FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									

Check this box if no longer subject to Section 16. Form 4 or Form 5

obligat	ions may conti tion 1(b).			File							rities Exchar ompany Act		L934			hours	per re	sponse:	0.5	
1. Name and Address of Reporting Person* <u>DUBRISH ROBERT E</u>						or Section 30(h) of the Investment Company Act of 1940 2. Issuer Name and Ticker or Trading Symbol H&R BLOCK INC [HRB]								Relationship of Reporting Person(s) to Issue (Check all applicable) Director					wner	
(Last) (First) (Middle) OPTION ONE MORTGAGE CORPORATION 3 ADA					3. Date of Earliest Transaction (Month/Day/Year) 07/19/2005								- X Officer (give title Other (specify below) President and CEO, Option One							
					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) IRVINE CA 92618														X Form filed by One Reporting Person Form filed by More than One Reporting						
(City)	(S	tate)	(Zip)												Persor	1				
			le I - N			_			_	d, Di	sposed o			ially						
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day)					Execution		n Date,	Transaction Code (Instr.		4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 a			d 5)	5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount	(A) or (D)	Price			eported ansaction(s) str. 3 and 4)			(Instr. 4)		
Common	Stock, with	nout par value		07/19/2005					M		8,600	A	\$16.	5.125		5,234		D		
Common	Stock, with	nout par value		07/19/2	2005				M		1,400	A	\$21.0	0625	96	,634		D		
		ד	Table II								posed of converti				wned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deel Execution if any (Month/I	on Date,	4. Transac Code (I 8)	action of		urities uired or oosed O) tr. 3, 4	6. Date I Expiration (Month/I	on Da	te of Secur ear) Underlyi		ies D g S Security (I		Price of erivative ecurity 1str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amour or Number of Shares	er						
Call Option to Purchase	\$16.125	07/19/2005			М			8,600	06/30/1	998	06/30/2007	Common Stock, without par value	8,60	0	\$0	0.00		D		
Call Option to Purchase	\$21.0625	07/19/2005			M			1,400	06/30/1	999	06/30/2008	Common Stock, without par value	1,40	0	\$0	3,346		D		
Call Option to Purchase	\$25								06/30/2	002	06/30/2009	Common Stock, without par value	28,65	52		28,652	2	D		
Call Option to Purchase	\$16.1875								06/30/2	003	06/30/2010	Common Stock, without par value	2			2		D		
Call Option to Purchase	\$32.275								06/30/2	004	06/30/2011	Common Stock, without par value	60,00	00		60,000)	D		
Call Option to Purchase	\$46.15								06/30/2	004	06/30/2012	Common Stock, without par value	90,00	00		90,000)	D		
Call Option to Purchase	\$43.25								06/30/2	004	06/30/2013	Common Stock, without par value	90,00	00		90,000)	D		
Call Option to Purchase	\$47.68								06/30/2	005	06/30/2014	Common Stock, without par value	85,00	00		85,000)	D		

Common

Stock,

without par value 70,000

70,000

D

06/30/2015

06/30/2006

\$58.35

Call Option to Purchase

Remarks:

By: Bret G. Wilson per Power of Attorney

<u>07/20/2005</u>

** 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.