



See a Social Security Number? Say Something!  
Report Privacy Problems to <https://public.resource.org/privacy>  
Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990-PF**Department of the Treasury  
Internal Revenue Service**Return of Private Foundation**  
or Section 4947(a)(1) Trust Treated as Private Foundation

▶ Do not enter Social Security numbers on this form as it may be made public.

▶ Information about Form 990-PF and its separate instructions is at [www.irs.gov/form990pf](http://www.irs.gov/form990pf).

OMB No 1545-0052

**2013**

Open to Public Inspection

For calendar year 2013 or tax year beginning September 30, 2013, and ending September 28, 2014

Name of foundation <b>JACK IN THE BOX FOUNDATION</b>		A Employer identification number <b>33-0776076</b>
Number and street (or P O box number if mail is not delivered to street address)	Room/suite	B Telephone number (see instructions) <b>(858) 571-2643</b>
C/O TAX DEPARTMENT, 9330 BALBOA AVENUE		
City or town, state or province, country, and ZIP or foreign postal code <b>SAN DIEGO, CA 92123-1516</b>		C If exemption application is pending, check here <input type="checkbox"/>
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ <b>580,021.00</b>	J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

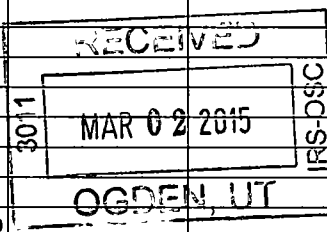
Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)	<b>1,579,421.00</b>			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	
	4 Dividends and interest from securities				
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a				
	7 Capital gain net income (from Part IV, line 2)				
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less: Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule)					
12 Total. Add lines 1 through 11	<b>1,579,421.00</b>	<b>0.00</b>	<b>0.00</b>		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.				
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)				
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	<b>10.00</b>			<b>10.00</b>
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	<b>637,645.00</b>			<b>637,645.00</b>
	24 Total operating and administrative expenses. Add lines 13 through 23	<b>637,655.00</b>			<b>637,655.00</b>
	25 Contributions, gifts, grants paid	<b>1,012,144.00</b>			<b>1,012,144.00</b>
26 Total expenses and disbursements. Add lines 24 and 25	<b>1,649,799.00</b>	<b>0.00</b>	<b>0.00</b>	<b>1,649,799.00</b>	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	<b>-70,378.00</b>				
b Net investment income (if negative, enter -0-)		<b>0.00</b>			
c Adjusted net income (if negative, enter -0-)			<b>0.00</b>		

For Paperwork Reduction Act Notice, see instructions.

Cat No 11289X

Form **990-PF** (2013)

SCANNED MAR 10 2015



<b>Part II Balance Sheets</b>		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions.)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
<b>Assets</b>	<b>1</b>	Cash—non-interest-bearing . . . . .	<b>650,399.00</b>	<b>580,021.00</b>	<b>580,021.00</b>
	<b>2</b>	Savings and temporary cash investments . . . . .			
	<b>3</b>	Accounts receivable ▶ . . . . .			
		Less: allowance for doubtful accounts ▶ . . . . .			
	<b>4</b>	Pledges receivable ▶ . . . . .			
		Less: allowance for doubtful accounts ▶ . . . . .			
	<b>5</b>	Grants receivable . . . . .			
	<b>6</b>	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .			
	<b>7</b>	Other notes and loans receivable (attach schedule) ▶ . . . . .			
		Less: allowance for doubtful accounts ▶ . . . . .			
	<b>8</b>	Inventories for sale or use . . . . .			
	<b>9</b>	Prepaid expenses and deferred charges . . . . .			
	<b>10a</b>	Investments—U.S. and state government obligations (attach schedule) . . . . .			
	<b>b</b>	Investments—corporate stock (attach schedule) . . . . .			
	<b>c</b>	Investments—corporate bonds (attach schedule) . . . . .			
	<b>11</b>	Investments—land, buildings, and equipment: basis ▶ . . . . .			
		Less: accumulated depreciation (attach schedule) ▶ . . . . .			
<b>Liabilities</b>	<b>12</b>	Investments—mortgage loans . . . . .			
	<b>13</b>	Investments—other (attach schedule) . . . . .			
	<b>14</b>	Land, buildings, and equipment: basis ▶ . . . . .			
		Less: accumulated depreciation (attach schedule) ▶ . . . . .			
	<b>15</b>	Other assets (describe ▶ . . . . . )			
	<b>16</b>	<b>Total assets</b> (to be completed by all filers—see the instructions. Also, see page 1, item I) . . . . .	<b>650,399.00</b>	<b>580,021.00</b>	<b>580,021.00</b>
<b>Net Assets or Fund Balances</b>	<b>17</b>	Accounts payable and accrued expenses . . . . .			
	<b>18</b>	Grants payable . . . . .			
	<b>19</b>	Deferred revenue . . . . .			
	<b>20</b>	Loans from officers, directors, trustees, and other disqualified persons . . . . .			
	<b>21</b>	Mortgages and other notes payable (attach schedule) . . . . .			
	<b>22</b>	Other liabilities (describe ▶ . . . . . )			
<b>Net Assets or Fund Balances</b>	<b>23</b>	<b>Total liabilities</b> (add lines 17 through 22) . . . . .			
		<b>Foundations that follow SFAS 117, check here</b> . . . . . <input type="checkbox"/> <b>and complete lines 24 through 26 and lines 30 and 31.</b>			
	<b>24</b>	Unrestricted . . . . .			
	<b>25</b>	Temporarily restricted . . . . .	<b>650,399.00</b>		
	<b>26</b>	Permanently restricted . . . . .			
		<b>Foundations that do not follow SFAS 117, check here</b> ▶ <input type="checkbox"/> <b>and complete lines 27 through 31.</b>			
	<b>27</b>	Capital stock, trust principal, or current funds . . . . .			
	<b>28</b>	Paid-in or capital surplus, or land, bldg., and equipment fund . . . . .			
	<b>29</b>	Retained earnings, accumulated income, endowment, or other funds . . . . .			
	<b>30</b>	<b>Total net assets or fund balances</b> (see instructions) . . . . .	<b>650,399.00</b>	<b>580,021.00</b>	
	<b>31</b>	<b>Total liabilities and net assets/fund balances</b> (see instructions) . . . . .	<b>650,399.00</b>	<b>580,021.00</b>	

