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Form	J	J	v	_		

Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

OMB No 1545-0052 2009

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		wise.	Number ar	nd stre	et (or P O box	number if	mail is not	delivered to st	treet	address)	Room/su	ute	R Telen	hone number (see Day	ne 10 of	the instruction	ors)
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1					empt charitable				_	ivate foundat		\dashv	E If pri	vate founda	tion sta	atus wa	is terminate	ed —
ı					sets at end] Ca	ash Acc	rual		unde	er section 507	7(b)(1)	(A), che	ock here .	
	•		m Part II, c	ol (c)			ther (sp						•	foundation				
		▶ \$				1	column	(a) must be	on	cash basis)	· · · · · · · · · · · · · · · · · · ·		unde	er section 507	(b)(1)	```		
L	art l				and Expens		(a) R	evenue and		(b) Net inve	estment	/c) Adius	sted net			Disburse Fr charita	
		may n	ot necessar	ıly equ	nns (b), (c), and ual the amounts	s in í		enses per		incom		"	inco				purpose	
_	,	colúm	n (a) (see pa	age 11	1 of the instruct	ions))		books	_						_	(cas	sh basis	only)
	1	Contribut	ions, gifts gran	ts, etc /	received (attach sch	nedule) .	1	,933,21	.5									
	2	Check	► I if the	e tound ch Sch	dation is not requ	urea to									\perp			
	3	Interest	on savings a	nd temp	porary cash inves	stments		5	8		58			58	3			
	4	Divider	nds and inte	erest fr	rom secunties													
	5a	Gross r	ents															
	ь	Net rent	tal income or	(loss) _											_			
ē					of assets not on	line 10												
Revenue	b		ales price for a in line 6a	ali						•								
ě	7			come	(from Part IV, I	ine 2) .												
œ	8		-		ain													
	9			_	,													
	10 a	Gross sa	les less returr wances	ns														
	ь		ost of goods se															
			-		ach schedule)													
	11				hedule)													
	12				gh 11		1	,933,27	3		58			58	3			
	13	Comper	sation of offi	cers. di	rectors, trustees,	etc									Т			
	14				and wages .													
ses	15				e benefits							ļ .				_		
and Administrative Expenses	1				ule)							RF	CFI	VED	\top			
Ϋ́					schedule)										٦,	1		
ē					(attach schedul						87	١,			ij	2		
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Operating	23				schedule)			332730	_						+			2,000
era	24				ministrative ex			383,16	55								66	3,050
o	-			-	3		1	,515,40				 			+			5,402
	25		=	-	nts paid			, 898, 56							+			8,452
_	26				ents Add lines 2	4 and 25		,,090,36	, ,			-			+		<u> </u>	0,432
	27		ct line 26 fr					21 70	ا ء،	,					-			
	l .			-	es and disburseme			34,70	, 0		58	-						
	1				(if negative, er						28	 						
	C	Adjust	ea net inco	me (ıf	negative, enter	r-U-)	I			ì		1		51	ŭΙ			

D.	art II	Balance Sheets description column should be for end-of-year	Beginning of year	End o	year
	21 41	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	460,108	494,814	494,814
	2	Savings and temporary cash investments			
	3	Àccounts receivable ▶			
ı		Less allowance for doubtful accounts ▶			
	4	Pledges receivable			
	-	Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	•	1			
	_	disqualified persons (attach schedule) (see page 16 of the instructions)	· · · · · · · ·		
	7	Other notes and loans receivable (attach schedule)			
ı	_	Less allowance for doubtful accounts ▶			
ş	8	Inventories for sale or use		-	
Assets	9	Prepaid expenses and deferred charges			
ا≽		Investments - U S and state government obligations (attach schedule)			
j		Investments - corporate stock (attach schedule)			
	11 ^C	Investments - corporate bonds (attach schedule)			
		Less accumulated depreciation (attach schedule)			
	12	Investments - mortgage loans			
- 1	13	Investments - other (attach schedule)			
	14	Land, buildings, and equipment basis			
		equipment basis Less accumulated depreciation (attach schedule)			
	15	Other assets (describe			
	16	Total assets (to be completed by all filers - see the			
1		instructions Also, see page 1, item I)	460,108	494,814	494,814
7	17	Accounts payable and accrued expenses			
	18	Grants payable			
	19	Deferred revenue			
.≌∣	20	Loans from officers, directors, trustees, and other disqualified persons			
<u>=</u>	21	Mortgages and other notes payable (attach schedule)			
쁜	22	Other liabilities (describe			
	22	Other liabilities (describe			
-	23	Total liabilities (add lines 17 through 22)			
+	23				
		Foundations that follow SFAS 117, check here land complete lines 24 through 26 and lines 30 and 31.			
ß		and complete lines 24 through 26 and lines 30 and 31.	460,108		
2	24	Unrestricted	460,100		
ā	25	Temporarily restricted			
8	26	Permanently restricted			
Net Assets or Fund Balan		Foundations that do not follow SFAS 117,			
屲		check here and complete lines 27 through 31. ▶ 🔠			
6	27	Capital stock, trust principal, or current funds			
ets	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
SS	29	Retained earnings, accumulated income, endowment, or other funds			
₹	30	Total net assets or fund balances (see page 17 of the			
ž		instructions)	460,108		
- 1	31	Total liabilities and net assets/fund balances (see page 17			
		of the instructions)	460,108		
P	ar <u>t l</u>	Analysis of Changes in Net Assets or Fund E			- · · · · · · · · · · · · · · · · · · ·
		net assets or fund balances at beginning of year - Part II,		agree wth	
		of-year figure reported on prior year's return)			460,108
				l I	34,706
					494,814
		lines 1, 2, and 3		· · · · · · · · 	434,014
		reases not included in line 2 (itemize)	no E) Port II column (b)		404 014
<u>o</u>	rota	I net assets or fund balances at end of year (line 4 minus li	ine 5) - Paπ II, column (b)	, line 30 6	494,814

Р	art IV Capital Gains	and Losses for Tax on Inve	estment Income	<i>(</i> L) · · ·		· · · · · · · · · · · · · · · · · · ·
	(a) List and 2-story br	describe the kind(s) of property sold (e ick warehouse, or common stock, 200 s	g , real estate, hs MLC Co)	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 <u>a</u>	•					
b	- 					
С						
d	•			-		
<u>e</u>		(0 December allowed	(g) Cost or other basis		(h) Gain or (lo	L
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	plus expense of sale		(e) plus (f) mini	
a						
<u>b</u>						
<u>c</u>						
e						
		nowing gain in column (h) and own	ed by the foundation on 12/31/69	//	Gains (Col (h) g	lain minus
<u> </u>	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (ı) over col (ı), ıf any		(k), but not less Losses (from co	than -0-) or
a					<u> </u>	
<u> </u>						
d	" "					-
е						
		or (loss) as defined in sections 122		2		
	_	line 8, column (c) (see pages 13 a	and the second s	3		
Р		der Section 4940(e) for Redu		ome		
W		the section 4942 tax on the distribution that qualify under section 4940(e)		ase pero	od? [Yes No
		ount in each column for each year,		efore ma	king any entries	
÷	(a)	(b)	(c)		(d)	
С	Base peпod years atendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of nonchantable-use assets		Distribution ((col (b) divided b	
	2008	2,166,037	503,450			4.3024
	2007	1,849,023				2.6884
	2006	1,744,867	564,581			3.0906
	2005	1,461,107	430,422			3.3946
	2004	930,841	400,803			2.3224
						15 7004
2	Total of line 1, column (d)		Alexandra de Company	2		15.7984
3	J	for the 5-year base period - divide dation has been in existence if less	•	3		3.1597
4	Enter the net value of non	charitable-use assets for 2009 fror	m Part X, line 5	4		639,111
5	Multiply line 4 by line 3			5		2,019,399
6	•	nt income (1% of Part I, line 27b)		6		1
				7		2,019,400
8	Enter qualifying distribution of line 8 is equal to or green Part VI instructions on page	eater than line 7, check the box in	n Part VI, line 1b, and complete	8 that part	using a 1% ta	2,178,452 ex rate See the

Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the	e ins	tructio	ns)
	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			
	Date of ruling or determination letter(attach copy of ruling letter if necessary - see instructions)			
ь	Domestic foundations that meet the section 4940(e) requirements in Part V, check			1
	here' ▶ and enter 1% of Part I, line 27b			
	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4%			
	of Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2			
-	Add lines 1 and 2			1
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			- 1
	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-			1
	Credits/Payments			
	2009 estimated tax payments and 2008 overpayment credited to 2009 6a			
	Exempt foreign organizations-tax withheld at source /			
C	Tax paid with application for extension of time to file (Form 8868) 6c			
d	Backup withholding erroneously withheld			
	Total credits and payments Add lines 6a through 6d			
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			1
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
_	t VII-A Statements Regarding Activities			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
ıa	participate or intervene in any political campaign?	1a		x
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19			
	of the instructions for definition)?	1b		x
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities			
c	Did the foundation file Form 1120-POL for this year?	1 c		х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation ►\$(2) On foundation managers ►\$			
9	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	•		
	on foundation managers > \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		х
	If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		х
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4 b		х
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		х
	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	6	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the			İ
	ınstructions) ▶			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8 b	x	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page			۱
	27)? If "Yes," complete Part XIV	9_		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
	names and addresses	10	l	X

	Fo ps (page)	-		Page 5
_	งขึ้ง-PF (2009) t VII-A Statements Regarding Activities (continued)			age o
	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	11		х
	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		х
	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	x	
14	The books are in care of ▶ Jack in the Box Inc. Telephone no ▶ 858-571-253 Located at ▶ 9330 Balboa Avenue, San Diego, CA ZIP+4 ▶ 92123			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	• • •	>	Ш —
Par	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
1a	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. During the year did the foundation (either directly or indirectly) (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No		Yes	<u>No</u>
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?			
	 (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	1b		
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2009?	1 c		х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009?			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)	2 b		
С	to all years listed, answer "No" and attach statement - see page 20 of the instructions.)			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
b	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or		1	

disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?
 b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?

Form 990-PF (2009)

3 b

4a

4b

Form	950-PF (2009)					Page 6
Рa	rt VII-B Statements Regarding Activities for	or Which Form 47	720 May Be Requ	ired (continued)		
5a	During the year did the foundation pay or incur any amou (1) Carry on propaganda, or otherwise attempt to influer (2) Influence the outcome of any specific public election directly or indirectly, any voter registration drive? (3) Provide a grant to an individual for travel, study, or oth (4) Provide a grant to an organization other than a charm section 509(a)(1), (2), or (3), or section 4940(d)(2)? (5) Provide for any purpose other than religious, charital purposes, or for the prevention of cruelty to children of fany answer is "Yes" to 5a(1)-(5), did any of the trans Regulations section 53 4945 or in a current notice regard Organizations relying on a current notice regarding disast if the answer is "Yes" to question 5a(4), does the foundation because it maintained expenditure responsibility for the giff "Yes," attach the statement required by Regulations second the foundation, during the year, receive any funds, or	nt to nce legislation (section i (see section 4955), o ner similar purposes? table, etc., organization isee page 22 of the ins ble, scientific, literary, o ir animals? actions fail to qualify ling disaster assistance ter assistance check he ation claim exemption f rant? tron 53 4945-5(d)	4945(e))? r to carry on, n described in tructions) or educational under the exceptionse (see page 22 of the ere	Yes X No X Yes X Yes X Yes X Yes	5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	
ьа	on a personal benefit contract?	•		Yes X No	.	
b	Did the foundation, during the year, pay premiums, direct				6ь	х
	If "Yes" to 6b, file Form 8870					
7 a	At any time during the tax year, was the foundation a pa	rty to a prohibited tax	shelter transaction?	Yes X No	•	
b	If yes, did the foundation receive any proceeds or have a					
Pa	rt VIII Information About Officers, Directors	TRUMPAGA FALIN				
		, Trustees, Found	dation Managers,	Highly Paid Empl	oyees,	
1	and Contractors List all officers, directors, trustees, foundation m		compensation (see			
1	and Contractors					
	and Contractors List all officers, directors, trustees, foundation m	anagers and their (b) Title, and average hours per week	compensation (see (c) Compensation (If not paid, enter	e page 22 of the instr (d) Contributions to employee benefit plans	uctions). (e) Expense	
STA	and Contractors List all officers, directors, trustees, foundation m (a) Name and address	anagers and their (b) Title, and average hours per week	compensation (see (c) Compensation (If not paid, enter	e page 22 of the instr (d) Contributions to employee benefit plans	uctions). (e) Expense	
STA	and Contractors List all officers, directors, trustees, foundation m (a) Name and address ATEMENT 2	anagers and their (b) Title, and average hours per week	compensation (see (c) Compensation (If not paid, enter	e page 22 of the instr (d) Contributions to employee benefit plans	uctions). (e) Expense	
STA	and Contractors List all officers, directors, trustees, foundation m (a) Name and address ATEMENT 2	anagers and their (b) Title, and average hours per week devoted to position	compensation (see (c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	uctions). (e) Expense other allo	
STA	and Contractors List all officers, directors, trustees, foundation m (a) Name and address ATEMENT 2	anagers and their (b) Title, and average hours per week devoted to position	compensation (see (c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	uctions). (e) Expense other allo	
2	and Contractors List all officers, directors, trustees, foundation m (a) Name and address ATEMENT 2 Compensation of five highest-paid employees (ot	anagers and their (b) Title, and average hours per week devoted to position	compensation (see (c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	uctions). (e) Expense other allo	account,
2	and Contractors List all officers, directors, trustees, foundation m (a) Name and address ATEMENT 2 Compensation of five highest-paid employees (ot If none, enter "NONE."	anagers and their (b) Title, and average hours per week devoted to position her than those inc (b) Title, and average hours per week	compensation (see (c) Compensation (lf not paid, enter -0-)	d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation	uctions). (e) Expense other allo	account,
2	and Contractors List all officers, directors, trustees, foundation m (a) Name and address ATEMENT 2 Compensation of five highest-paid employees (ot If none, enter "NONE."	anagers and their (b) Title, and average hours per week devoted to position her than those inc (b) Title, and average hours per week	compensation (see (c) Compensation (lf not paid, enter -0-)	d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation	uctions). (e) Expense other allo	account,
2	and Contractors List all officers, directors, trustees, foundation m (a) Name and address ATEMENT 2 Compensation of five highest-paid employees (ot If none, enter "NONE."	anagers and their (b) Title, and average hours per week devoted to position her than those inc (b) Title, and average hours per week	compensation (see (c) Compensation (lf not paid, enter -0-)	d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation	uctions). (e) Expense other allo	account,

