FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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

| 1. Name and Address of Reporting Person* TRUBECK WILLIAM L | | | | | | 2. Issuer Name and Ticker or Trading Symbol H&R BLOCK INC [HRB] | | | | | | | | | | eck all appli Directo | cable) or | g Pers | son(s) to Issi 10% Ow | /ner |
|---|---|--|--|--------------------|------------------------------|---|---|-------|------|---|------|---|--------------------------------|-------------------------------|-------------------------------------|--|---|---------------|--|--|
| (Last) (First) (Middle) ONE H&R BLOCK WAY | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 12/15/2006 | | | | | | | | | | Officer (give title below) Executive VP and CFO | | | | pecify |
| (Street) KANSAS CITY MO 64105 | | | | | 4.1 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | Line | X Form filed by One Reporting Person Form filed by More than One Reporting | | | | |
| (City) | (City) (State) (Zip) | | | | | | | | | | | | | Person | | | | | | |
| | | Tak | le I - No | n-Deri | vativ | e Se | curit | ies A | cqu | ired, | Disp | osed | of, o | r Ber | neficiall | y Owned | l | | | |
| 1. Title of Security (Instr. 3) 2. Trans. Date (Month/I | | | | | | ear) | 2A. Deemed Execution Date, if any (Month/Day/Year) | | | 3. Transac Code (I 8) | | 4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4 5) | | | | | es ally Following | Form (D) o | n: Direct r Indirect Instr. 4) | 7. Nature of Indirect Beneficial Ownership |
| | | | | | | | | | | Code | v | Amount | t | (A) or (D) | Price | Reported Transact (Instr. 3 | tion(s) | | | (instr. 4) |
| Common Stock, without par value 12/ | | | | | | 5/2006 | | | | J ⁽¹⁾ | | 20.8 | 33 | A | \$23.7 | 5 52,14 | 52,144.033 | | D | |
| Common Stock, without par value | | | | | | | | | | | | | | | 394 | 394.651 | | | By 401(k) | |
| | | | Table II - | Deriva (e.g., ¡ | | | | | | | | | | | | Owned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deeme Execution if any (Month/Day | Date, | 4. Transa Code (8) | | of E | | | Date Exercisal xpiration Date Month/Day/Year) | | e and 7. Title a of Secur Underlyi Derivativ (Instr. 3 : | | curities rlying ative S | s ecurity | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4) | i lly | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | | | e rcisable | | piration te | Title | l c | Amount or Number of Shares | | | | | |
| Call Option to Purchase | \$24.905 | | | | | | | | 10/0 | 04/2005 | 10/ | 04/2014 | Comr Stoc with par va | k, out | 100,000 | | 100,00 | 0 | D | |
| Call Option to Purchase | \$29.175 | | | | | | | | 06/3 | 30/2006 | 06/ | 30/2015 | Comr Stoc with par va | k, out | 100,000 | | 100,00 | 0 | D | |
| Call Option to Purchase | \$23.86 | | | | | | | | 06/3 | 30/2007 | 06/ | 30/2016 | Comr Stoc with | k, out | 125,000 | | 125,00 | 0 | D | |

Explanation of Responses:

1. Units acquired 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: Bret G. Wilson per Power of Attorney

12/18/2006

** 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.