## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	DVAL
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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*  YABUKI JEFFERY W						2. Issuer Name <b>and</b> 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) 04/12/2005										X Officer (give title Other (specify below)  Executive VP and COO					
(Street) KANSAS CITY MO 64111						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 010011									
		Tab	le I - No			_				Dis	- I	of, or Be									
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)						Execution Da			Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			4 and 5) Securiti Benefic		es ally Following	Forn (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									v	Amount	t (A) or (D)		rice Transac (Instr. 3		tion(s)			. ,			
Common Stock, without par value 04/12/					2/2005	2005			J <sup>(1)</sup>		123.63	635 A \$		51.21	63,753.7378		378 D				
Common Stock, without par value															1,272.921(2)				By 401(k)		
			able II -									, or Ben ble sec			wned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/D	n Date,	4. Transa Code (I 8)		of	rities lired r osed ) r. 3, 4	6. Date Ex Expiration (Month/Da	n Date		7. Title and Amou of Securities Underlying Derivative Securit (Instr. 3 and 4)		Do	Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficiall 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	Amou or Numb of Share	oer							
Call Option to Purchase	\$23.1875								09/07/200	02 0	9/07/2009	Common Stock, without par value	80,0	00		80,000	)	D			
Call Option to Purchase	\$16.1875								06/30/200	03 0	6/30/2010	Common Stock, without par value	70,0	00		70,000	)	D			
Call Option to Purchase	\$32.275								06/30/200	04 0	6/30/2011	Common Stock, without par value	90,0	00		90,000		D			
Call Option to Purchase	\$46.15								06/30/200	04 0	6/30/2012	Common Stock, without par value	90,0	00		90,000	)	D			
Call Option to Purchase	\$43.25								06/30/200	04 0	6/30/2013	Common Stock, without par value	90,0	00		90,000	)	D			
Call Option to Purchase	\$47.68								06/30/200	05 0	6/30/2014	Common Stock, without par value	85,0	00		85,000	)	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.
- 2. Units held under the H&R Block Retirement Savings Plan.

## Remarks:

By: Michael K. Post per Power of Attorney

04/14/2005

\*\* 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.