FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| | AIND | | IANGE | COMMINIS | • |
|------------|-------------------------|-------|-------|----------|---|
| Machinaton | $D \subset \mathcal{D}$ | 05/10 | | | |

| OMB APPROVAL | | | | | | | | | | |
|------------------|-----------|--|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | | |
| Estimated averag | e burden | | | | | | | | | |

0.5

hours per response:

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1(0). 31 | ee instruction i | 0. | | | | | | | | | | | | | | | | | | |
|--|--|---------|-----------------|--|----------|--|---|--|-------|----|------------------------------|---|---|--|--|-----------------------------|---|----|----------|---------|
| 1. Name and Address of Reporting Person* Bowen Tony G | | | | 2. Issuer Name and Ticker or Trading Symbol H&R BLOCK INC [HRB] | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | | | | |
| DOWEII | <u> 1011y U</u> | | | | | | | | | | _ | | | | | Direc | | | 10% O\ | |
| - | | | | | \vdash | | | | | | | | | | 1 | belov | er (give title v) | | Other (s | specify |
| (Last) (First) (Middle) | | | | 3. Date of Earliest Transaction (Month/Day/Year) | | | | | | | | Chief Financial Officer | | | | | | | | |
| C/O H&R BLOCK | | | | 08/19/2024 | | | | | | | | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | | | | |
| ONE H&R BLOCK WAY | | | | | | | | | | | | | | | | | | | | |
| | | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable | | | | | | |
| (Street) | | | | | 1 | | | | | | | | | | ine) | _ | | _ | | |
| KANSA | S CITY MO | О 6 | 410 | 5 | 1 | | | | | | | | | | 1 | | filed by One | | Ü | |
| | | | | | | | | | | | | | Form filed by More than One Reporting Person | | | | | | | |
| (City) | (St | ate) (Ž | Zip) | | | | | | | | | | | | | | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Yes | | | Execution Date, | | Tr | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an | | | | nd 5) Secu Bene Owne | | rities For eficially (D ed Following Inc | | n: Direct or rect (I) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | | | | c | Code V | | Am | nount | (A) or (D) | Price | Transaction(s (Instr. 3 and 4 | | ction(s) | (| 4) | (, | |
| Common Stock 08/19/2024 | | | 24 | | | S | | 7 | 9,259 | D | \$65.173 | 36 ⁽¹⁾ | 90,095.4863 | | | D | | | | |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security (Instr. 3) 3. Transaction Date (Month/Day/Year) if any (Month/Day/Year) | | | | ecution Date, | | Transaction of Code (Instr. Derivative | | Expiration Date (Month/Day/Year) | | | Amo Secu Unde Deriv | le and unt of rities rlying rative rity (Instr. | Der Sec | rice of ivative derivative securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4 | | Beneficial Ownership (Instr. 4) | | | |
| | | | | | | | | | | | Amount or Number | | | | | | | | | |

Explanation of Responses:

1. The price is a weighted average of prices within the range of \$64.600 to \$65.690. The reporting person will provide full details of the price information reported upon a request from the Commission or any shareholder

(D)

Date Exercisable

Date

Katharine M. Haynes, per Power of Attorney

08/20/2024

** Signature of Reporting Person

Shares

Title

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).

Code

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.