FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number: Estimated average burden hours per response: 0.5

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

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1. Name and Address of Reporting Person* WILSON BRET G					2. Issuer Name and Ticker or Trading Symbol H&R BLOCK INC [HRB]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify						
(Last) (First) (Middle) 4400 MAIN STREET					3. Date of Earliest Transaction (Month/Day/Year) 10/03/2005										X Officer (give title Offier (specify below) Vice President and Secretary					
(Street) KANSAS CITY MO 64111				4. 11	4. If Amendment, Date of Original Filed (Month/Day/Year)										Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City) (State) (Zip)																				
1 Tidle of	Caarreiter (Inca		le I - No			_			cquired,	Dis	·	-			_		6.0	umorohin	7 Noturo	
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da					ar)	2A. Deemed Execution Date, if any (Month/Day/Year)		e, Transa Code (Transaction D Code (Instr. 5		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			5. Amou Securiti Benefic Owned Reporte	es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	unt (A) or (D)		Transa (Instr. 3		tion(s)				
Common Stock, without par value 10/03				3/2005	2005			J ⁽¹⁾		12.02	23 A \$		23.87	7,524.111			D			
		7	able II -						quired, C s, optior						Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Executior if any (Month/Da	Date,	4. Transactio Code (Instr 8)		on of E		Expiration	i. Date Exercisable and Expiration Date Month/Day/Year)		7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		rity (I	. Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisab		xpiration ate	Title	Amo or Num of Shai	ber						
Call Option to Purchase	\$12.5								06/30/200	2 0	6/30/2009	Common Stock, without par value	24,0	000		24,000)	D		
Call Option to Purchase	\$8.0938								06/30/200	3 0	6/30/2010	Common Stock, without par value	17,2	200		17,200)	D		
Call Option to Purchase	\$16.1375								06/30/200	4 0	6/30/2011	Common Stock, without par value	16,0	000		16,000)	D		
Call Option to Purchase	\$23.075								06/30/200	4 0	6/30/2012	Common Stock, without par value	8,0	00		8,000		D		
Call Option to Purchase	\$21.625								06/30/200	4 0	6/30/2013	Common Stock, without par value	5,6	00		5,600		D		
Call Option to Purchase	\$23.84								06/30/200	5 0	6/30/2014	Common Stock, without par value	5,0	00		5,000		D		
Call Option to Purchase	\$29.175								06/30/200	6 0	6/30/2015	Common Stock, without par value	5,6	00		5,600		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:

By: Michael K. Post per Power of Attorney

10/05/2005

** 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.											