FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APF	PROVAL
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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 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person*  HALE ROGER 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)					
(Last)		irst)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 01/03/2006							$\dashv$	X Director 10% Owne Officer (give title below) Other (special below)					
(Street) KANSAS CITY MO 64111					_ 4. li	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					
(City) (State) (Zip)														Person					
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)					Execution Date,		Transaction Code (Instr. 8)		Disposed	curities Acquired (A) or Reice		Benefi	ies Fo ially (D) Following (I)		n: Direct	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
				01/05	2/2006	10000			Code	V	Amount	(D) P11		(Instr.	3 and 4)		Б		
Common Stock, without par value 01/03/200							J <sup>(1)</sup> 27 A \$24.305 49,954.2178 D  Securities Acquired, Disposed of, or Beneficially Owned									D			
1. Title of Derivative Security (Instr. 3)	itle of 2. 3. Transaction Jake Conversion Date Execution (Month/Day/Year)		(e.g., puts, cal		cal	5. Number		G. Options, converti 6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title an of Securit Underlyin Derivative			9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	i i ily	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercisab		expiration Date	Title	Amount or Number of Shares						
Call Option to Purchase	\$8.1875								06/30/199	)7 C	6/30/2006	Common Stock, without par value	8,000		8,000		D		
Call Option to Purchase	\$8.0625								06/30/199	08 0	6/30/2007	Common Stock, without par value	8,000		8,000	1	D		
Call Option to Purchase	\$10.5313								06/30/199	9 0	6/30/2008	Common Stock, without par value	8,000		8,000		D		
Call Option to Purchase	\$12.5								06/30/200	0 0	6/30/2009	Common Stock, without par value	12,000		12,000		D		
Call Option to Purchase	\$8.0938								06/30/200	1 0	6/30/2010	Common Stock, without par value	12,000		12,000	)	D		
Call Option to Purchase	\$16.1375								06/30/200	)2 (	6/30/2011	Common Stock, without par value	12,000		12,000	0	D		
Call Option to Purchase	\$23.075								06/30/200	3 0	6/30/2012	Common Stock, without par value	8,000		8,000	١	D		
Call Option to Purchase	\$21.625								06/30/200	14 0	6/30/2013	Common Stock, without par value	8,000		8,000		D		
Call Option to Purchase	\$23.84								06/30/200	14 0	6/30/2014	Common Stock, without par value	8,000		8,000		D		
Call Option to Purchase	\$29.175								06/30/200	05 0	6/30/2015	Common Stock, without par value	8,000		8,000		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.

## Remarks:

By: Bret G. Wilson per Power of Attorney 01/04/2006

\*\* 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.