. . . .▶

Total number of other employees paid over \$50,000

Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc. 1 2 3 3 4 Part IX-B Summary of Program-Related Investments (see page 23 of the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 1 Amount	Part VIII	and Contractors (continued)	yees,
(a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensator Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activates during the tax year include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc. 2 2 3 4 Part IX-B Summary of Program-Related Investments (see page 23 of the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 1	3 Five high	est-paid independent contractors for professional services (see page 23 of the instructions). If none,	enter "NONE."
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc 1 2 3 4 Part IX-B Summary of Program-Related Investments (see page 23 of the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 1			(c) Compensation
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc 1 2 3 4 Part IX-B Summary of Program-Related Investments (see page 23 of the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 1			
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Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount	·		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount			
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount	Part IX-B	Summary of Program-Related Investments (see page 23 of the instructions)	
			Amount
2	1		·
2			
2			
	2		
All other program-related investments. See page 24 of the instructions	All other pro	gram-related investments. See page 24 of the instructions	
3	3		
Total. Add lines 1 through 3	Total. Add I	nes 1 through 3	

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign see page 24 of the instructions.)	gn foundatio	ons,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		-
	purposes		
а	Average monthly fair market value of securities	1a	544,187
b	Average of monthly cash balances	1b	104,657
С	Fair market value of all other assets (see page 24 of the instructions)	1c	
d		1 d	648,844
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3		3	648,844
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see page 25		
		4	9,733
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	639,111
6	Minimum investment return. Enter 5% of line 5	6	31,956
Pa	Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) privation foundations and certain foreign organizations check here and do not complete this privation.	ite operating part)	
1	Minimum investment return from Part X, line 6	1	31,956
2 a	Tax on investment income for 2009 from Part VI, line 5		
b		1	
c	Add lines 2a and 2b	2c	1
3	Add lines 2a and 2b Distributable amount before adjustments Subtract line 2c from line 1	3	31,955
4	Recoveries of amounts treated as qualifying distributions	4	
5		5	31,955
6	Add lines 3 and 4 Deduction from distributable amount (see page 25 of the instructions)	6	·
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
•	line 1 · · · · · · · · · · · · · · · · · ·	7	31,955
_		· · · · · · · · · · · · · · · · · · ·	<u>, , , , , , , , , , , , , , , , , , , </u>
_	Qualifying Distributions (see page 25 of the instructions)	1 1	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		2 170 452
a	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	2,178,452
b		1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	_	
	purposes Amounts set aside for specific charitable projects that satisfy the	2	
3	Amounts set aside for specific charitable projects that satisfy the	_	
а		3a	
b		3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	2,178,452
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	2,178,452
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating we qualifies for the section 4940(e) reduction of tax in those years	vhether the fo	oundation

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Page 9

Form 990-PF (2009)

Рa	rt XIII Undistributed Income (see page	26 of the instructio	ns)		·
		(a)	(b)	(c)	(d)
1	Distributable amount for 2009 from Part XI,	Corpus	Years prior to 2008	2008	2009
	line 7	<u>-</u>			31,955
2	Undistributed income, if any, as of the end of 2009				
	Enter amount for 2008 only				
	Total for prior years 202020				
3	Excess distributions carryover, if any, to 2009				
a	From 2004 910, 893				
b	From 2004 910, 893 From 2005 1, 436, 615				
c	From 2006 1,716,835				
	From 2007 1,814,725				
	From 2008 2,140,861				
	Total of lines 3a through e	8,019,929			
4	Qualifying distributions for 2009 from Part XII,				
•	line 4 ▶ \$ 2,178,452				
а	Applied to 2008, but not more than line 2a				
D	Applied to undistributed income of prior years (Election required - see page 26 of the instructions)				
_	Treated as distributions out of corpus (Election				
С	required - see page 26 of the instructions)				
d	Applied to 2009 distributable amount				31,955
	Remaining amount distributed out of corpus	2,146,497			
5	Excess distributions carryover applied to 2009				
	(If an amount appears in column (d), the same				
6	amount must be shown in column (a)) Enter the net total of each column as				
	indicated below:				1
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	10,166,426			
b	Prior years' undistributed income Subtract		!		
	line 4b from line 2b				
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has been				
	issued, or on which the section 4942(a) tax has				
	been previously assessed				
d	Subtract line 6c from line 6b Taxable				
_	amount - see page 27 of the instructions	-			
θ	Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount - see page				
	27 of the instructions				
f	Undistributed income for 2009 Subtract lines				
	4d and 5 from line 1 This amount must be				
7	distributed in 2010				
•	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the				
8	instructions)				1
•	applied on line 5 or line 7 (see page 27 of the	910,893			
_	instructions)	320,030			
9	Excess distributions carryover to 2010.	9,255,533			1
10	Subtract lines 7 and 8 from line 6a	-,,			
	Excess from 2005 1,436,615				
	Excess from 2006				
	Excess from 2007 1,814,725				
	Excess from 2008 2,140,861				
	Excess from 2009 2,146,497				
	, '				5 000 DE (0000)

_	
Page 10	•
4942(j)(5)	
(e) Total	
 	
more in assets	
y the foundation	
ge portion of the	
does not accept to individuals or	

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other

factors

Part XV Supplementary Information (CC 3 Grants and Contributions Paid Duri	ontinued) ng the Year or App	roved for F	uture Pavment	
Recipient	If recipient is an individual, show any relationship to	Foundation status of		Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	
	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	1,515,402
Total			▶ 3a	1,515,402
b Approved for future payment Total				

r*gross amounts u	inless otherwise indicated	Unrelat	ed business income	Excluded by	section 512, 513, or 514	(e) Related or exempt function income
rogram service rev		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See page 28 of the instructions)
•				-		the metrodicite y
		-		1		
		—				<u> </u>
		—				
			<u>.</u>	-		
		—				
	cts from government agencies					
	and assessments		·	114	58	
-	d temporary cash investments	-		14	30	
	rest from secunties					
	or (loss) from real estate					
	property					
	ced property					-
	(loss) from personal property .					
Other investment ii	ncome					
Sain or (loss) from sa	les of assets other than inventor	у				
let income or (loss	s) from special events					
Gross profit or (los:	s) from sales of inventory					
Other revenue a _	·					
						
