FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

	OMB APPROVAL								
	OMB Number: 3235-0104 Estimated average burden								
	hours per response	e: 0.5							

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*  CURRY CRAIG R  2. Date of Ev Requiring Sta (Month/Day/) 03/10/2004				nent	3. Issuer Name and Ticker or Trading Symbol HENRY JACK & ASSOCIATES INC [ JKHY ]							
(Last) P.O. BOX 80		(Middle)	-			tionship of Reporting Perso all applicable) Director Officer (give title	son(s) to Issuer  10% Owner  Other (specify		5. If Amendment, Date of Original Filed (Month/Day/Year) 03/10/2004			
663 HIGHWAY 60  (Street)						below)	below)		6. Individual or Joint/Group Filing (Check Applicable Line)			
MONETT	МО	65708							X		y One Reporting Person y More than One erson	
(City)	(State)	(Zip)										
Table I - Non-Derivative Securities Beneficially Owned												
1. Title of Security (Instr. 4)						ally Owned (Instr. 4)			4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Common Stock						61,520 <sup>(1)</sup>	I		by Trust			
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)												
1. Title of Derivative Security (Instr. 4)  2. Date Exercisable Expiration Date (Month/Day/Year)			ate	nd 3. Title and Amount of Securities Underlying Derivative Security (Instr.			4. Convers		cise Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)		
			Date Exercisable	Expiration	n Title		Amount or Number of Shares	Derivative Security		Direct (D) or Indirect (I) (Instr. 5)		

## **Explanation of Responses:**

1. Shares held in trust for a family member for which Mr. Curry serves as trustee.

CRAIG R CURRY

03/11/2004

\*\* 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 5 (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.