FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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l	OMB APPRO	VAL
	OMB Number:	3235-0287
l	Estimated average burd	en
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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

					OI.	Section .	1 30(11	יו טו נוו	e ilives	unent	Company Act	. 01 1940								
1. Name and Address of Reporting Person* FRIGON HENRY F						H&R BLOCK INC [HRB] (Che										5. Relationship of Reporting Person(s) to Issuer Check all applicable) X Director 10% Owner				
(Last) (First) (Middle) 4400 MAIN STREET						3. Date of Earliest Transaction (Month/Day/Year) 10/03/2005									Officer (give title below) below)					
(Street) KANSAS CITY MO 64111				L	_ 4.	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S	tate)	(Zip)																	
		Tab	le I -	1				es A		ed, C	Disposed (_						
1. Title of Security (Instr. 3)			2. Transacti Date (Month/Day		Execution		,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)		Beneficially Owned Follow Reported			Form: Dir (D) or Indi		7. Natu Indired Benefi Owner (Instr.	ct cial ship		
								Code	v	Amount	(A) or (D) Price		Transaction(s) (Instr. 3 and 4)		(s) 4)					
		nout par value		10/03/20					J ⁽¹⁾		47	A	\$23.94							
Common	Stock, with	nout par value		10/03/20	005				J ⁽²⁾		28.488	A	\$23.8	14,461.1		196 D				
Common	Stock, with	nout par value												8,0		.000 I		I By Foun		dation ⁽³⁾
		7	Гablе								sposed of , converti				Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Exec if any	eemed ution Date,	4. Transi Code 8)	action	5. Nu of Deriv Secu Acqu (A) o Dispe	umber vative urities uired or osed or r. 3, 4	6. Date Exer Expiration D (Month/Day/ es d		cisable and ate	7. Title and Amou of Securities Underlying Derivative Securi (Instr. 3 and 4)		unt	8. Price of Derivative Security (Instr. 5) Bene Own Folic Repc		ecurities For eneficially Dire wned or I		vnership of Ind	
					Code	v	(A)	(D)	Date Exerc	isable	Expiration Date	Title	Amou or Numb of Share	oer						
Call Option to Purchase	\$12.5					06/30/2000 06/30/2009 Common Stock, without par value 4,000		4,000		D										
Call Option to Purchase	\$8.0938								06/30	/2001	06/30/2010	Commo Stock, without par valu	8,00	00		8,000		8,000 D		
Call Option to Purchase	\$16.1375								06/30	/2002	06/30/2011	Commo Stock, without par valu	12,00	00		12,	12,000 D			
Call Option to Purchase	\$23.075					06/30/2003 06/30/2012 Common Stock, without par value 8,000		8,000		D										
Call Option to Purchase	\$21.625								06/30	/2004	06/30/2013	Commo Stock, without par valu	8,00	00		8,0	000	D		
Call Option to Purchase	\$23.84								06/30	/2004	06/30/2014	Commo Stock, without par valu	8,00	00		8,0	3,000 D			
Call Option to Purchase	\$29.175								06/30	/2005	06/30/2015	Commo Stock, without	8.00	00		8,0	000	D		

Explanation of Responses:

- 1. Units for dividends paid under the H&R Block Stock Plan for Non-Employee Directors. Each unit has the value of one share of Common Stock.
- 2. Units acquired through dividend reinvestment under the H&R Block Deferred Compensation Plan for Directors. Each unit has the value of one share of Common Stock.
- 3. The shares are held by the Frigon Family Foundation, a charitable foundation for which I am a director.

Remarks:

By: Michael K. Post per Power 10/05/2005 of Attorney

Date

** Signature of Reporting Person

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.