_						
				1	1	1
					F.O.	
Subtotal Add colur otal. Add line 12, worksheet in line rt XVI-B Rel	nns (b), (d), and (e)	s to the Acc	lations)	xempt Purp	oses	
t XVI-B Rel e No. Explain the act	columns (b), (d), and (e) 13 instructions on page 28 ationship of Activities below how each acticomplishment of the fi	s to the According for which	lations) complishment of E	xempt Purp	ooses (e) of Part XVI-A cor	ntributed important
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Forn	n 990-PF	(2009)									Pa	ge 1 :
Pa	rt XVI	Information Exempt Orga		ransfers To and	Transa	ctions a	nd Relation	nships	With N	Vonc	harit	able
1	ın se			engage in any of the section 501(c)(3) orga							Yes	No
а	i Irans	fers from the reporting f		ncharitable exempt organ								v
												X
ь	_	transactions					• • • • • • •			1a(2)		
			haritable exempt or	rganization						1b(1)		Х
				cempt organization						1b(2)		Х
				s						1b(3)		Х
												X
				· · · · · · · · · · · · · · · · · · ·								X
_				fundraising solicitations ner assets, or paid employ								$\frac{X}{X}$
				es," complete the following							faır r	
				ces given by the rep	-							
	value	in any transaction of	r sharing arrang	ement, show in colum	nn (d) t	he value o	of the goods,	other a	assets, or	service	es rec	eived
/=\	1	(h) A a a a a a a a -			-4	(4) 0						-4-
(a)	Line no	(b) Amount involved	(c) Name of no	oncharitable exempt organiz	ation	(a) Descr	iption of transfers	, transacti	ons, and shar	nng ama	ngemei	nts
				· · · · · · · · · · · · · · · · · · ·		<u>-</u> -		<u> </u>				
									·			
				···-								
20	lo tho	foundation directly or	undergothy offiliate	ad with as salated to		1						
2 d				ed with, or related to, 01(c)(3)) or in section 52		nore tax-ex	empt organizat	ions des	cribed in	Ye	<u> X</u>	No ا
b		s," complete the following		o . (o)(o)) o oooo o2						·`	~	
		(a) Name of organizatio	n	(b) Type of orga	nization		(c)	Description	on of relations	ship		·
												· ·
		- ·- · · · · · · · · · · · · · · · · ·										
				mined this return, including								
				f preparer (other than taxpa								
	_	racij. V	wons_			2/9//	<u> D</u>	irect	or			
ře	Sı	gnature of officer or trustee				Date		ıtle				
Ŧ					Date		Check if	[[Preparer's number (Se			1
Sign Here	Paid Preparer's Use Only	Preparer's signature					self-employed	▶□	page 30 of t			
	P; rep Use	Firm's name (or yours if		 			Ε	IN ▶				
		self-employed), address	, /									

Phone no

Firm's name (or yours if self-employed), address, and ZIP code

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury

Schedule of Contributors

► Attach to Form 990, 990-EZ, or 990-PF.

OMB No 1545-0047

2009

Internal Revenue Service Employer identification number Name of the organization 33-0776076 JACK IN THE BOX FOUNDATION Organization type (check one) Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor Complete Parts I and II Special Rules For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 331/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and Ш For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals Complete Parts I, II, and III For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

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Employer identification number 33-0776076

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	JACK IN THE BOX 9330 BALBOA AVENUE SAN DIEGO, CA 92123	\$775,000	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	JACK IN THE BOX 9330 BALBOA AVENUE SAN DIEGO, CA 92123	\$\$59,075	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
3	BUNGE OILS 11720 BORMAN DR St Louis MO 63146	\$ 5,250	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
4	CNP SIGNS & GRAPHICS		Person
	4530 MISSION GORGE PLACE SAN DIEGO, CA 92120	\$\$.	Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.		\$ 6, 125	Payroll Noncash (Complete Part II if there is
	SAN DIEGO, CA 92120 (b)	(c)	Payroll Noncash (Complete Part II if there is a noncash contribution)
No.	SAN DIEGO, CA 92120 (b) Name, address, and ZIP + 4 CONAGRA FOODS LAMB WESTON 599 S. RIVERSHORE LANE	(c) Aggregate contributions	Payroll Noncash (Complete Part II if there is a noncash contribution) (d) Type of contribution Person Payroll Noncash (Complete Part II if there is

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Name of organization

JACK IN THE BOX FOUNDATION

Employer identification number 33-0776076

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7	DR.PEPPER 10452 E IDA PLACE GREENWOOD VILLAGE, CO 80111	\$\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
8	EMN8 10070 MESA RIM ROAD SAN DIEGO, CA 92121	\$\$.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
9	FIELDALE FARMS CORP PO BOX 558 BALDWIN, GA 30511	\$\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
10	FLOWERS BAKERIES 4210 EDWARDS RD. DENTON, TX 76208	\$ \$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	4210 EDWARDS RD.	\$ \$ 8,050	Payroll Noncash (Complete Part II if there is
(a)	4210 EDWARDS RD. DENTON, TX 76208 (b)	(c)	Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	4210 EDWARDS RD. DENTON, TX 76208 (b) Name, address, and ZIP + 4 GE CAPITAL 460 S ORANGE AVE, 11TH FLOOR	(c) Aggregate contributions	Payroll Noncash (Complete Part II if there is a noncash contribution) (d) Type of contribution Person Payroll Noncash (Complete Part II if there is

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Employer identification number 33-0776076

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
13	HORIZON MEDIA 1940 CENTURY PARK EAST LOS ANGELES, CA 90067	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
14	HUGHES 11717 EXPLORATION LN GERMANTOWN, MD 20876	\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
15	J.B.HUNT TRANSPORT/DEDICATED CONTRACT SVCS 615 JB HUNT CORPORATE DR. LOWELL, AR 72745	\$7,750	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
	:		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
No.	Name, address, and ZIP + 4 JOHN SOULES FOOD PO BOX 4579	Aggregate contributions	Person X Payroll Noncash (Complete Part II if there is
No. 16 (a)	Name, address, and ZIP + 4 JOHN SOULES FOOD PO BOX 4579 TYLER, TX 75712 (b)	Aggregate contributions 5,250 (c)	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
No. 16 (a) No.	Name, address, and ZIP + 4 JOHN SOULES FOOD PO BOX 4579 TYLER, TX 75712 (b) Name, address, and ZIP + 4 MICHIGAN TURKEY PRODUCERS 1100 HALL ST. S.W.	Aggregate contributions 5,250 (c) Aggregate contributions	Person Payroll Noncash (Complete Part II if there is a noncash contribution) (d) Type of contribution Person Payroll Noncash (Complete Part II if there is

