Earliest Transaction  
(Month/Day/Year)**07/29/2005**4. If Amendment, Date Original  
Filed(Month/Day/Year)5. Relationship of Reporting Person(s) to  
Issuer

(Check all applicable)

☒ Director ☐ 10% Owner  
☒ Officer (give title below) ☐ Other (specify  
below)

President, CEO &amp; Director

6. Individual or Joint/Group Filing(Check  
Applicable Line)☒ Form filed by One Reporting Person  
☐ Form filed by More than One Reporting  
Person**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)	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 Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
				(A) or (D)			
			Code	V	Amount		Price

Reminder: Report on a separate line for each class of securities beneficially owned directly 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.**SEC 1474  
(9-02)**Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned  
(e.g., puts, calls, warrants, options, convertible securities)**

1. Title of Derivative Security	2. Conversion or Exercise	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any	4. Transaction Code	5. Number of Derivative Securities	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount Underlying Security (Instr. 3 and 4)
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(Instr. 3)	Price of Derivative Security	(Month/Day/Year)	(Instr. 8)	Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)							
			Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Am Nun Sha	
Employee Non-Qualified Stock Option (right to buy)	\$ 48	07/29/2005	A		100,000		<u>(1)</u>	07/28/2012	Common Stock	10	
Restricted Stock Unit	<u>(3)</u>	07/29/2005	A		50,000		<u>(4)</u>	07/28/2012	Common Stock	50	

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
BENNETT STEPHEN M C/O INTUIT INC. 2700 COAST AVENUE SAN JOSE, CA 94043	X		President, CEO & Director	

## Signatures

/s/ Jeanine Corr, under a Confirming Statement 08/02/2005

\*\*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) 50% of the options vest on July 29, 2007; the remaining options vest on July 29, 2008.
- (2) Reporting person was awarded the option shares in connection with his employment.
- (3) 1-for-1.

(4) Two step vesting schedule applies to this award. (1) FY06 performance vesting criteria must be met by reporting person and (2) if that criteria is met, all shares vest on July 29, 2008. If the FY06 performance criteria is not met the award terminates. Prorated vesting and vesting acceleration may occur upon the reporting person's termination under certain conditions.

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.