FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

|  | OMB APP              | KOV/  |
|--|----------------------|-------|
| STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP | OMB Number:          | 32    |
| OTATEMENT OF STANGES IN BENEFICIAL SWITCH    | Estimated average by | ırdon |

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

| OMB APPROVAL             |           |  |  |  |  |  |  |  |  |
|--------------------------|-----------|--|--|--|--|--|--|--|--|
| OMB Number:              | 3235-0287 |  |  |  |  |  |  |  |  |
| Estimated average burden |           |  |  |  |  |  |  |  |  |
| hours per response       |           |  |  |  |  |  |  |  |  |

|  |   |  |   |                 | or   | Secti   | on 30(h           | ) of the | e Investm   | ent Co | mpany Ac           | t of 194   | )   |  |   |   |    |  |  |
|--|---|--|---|-----------------|--|---|-------------------|----------|---|--------|--------------------|--|---|--|---|---|----|--|--|
| Name and Address of Reporting Person*     SERATI TAMMY S |   |  |   |                 | 2. Issuer Name <b>and</b> Ticker or Trading Symbol H&R BLOCK INC [ HRB ] |   |                   |          |   |        |                    |  |   | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  |   |   |    |  |  |
| (Last)<br>4400 MA  | ast) (First) (Middle)   |  |   |                 |  | 3. Date of Earliest Transaction (Month/Day/Year) 04/01/2005 |                   |          |   |        |                    |  |   |  | X Officer (give title below)  Senior VP, Human Resources          |   |    |  | ·  |
| (Street)  KANSA  (City)                                  | S CITY M  | State)                                     | 64111<br>(Zip)                                |                 | -  | 4. If Amendment, Date of Original Filed (Month/Day/Year)    |                   |          |   |        |                    |  | Lin   | Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person |   |   |    |  |  |
|  |   |  | le I - Noi                                    |                 |  | _   |                   |          | <u> </u>  | l, Dis | <del>.</del>       |  |   |  | lly Owne  |   |    |  |  |
| 1. Title of Security (Instr. 3)  2. Trans Date (Month/   |   |  |   | Execution Date, |  |   | Code (Instr.   5) |          |   |        |                    |  | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4) |  | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |   |    |  |  |
|  |   |  |   |                 |  |   |                   |          | Code  | v      | Amount             | : (/   | (A) or<br>(D) Pr  |  | Transaction(s)<br>(Instr. 3 and 4)                                |   |    |  | (111511.4)   |
| Common Stock, without par value 04/0                     |   |  |   | 04/0            | 1/2005   | 2005  |                   |          | <b>J</b> <sup>(1)</sup>                                 | 1      | 0.84               | 0.841 A \$   |   | \$50   | 36 5,66   | 5,661.5292  |    | D  |  |
|  |   | 1  |   |                 |  |   |                   |          |   |        | osed of<br>convert |  |   |  | y Owned   |   |    |  |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)      | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deeme<br>Execution<br>if any<br>(Month/Da | Date,           | 4.<br>Transactio<br>Code (Inst<br>8)                                     |   | n of              |          | 6. Date Exercisal<br>Expiration Date<br>(Month/Day/Year |        | •                  | 7. Title and Amo<br>of Securities<br>Underlying<br>Derivative Secu<br>(Instr. 3 and 4) |   | curity   | 8. Price of<br>Derivative<br>Security<br>(Instr. 5)               | 9. Number<br>derivative<br>Securities<br>Beneficial<br>Owned<br>Following<br>Reported<br>Transactio<br>(Instr. 4) | ly | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |
|  |   |  |   |                 | Code   | v   | (A)               | (D)      | Date<br>Exercisa  |        | Expiration<br>Date | Title  | or<br>Nu<br>of  | umber  |   |   |    |  |  |
| Call<br>Option to<br>Purchase                            | \$39.03   |  |   |                 |  |   |                   |          | 12/02/20  | 004 1  | 2/02/2012          | Comm<br>Stock<br>witho<br>par val  | it 20   | 0,000  |   | 20,000  | )  | D  |  |
| Call<br>Option to<br>Purchase                            | \$43.25   |  |   |                 |  |   |                   |          | 06/30/20  | 004    | 06/30/2013         | Comm<br>Stock<br>witho<br>par val  | it 14   | 4,000  |   | 14,000  | )  | D  |  |
| Call<br>Ontion to  | p47.60  |  |   |                 |  |   |                   |          | 06/20/20  | 05 (   | 06/20/2014         | Comm   |   | 4.000  |   | 14.000  |    | D.   |  |

## **Explanation of Responses:**

1. Units acquired through dividend reinvestment under the H&R Block Deferred Compensation Plan for Executives, as Amended and Restated. Each unit has the value of one share of Common Stock.

## Remarks:

Purchase

By: Michael K. Post per Power 04/05/2005 of Attorney

\*\* Signature of Reporting Person

par value

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.