Employer Identification number 33-0776076

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
19	PEAK LIGHTING AND ENERGY		Person X
	PO BOX 6129	\$ 22,500	Payroll Noncash
	SANTA BARBARA, CA 93160		(Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
20	S&D COFFEE, INC.		Person X
	300 CONCORD PARKWAY SOUT	\$	Payroll Noncash
	CONCORD, NC 28027		(Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
21	SABERT		Person X
	1348 E TOLEDO STREET	\$5,250	Payroll Noncash
	GILBERT, AZ 85295		(Complete Part II if there is a noncash contribution)
	(h)	4.	4.10
(a) No	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Type of contribution
No.	Name, address, and ZIP + 4		Type of contribution
No.	Name, address, and ZIP + 4 SCHREIBER FOODS, INC.	Aggregate contributions	Type of contribution Person Payroll
No.	Name, address, and ZIP + 4 SCHREIBER FOODS, INC. 425 PINE STREET	Aggregate contributions	Person Payroll Noncash (Complete Part II if there is
No. 22 (a)	Name, address, and ZIP + 4 SCHREIBER FOODS, INC. 425 PINE STREET GRENN BAY, WI 54307 (b)	\$5,650	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	Name, address, and ZIP + 4 SCHREIBER FOODS, INC. 425 PINE STREET GRENN BAY, WI 54307 (b) Name, address, and ZIP + 4	\$5,650	Person Payroll Noncash (Complete Part II if there is a noncash contribution) (d) Type of contribution
(a) No.	Name, address, and ZIP + 4 SCHREIBER FOODS, INC. 425 PINE STREET GRENN BAY, WI 54307 (b) Name, address, and ZIP + 4 SHOES FOR CREWS	\$ 5,650 Aggregate contributions	Person Payroll Noncash (Complete Part II if there is a noncash contribution) (d) Type of contribution Person Payroll
(a) No.	Name, address, and ZIP + 4 SCHREIBER FOODS, INC. 425 PINE STREET GRENN BAY, WI 54307 (b) Name, address, and ZIP + 4 SHOES FOR CREWS 1400 CENTREPARK BLVD. WEST PALM BEACH, FL 33401 (b)	\$ 5,650 Aggregate contributions (c) Aggregate contributions \$ 5,250	Person Payroll Noncash (Complete Part II if there is a noncash contribution) (d) Type of contribution Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	Name, address, and ZIP + 4 SCHREIBER FOODS, INC. 425 PINE STREET GRENN BAY, WI 54307 (b) Name, address, and ZIP + 4 SHOES FOR CREWS 1400 CENTREPARK BLVD. WEST PALM BEACH, FL 33401	\$ 5,650 Aggregate contributions (c) Aggregate contributions \$ 5,250	Person Payroll Noncash (Complete Part II if there is a noncash contribution) (d) Type of contribution Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	Name, address, and ZIP + 4 SCHREIBER FOODS, INC. 425 PINE STREET GRENN BAY, WI 54307 (b) Name, address, and ZIP + 4 SHOES FOR CREWS 1400 CENTREPARK BLVD. WEST PALM BEACH, FL 33401 (b)	\$ 5,650 Aggregate contributions (c) Aggregate contributions \$ 5,250	Person Payroll Noncash (Complete Part II if there is a noncash contribution) Person Payroll Noncash (Complete Part II if there is a noncash contribution) Person Payroll Noncash (Complete Part II if there is a noncash contribution) (d) Type of contribution Person X
(a) No. 23	Name, address, and ZIP + 4 SCHREIBER FOODS, INC. 425 PINE STREET GRENN BAY, WI 54307 (b) Name, address, and ZIP + 4 SHOES FOR CREWS 1400 CENTREPARK BLVD. WEST PALM BEACH, FL 33401 (b) Name, address, and ZIP + 4	\$ 5,650 Aggregate contributions (c) Aggregate contributions \$ 5,250	Person Payroll Noncash (Complete Part II if there is a noncash contribution) (d) Type of contribution Person Payroll Noncash (Complete Part II if there is a noncash contribution) (d) Type of contribution)
(a) No. 23	Name, address, and ZIP + 4 SCHREIBER FOODS, INC. 425 PINE STREET GRENN BAY, WI 54307 (b) Name, address, and ZIP + 4 SHOES FOR CREWS 1400 CENTREPARK BLVD. WEST PALM BEACH, FL 33401 (b) Name, address, and ZIP + 4 SONY ELECTRONICS	\$ 5,650 Aggregate contributions (c) Aggregate contributions \$ 5,250 (c) Aggregate contributions	Type of contribution Person Payroll Noncash (Complete Part II if there is a noncash contribution) (d) Type of contribution Person Payroll Noncash (Complete Part II if there is a noncash contribution) (d) Type of contribution) (d) Type of contribution

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Employer identification number 33-0776076

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
25	SPIRIT FOODSERVICE, INC. 325 LILAC PLACE LOVELAND, CO 80537	\$ 5 ,450	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
26	TAYLOR FARMS 1001 NORTH COCKRELL HILL ROAD DALLAS, TX 75211	\$ 7 ,950	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
27	TURANO BAKING CO 6501 WEST ROOSEVELT ROAD BERWYN, IL 60402	\$\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
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28	WAYNE FARMS 4110 CONTINENTAL DRIVE, BLDG A OAKWOOD, GA 30566	\$ \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	4110 CONTINENTAL DRIVE, BLDG A	\$\$ 5,250	Payroll Noncash (Complete Part II if there is
(a)	4110 CONTINENTAL DRIVE, BLDG A OAKWOOD, GA 30566 (b)	(c)	Payroll Noncash (Complete Part II if there is a noncash contribution) (d)
(a) No.	4110 CONTINENTAL DRIVE, BLDG A OAKWOOD, GA 30566 (b) Name, address, and ZIP+4 VTP ENTERPRISES 2865 WEHOLLOW DRIVE, #41	(c) Aggregate contributions	Payroll Noncash (Complete Part II if there is a noncash contribution) (d) Type of contribution Person Payroll Noncash (Complete Part II if there is

Form 990-PF, page 1 detail			 9/30/10
Part1, line 1- Contributions, gifts, grants, etc.			
Contributor		<u>Amount</u>	
Jack in the Box Inc.	\$	775,000	
Contrib Club	\$	52,369	
One-time employee contributions	\$	26,585	
JIB/employees for BBBS	\$	36,930	
Jack Communities	\$	21,981	
Disaster relief fund	\$	359,377	
Golf Tournament	\$	626,663	
Bowl-a-thon	_\$	34,310	
Total	\$	1,933,215	
Description U.S. Treasury Franchise Tax Board - State of California Department of Justice	\$ \$ \$	20 13 150	
Total Part 1, line 23- Other expenses	<u> </u>	183	
Description		Amount	
Corporate expense	\$	87,623	
Bowl-a-thon expenses	\$	6,762	
Golf tournament expenses	\$	279,905	
Golf tournament refunds	\$	8,692	
Total	\$	382,982	

9/30/2009

Part VIII. 1. List all officers, directors, foundation managers and their compensation

(A) Name & Addresses	(B) Title, and Average Hours Per Week Devoted to Position	(C) Compensation (If Not Paid, Enter -0-)	(D) Contributions to Employee Benefit Plans and Deferred	(E) Expense Account & Other Allowances
Dulan Language	D: D: 1	<u> </u>	Compensation	<u></u>
Brian Luscomb	Director, President 0 Hours Per Week	0		0
9330 Balboa Ave.	0 Hours Per Week	0	0	U
San Diego, CA 92123	D'			
Paul Melancon	Director		_	0
9330 Balboa Ave.	0 Hours Per Week	0	0	0
San Diego, CA 92123				
Kathy Kovacevich	Secretary	_	_	
9330 Balboa Ave.	0 Hours Per Week	0	0	0
San Diego, CA 92123				
Phil Rudolph	Director			
9330 Balboa Ave.	0 Hours Per Week	0	0	0
San Diego, CA 92123				* *** #
Mark Blankenship	Director			
9330 Balboa Ave.	0 Hours Per Week	0	0	0
San Diego, CA 92123				
Linda Lang	Director			
9330 Balboa Ave.	0 Hours Per Week	0	0	0
San Diego, CA 92123				
Eric Tunquist	Director			
9330 Balboa Ave.	0 Hours Per Week	0	0	0
San Diego, CA 92123				
Terri Graham	Director			
9330 Balboa Ave.	0 Hours Per Week	0	0	0
San Diego, CA 92123				
Mike Bamrick	Director			
9330 Balboa Ave.	0 Hours Per Week	0	0	0
San Diego, CA 92123				

