1. Name and Address of Reporting Person
Bowen Tony G
C/O H&R BLOCK
ONE H&R BLOCK WAY
KANSAS CITY MO 64105

2. Issuer Name and Ticker or Trading Symbol
H&R BLOCK INC [ HRB ]

3. Date of Earliest Transaction (Month/Day/Year)
08/31/2023

4. If Amendment, Date of Original Filed (Month/Day/Year)

5. Relationship of Reporting Person(s) to Issuer
Officer (give title below)
Chief Financial Officer

6. Individual or Joint/Group Filing (Check Applicable Line)
Form filed by One Reporting Person

Rule 10b5-1(c) Transaction Indication
Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

### Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

<table>
<thead>
<tr>
<th>1. Title of Security (Instr. 3)</th>
<th>2. Transaction Date (Month/Day/Year)</th>
<th>2A. Deemed Execution Date, if any (Month/Day/Year)</th>
<th>3. Transaction Code (Instr. 8)</th>
<th>4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)</th>
<th>5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)</th>
<th>6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)</th>
<th>7. Nature of Indirect Beneficial Ownership (Instr. 4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Common Stock</td>
<td>08/31/2023</td>
<td></td>
<td>A</td>
<td>15,758(1)</td>
<td>$0.0000</td>
<td>178,340.7663</td>
<td>D</td>
</tr>
<tr>
<td>Common Stock</td>
<td>08/31/2023</td>
<td></td>
<td>F</td>
<td>6,134</td>
<td>$39.98</td>
<td>172,206.7663</td>
<td>D</td>
</tr>
</tbody>
</table>

**Explanation of Responses:**
1. Restricted share units granted under the H&R Block, Inc. 2018 Long Term Incentive Plan. The restrictions lapse in three equal installments beginning on the first anniversary of the grant date.

Katharine M. Haynes, per Power of Attorney 09/05/2023

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).
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.