Part XV -3a, Grants and Contributions Paid During the Year or Approved for Future Payment

If recipient is an individual show any relationship to show any relationship to any	Foundation Status of	Purpose of grant or	A
Recipient Name and Address foundation manager or substantial contributor	recipient	Contribution	Amount
Big Brothers/Big Sisters of America	Exempt	Donation	101,000
230 N 13th Street	•		341,749
Philadelphia, PA 19107-1538			50,000
Big Brothers & Sisters of San Diego County	Exempt	Donation	43,000
17150 Via del Campo, Ste. 101	•		10,000
San Diego, CA 92127			•
Big Brothers Big Sisters Middle Tennessee	Exempt	Sponsorship	5,477
One Vantage Way	-	•	ŕ
Nashville, TN 37228			
BBBS Greater Los Angeles and Inland Empire	Exempt	Donation	3,000
800 S Figueroa Street, Ste. 620			
Los Angeles, CA 90017			
Big Brothers Big Sisters Central CA	Exempt	Donation	750
905 N Fulton			1,000
Fresno, CA 93728			
AFP San Diego	Exempt	Donation	2,500
3121A Upshur Avenue			
Twentynine Palme, CA 92277			
American Red Cross of San Diego and Imperial Counties	Exempt	Donation	35,000
3950 Calle Fortunada			
San Diego, CA 92123			
American Cancer Society	Exempt	Donation	6,730
2655 Camino Del Rio N #100			
San Diego, CA 92108			
Classroom of the Future Foundation	Exempt	Sponsorship	23,150
6401 Linda Vısta Road, Suite 205	Exempt	Sponsorship	1,500
San Diego, CA 92111			
Children's Hospital and Health Center	Exempt	Donation	3,020
3020 Children's Way, MC 5005			
San Diego, CA 92123			
Encuentros Leadership	Exempt	Donation	5,000
P. O Box 2529			
San Marcos, CA 92079			
Gompers Preparatory Academy	Exempt	Donation	500
1005 47th Street			
San Diego, CA 92102			
Jack in the Box Foundation	Exempt	Donation	25,500
9330 Balboa Avenue			
San Diego, CA 92123			
Junior Achievement of SD	Exempt	Sponsorship	5,000
123 Camino de la Reina, #200W			
San Diego, CA 92108			
KPBS Celebrity Golf Classic	Exempt	Sponsorship	5,000
5200 Campanile Drive			
San Diego, CA 92182			

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	If recipient is an individual show any	Foundation Status of	Purpose of grant or	
Recipient Name and Address	relationship to show any relationship to any foundation manager or substantial contributor	recipient	Contribution	Amount
March of Dimes		Exempt	Donation	6,000
9325 Sky Park Court #250		Exempt	Donation	51,000
San Diego, CA 92123		Exempt	Donation	10,000
3an Diego, CA 72123		Exempl	Donation	4,000
Miracle League of San Diego		Exempt	Sponsorship	1,400
3525 Del Mar Heights Rd. #602		Exempt	Sponsorsinp	1,400
——————————————————————————————————————				
San Diego, Ca 92130 Monarch School		Evennt	Sponsorship	13,500
808 W. Cedar Street		Exempt	Sponsorship	300
		Exempt	Sponsorship	300
San Diego, CA 92101		F	Donation	8,500
Nativity Prep Academy		Exempt	Donation	8,500
3233 Market Street				
San Diego, CA 92102		-	Cmamaanahan	7,500
Prokids		Exempt	Sponsorship	7,300
16530 Via Esprillo				
San Diego, CA 92127				490
Promise2Kids				490
9440 Ruffin Court				
San Diego, CA 92123	YOU BELL	_	D ('	25 000
San Diego Aircraft Carrier Museum (USS Midway)	Exempt	Donation	25,000
910 N Harbor Dr				1,000
San Diego, CA 92101		_	0	15.000
San Diego Regional Economic Develop	pment	Exempt	Sponsorship	15,000
530 B Street 7th Floor				
San Diego, CA 92101				# 00
San Diego Center for Children		Exempt	Sponsorship	500
3002 Armstrong Street				
San Diego, CA 92111				
San Diego Food Bank		Exempt	Sponsorship	5,000
9850 Distribution Avenue				
San Diego, CA 92121				
San Diego Hospice & Palliative Care		Exempt	Sponsorship	10,000
4311 Third Avenue				
San Diego, CA 92103-1407				
San Diego Inner City Junior Golf Four	ndation	Exempt	Donation	1,600
P O Box 740515				
San Diego, CA 92174				
San Diego Downtown Breakfast Rotai	ry	Exempt	Donation	2,000
410 Santa Dominga				
Solana Beach, CA 92075				
St Judes Medical Center		Exempt	Donation	5,000
101 E Valencia Mesa Dr.				
Fullerton, CA 92835				
Star/Pal		Exempt	Donation	1,000
4110 54th Street				
San Diego, CA 92105				
Alcala Yearbook Fund		Exempt	Sponsorship	895
3089 C Clairemont Drive 123-425				
San Diego CA 92177				
		Exempt	Sponsorship	11,000
10536 Culver Blvd		•	- ·	3,000
				•
		Exempt	Sponsorship	3,500
			• •	,
4110 54th Street San Diego, CA 92105 Alcala Yearbook Fund 3089 C Clairemont Drive 123-425 San Diego CA 92177 The Alliance for Children's Hospital		Exempt	Sponsorship	3

	16	Foundation		
Recipient Name and Address	If recipient is an individual show any relationship to show any relationship to any foundation manager or substantial contributor	Status of recipient	Purpose of grant or Contribution	Amount
The Preuss School	TOURIUM INMITAGES OF SUBSTANTIAL CONTINUES.	Exempt	Donation	25,000
9500 Gilman Drive		Exempt	Donation	25,000
San Diego, CA 92093				
The USS Midway Museum		Exempt	Sponsorship	50,000
910 N. Harbor Drive		Exempt	оронзоганър	20,000
San Diego, Ca 92101				
Theatre and Arts Foundation of San D	iego County	Exempt	Sponsorship	15,000
P O Box 12039	- og - o - a - o - o - o - o - o - o - o - o		- F F	,
La Jolla, CA 92037				
UC San Diego Foundation		Exempt	Donation	5,000
9500 Gilman Drive, #0937				25,000
La Jolla, CA 92093				,
YMCA of San Diego County		Exempt	Donation	5,000
4715 Viewridge Avenue, Suite 100		-		
San Diego, CA 92123				
YMCA of Mission Valley		Exempt	Sponsorship	50,000
5505 Friars Rd.				
San Diego, CA 92110				
JACK'S COMMUNITIES	un u			
American Cancer Societ		Exempt	Donation	1,292
235 Montgomerty St #320		-		
San Francisco, CA 94104				
Santa Barbara Humane Society		Exempt	Donation	12
5399 Overpass Rd				
Santa Barbara, CA 93111				
American Cancer Societ		Exempt	Donation	371
1765 Challenge Way				
Sacramento, CA 95815				
American Cancer Societ		Exempt	Donation	3,322
3333 Wilshire Blve				
Los Angeles, CA 90010				
American Cancer Society		Exempt	Donation	238
1301 S Boardway Ave				
Tyler, TX 75701				
American Cancer Society		Exempt	Donation	1,228
8900 John Capenter Fwy				
Dallas, TX 75247				
Children's Hospital Central TX		Exempt	Donation	206
5900 Mueller Blvd				
Austin, TX 78723				
Children's Hospital Central California	1	Exempt	Donation	788
PO Box 50020		Exempt	Donation	187
Seattle, WA 98145			_	10.420
Children's Hospital and Health Center	r	Exempt	Donation	10,432
3020 Children's Way				
San Diego, CA 92123		_	D .:	70
Habitat for Humanity		Exempt	Donation	78
3551 Ave C				
Lake Charles LA 70615		_	D4	•••
Habitat for Humanity		Exempt	Donation	111
4962 Florida Blvd				
Baton Rouge, LA 70806		_	ъ.	
Make-a-Wish Foundation of Idaho		Exempt	Donation	80
811 First Ave		Exempt	Donation	71
Seattle WA 98104				

	If recipient is an individual show any relationship to show any relationship to any	Foundation Status of	Purpose of grant or	
	foundation manager or substantial contributor	recipient	Contribution	Amount
Make-a-Wish Foundation of the Inland	Empire	Exempt	Donation	8
7130 Magnolia Ave , Suite W				
Riverside, CA 92504			_	
Make-a-Wish Foundation of N. Carolina	1	Exempt	Donation	26
212 S Tyron Street				
Charlotte, NC 78281		_		_
Make-a-Wish Foundation of North Texa	ıs	Exempt	Donation	5
215 Winchester, Suite 109				
Tyler, TX 75701		_	.	24
Make-a-Wish Foundation of Oregon		Exempt	Donation	26
Make-a-Wish Foundation of San Diego		Exempt	Donation	21
5151 Murphy Canyon Road, Suite 10				
San Diego, CA 92123				
Make-a-Wish Foundation of S. Nevada		Exempt	Donation	13
3885 South Decatur Blvd, Suite 100				
Las Vegas, NV 89103				
Make-a-Wish Foundation		Exempt	Donation	60
7323 US Hwy 90				
San Antonio, TX 78227				
Make-a-Wish Foundation		Exempt	Donation	32
1801 S Col Rowe Blved				
Mcallen, TX 78503				
Nashiville Humane Association		Exempt	Donation	38
213 Oceola Ave				
Nashville, TN 37209				
Susan G Komen Breast Cancer		Exempt	Donation	2
301 Halton Rd				
Greenville, SC 29607				
Sacred Heart Children's Hospital		Exempt	Donation	17
P O Box 2555				
Spokane, WA 99220				
St. Louis children's Hopsital		Exempt	Donation	93
One Children's Hopsital				
St ¹ Louis, MO 63110				
Texas Children's Hospital		Exempt	Donation	1,3
6621 Fannın Street				
Houston, TX 77230				
Phoenix Children's Hospital		Exempt	Donation	1,10
2929 E Camelback Rd				
Phoenix AZ 85016				
	a ca a managa a manag			
			Donation	350,00
Big Brothers/Big Sisters of America			Donation	330,0
230 N. 13th Street				
Philadelphia, PA 19107-1538		<u>.</u>	Danation	1.4
Big Brothers Big Sisters of Colorado		Exempt	Donation	1.
2420 W 26th Ave, Ste 450-D				
Denver, CO 80211		_	To alde Mark 1	~
Big Brothers Big Sisters of Columbia No	orthwest	Exempt	Jack's Matches	7
1827 NE 44th Ave, Suite 100				
Portland, OR 97213			_	
Big Brothers Big Sisters of El Dorado C	ounty	Exempt	Donation	1,03
PO Box 2519				
Placerville, CA 95667				

Part XV -3a, Grants and Contributions Paid During the Year or Approved for Future Payment

	If recipient is an individual show any relationship to show any relationship to any	Foundation Status of	Purpose of grant or	
Recipient Name and Address	foundation manager or substantial contributor	recipient	Contribution	Amount
Big Brothers Big Sisters of Greater Cha 750 W. Fifth Street	arlotte	Exempt	Donation	124
Charlotte, NC 28202				
Big Brothers Big Sisters of Greater Hou	uston	Exempt	Donation	2,948
6437 High Star				
Houston, TX 77074				
Big Brothers Big Sisters of Greater St.	Louis	Exempt	Sponsorships	1,893
4625 Lindell Blvd , Suite 501				
St. Louis, MO 63108				
Big Brothers Big Sisters of Island Coun	ty	Exempt	Donation	450
913 E Whidbey Ave				
Oak Harbor, WA 98277				
BBBS Greater Los Angeles and Inland	Empire	Exempt	Donation	25,758
1055 Wilshire Blvd , #1950				3,905
Los Angeles, CA 90017				14
				1,000
BBBS of Island County		Exempt	Donation	317
913 E Whidbey Ave				
Oak Harbor, WA 98277				
Big Brothers Big Sisters Middle Tennes	see	Exempt	Sponsorship	224
One Vantage Way				
Nashville, TN 37228				
Big Brothers Big Sisters of Monterey C	ounty	Exempt	Jack's Matches	109
801 Lighthouse Ave.				
Monterey, CA 93940				
Big Brothers Big Sisters the North Texa	ıs	Exempt	Sponsorship	5,482
450 E John Carpenter Freeway		•		
Irving, TX 75062				
Big Brothers Big Sisters Orange Count	у	Exempt	Donation	1,083
14131 Yorba Street, Suite 200		•		
Tustin, CA 92780				
Big Brothers Big Sisters of Pudget Sour	ıd	Exempt	Sponsorship	1,056
1600 S Graham St		•	•	Í
Seattle, WA 98018				
Big Brothers Big Sisters of Pierce & Ki	tsap Counties	Exempt	Sponsorship	450
2107 S. 12th St	•	•		
Tacoma WA 98405				
Big Brothers Big Sisters of San Diego		Exempt	Sponsorship	16,072
8515 Arjons Drive, Suite A		Exempt	Sponsorship	ĺ
San Diego, CA 92126				
Big Brothers Big Sisters Southwest Idal	ho	Exempt	Jack's Matches	203
2995 N. Cole Rd., #120				
Boise, ID 83704				
Big Brothers Big Sisters of Southeast L	ouisiana	Exempt	Donation	87
2626 Canal Street, Suite 203		2xempt	Donation	0,
New Orleans, Louisiana 70119				
Big Brothers Big Sisters of Tulare Cour	ntv	Exempt	Donation	473
948 North H Street, Suite 1	•••	Exempt	Donation	173
Tulare, CA 93274				
Big Brothers Big Sisters of Ventura Co	untv	Exempt	Donation	1,885
445 Rosewood Ave, Suite Q	<i>j</i>	Lacinpo	Donation	1,000
Catholic Rig Brothers Rig Sisters		Evenne	Schl Based Mentoring	1,187
Catholic Big Brothers Big Sisters 1530 James M Wood Blvd.		Exempt	Som Dascu Memoring	1,107
Los Angeles, CA 90015				

	If recipient is an individual show any relationship to show any relationship to any	Foundation Status of	Purpose of grant or	
Recipient Name and Address	foundation manager or substantial contributor	recipient	Contribution	Amount
Carlota Aguiar			Employee- Hardship	1,500
2365 E Windmill			Donation	1,50
Las Vegas, NV 89123			Donation	
Maria Silva	····		Employee- Hardship	1,500
5141 Jackson Drive			Donation	.,
La Mesa, CA 91941			Donation	
Lucia Ruiz			Employee- Hardship	700
5850 Gulf Fwy			Donation	, •
Houston, TX 77023			<i>D</i> 0.1011	
Catherine Doyle	*		Employee- Hardship	750
3220 N Cole Road			Donation	,,,
Boise ID 83704			20.14.10.1	
JeJuan Hampton	· - · · · · · · · · · · · · · · · · · ·		Employee- Hardship	1,500
7065 Ridgmar Meadow Road			Donation	1,50
Ft Worth, TX 76116			Donation	
Krystal Kıdd			Employee- Hardship	1,00
4113 Clemson Blvd			Donation	1,00
Anderson, SC 29621			Donation	
Andrea Lyle			Employee- Hardship	95
1902 E Denman Ave			Donation	73
			Dollation	
Lufkin, TX 75901 Eduardo Romero			Employee Hardship	50
			Employee- Hardship Donation	30
9408 Old Hwy 99			Donation	
Burlington, WA 98233			Frankrica Hardahar	50
Daniel Rivera			Employee- Hardship	30
444 W Bedford Euless Road			Donation	
Hurst, TX 76053			F 1 11	1.50
Kerry Machuca			Employee- Hardship	1,50
2100 Culebra			Donation	
San Antonio, TX 78228			T 1 TT 11	20
Keith Burbach			Employee- Hardship	30
340 15th Street NE			Donation	
Auburn, WA 98002				1.00
Corinne Jackson			Employee- Hardship	1,50
3800 E Elms			Donation	
Kileen, TX 76542				
Lisa Copeland			Employee- Hardship	75
10460 Page Blvd			Donation	
St Louis, MO 63132				
Vanessa Hamann			Employee- Hardship	1,00
2552 Guadalupe			Donation	
Austin, TX 78705				
Victor Sanchez			Employee- Hardship	1,50
11400 Military Rd S			Donation	
Seattle, WA 98168				<u> </u>
Judith Nova			Employee- Hardship	80
6713 Kelly St #J			Donation	
San Diego, CA 92111			_	
Esperanza Arroyo			Employee- Hardship	1,50
11400 Military Rd S			Donation	
Seattle, WA 98168				
Ramona Sota			Employee- Hardship	50
1409 Ruth Avenue			Donation	
Walla Walla, WA 99362				
Cedric Madison			Employee- Hardship	1,00
3465 Betty Lane			Donation	.,,,,
Beaumont, TX 77703			= 211#11411	

	If recipient is an individual show any relationship to show any relationship to any	Foundation Status of	Purpose of grant or	
Recipient Name and Address	foundation manager or substantial contributor	recipient	Contribution	Amount
Tamisha Hudson 2900 N. 16th St			Employee- Hardship Donation	1,50
			Donation	
Orange, TX 77630 Stephanie Bullock			Employee- Hardship	1,50
302 Hwy 47 E			Donation	1,50
Troy, MO 63379			Donation	
Shay Bolling			Employee- Hardship	60
9427 FM Rd 51			Donation	00
Boyd, TX 76023			Donation	
Michele LaVoll			Employee- Hardship	1,50
2312 Jensen Avenue			Donation	1,50
Las Vegas, NV 89101			Donation	
Sonja Pannelll			Employee- Hardship	65
5423 Evers Road			Donation	03
San Antonio, TX 78238			Donation	
Juan Antonio, 1X 78238			Employee- Hardship	75
2901 Avenue B			Donation Donation	7.5
Dickinson, TX 77539			Donation	
Reginald J. Stephens			Employee- Hardship	22
4032 E Southeross			Donation	22
San Antonio, TX 78222			Donation	
Sheretta Herrera			Employee- Hardship	1,50
1504 Hampton St			Donation	1,50
			Donation	
Nashville, TN 37207			Employee- Hardship	1,50
Joseph LaFevor 471 Old Hickory Blvd			Donation	1,50
Brentwood, TN 37027			Donation	
Sandra Fontes			Employee- Hardship	1,50
666 N Imperial			Donation	1,50
El Centro, CA 92243			Donation	
Francisco Rizo			Employee- Hardship	65
3000 Mallory Lane			Donation	0.5
Franklin, TX 37067			Donation	
Brianne Mosser			Employee- Hardship	1,40
5615 Charlotte Pike			Donation	1,70
Nashville, TN 37209			Donation	
Alfred Rojas			Employee- Hardship	75
3800 E Elms			Donation	,-
Kileen, TX 76542			Donation	
Laura Manning			Employee- Hardship	1,00
419 S Washington			Donation	1,00
Cleveland, TX 77327			Donation	
Jose Morales			Employee- Hardship	60
23396 S Main Street			Donation	00
San Luis, AZ 85349			Donation	
Jesse Hogsed			Employee- Hardship	50
1445 15th Avenue			Donation	50
			Donation	
Longview, WA 98632 Rosmae Nesbitt			Employee- Hardship	1,50
Kosmae Nesbitt 6175 Whitehorse Road			Donation	1,30
			Dollation	
Greenville, SC 29611			Employee Hardshi-	90
Jovandra Patterson			Employee- Hardship	90
2475 Laurens Road			Donation	
Greenville, SC 29607			Employee- Hardship	1,50
			-mpiouge Hardenin	1.36
Chris Bryson 14011 E Wade Hampton Blvd			Donation	•,5

Recipient Name and Address	If recipient is an individual show any relationship to show any relationship to any foundation manager or substantial contributor	Foundation Status of recipient	Purpose of grant or Contribution	Amount
Crystal Tobar			Employee- Hardship	1,500
1100 E Central Texas			Donation	
Kileen, TX 76541		<u></u> .		
Kenny McIntire			Employee- Hardship	900
11122 St Charles Rock Road			Donation	
Saint Ann MO 63074				
Virginia Lutz			Employee- Hardship	650
419 S Washington			Donation	
Cleveland, TX 77328				
Katie Belt			Employee- Hardship	300
7221 Fondren Road			Donation	
Houston, TX 77036				
Tunnie Smith			Employee- Hardship	750
6419 Airport Road			Donation	
Austin TX 78752			_	
al Payments to Employee's (Hards	hip Donations)			43,37