**Part III Analysis of Changes in Net Assets or Fund Balances**

<b>1</b>	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) . . . . .	<b>1</b>	<b>650,399.00</b>
<b>2</b>	Enter amount from Part I, line 27a . . . . .	<b>2</b>	<b>-70,378.00</b>
<b>3</b>	Other increases not included in line 2 (itemize) ▶ . . . . .	<b>3</b>	
<b>4</b>	Add lines 1, 2, and 3 . . . . .	<b>4</b>	<b>580,021.00</b>
<b>5</b>	Decreases not included in line 2 (itemize) ▶ . . . . .	<b>5</b>	
<b>6</b>	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 . . . . .	<b>6</b>	<b>580,021.00</b>

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs. MLC Co.)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
<b>1a</b>				
<b>b</b>				
<b>c</b>				
<b>d</b>				
<b>e</b>				

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
<b>a</b>			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
<b>a</b>			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

<b>2</b> Capital gain net income or (net capital loss)	<div style="display: inline-block; vertical-align: middle;">           If gain, also enter in Part I, line 7            If (loss), enter -0- in Part I, line 7         </div>	<b>2</b>	
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8		<b>3</b>	

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No  
 If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2012	1,618,539.00	461,224.00	3.5092
2011	1,751,035.00	360,593.00	4.8560
2010	1,896,821.00	618,522.00	3.0667
2009	1,898,567.00	639,111.00	2.9706
2008	2,166,037.00	503,450.00	4.3024

<b>2</b> Total of line 1, column (d)	<b>2</b>	18.7049
<b>3</b> Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	<b>3</b>	3.7410
<b>4</b> Enter the net value of noncharitable-use assets for 2013 from Part X, line 5	<b>4</b>	671,161.27
<b>5</b> Multiply line 4 by line 3	<b>5</b>	2,510,814.31
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)	<b>6</b>	0.00
<b>7</b> Add lines 5 and 6	<b>7</b>	2,510,814.31
<b>8</b> Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.	<b>8</b>	1,649,799.00

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)**

<b>1a</b>	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter. (attach copy of letter if necessary—see instructions)			
<b>b</b>	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b	<b>1</b>	<b>0</b>	<b>00</b>
<b>c</b>	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).			
<b>2</b>	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>2</b>		
<b>3</b>	Add lines 1 and 2	<b>3</b>		
<b>4</b>	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>4</b>		
<b>5</b>	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0-	<b>5</b>		
<b>6</b>	<b>Credits/Payments.</b>			
<b>a</b>	2013 estimated tax payments and 2012 overpayment credited to 2013	<b>6a</b>		
<b>b</b>	Exempt foreign organizations—tax withheld at source	<b>6b</b>		
<b>c</b>	Tax paid with application for extension of time to file (Form 8868)	<b>6c</b>		
<b>d</b>	Backup withholding erroneously withheld	<b>6d</b>		
<b>7</b>	<b>Total credits and payments.</b> Add lines 6a through 6d	<b>7</b>		
<b>8</b>	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	<b>8</b>		
<b>9</b>	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b>	<b>9</b>		
<b>10</b>	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b>	<b>10</b>		
<b>11</b>	Enter the amount of line 10 to be. <b>Credited to 2014 estimated tax</b> <b>Refunded</b>	<b>11</b>		

**Part VII-A Statements Regarding Activities**

	Yes	No
<b>1a</b> During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		✓
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)? <i>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.</i>		✓
<b>c</b> Did the foundation file <b>Form 1120-POL</b> for this year?		✓
<b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$		
<b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$		
<b>2</b> Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities.</i>		✓
<b>3</b> 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? <i>If "Yes," attach a conformed copy of the changes.</i>		✓
<b>4a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year?		✓
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?		
<b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T.</i>		✓
<b>6</b> 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?	✓	
<b>7</b> Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV</i>	✓	
<b>8a</b> Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ CA		
<b>b</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? <i>If "No," attach explanation.</i>	✓	
<b>9</b> 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 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV.</i>		✓
<b>10</b> Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses.</i>		✓

**Part VII-A Statements Regarding Activities (continued)**

<b>11</b>	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 instructions)	<b>11</b>		✓
<b>12</b>	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	<b>12</b>		✓
<b>13</b>	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <a href="http://www.jackintheboxinc.com/responsibility/community">http://www.jackintheboxinc.com/responsibility/community</a>	<b>13</b>	✓	
<b>14</b>	The books are in care of ► <b>Jack In The Box Inc</b> Telephone no. ► <b>(858) 571-2643</b> Located at ► <b>9330 Balboa Ave, San Diego, CA</b> ZIP+4 ► <b>92123</b>			
<b>15</b>	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here. . . . . and enter the amount of tax-exempt interest received or accrued during the year . . . . .	<b>15</b>		<input type="checkbox"/>
<b>16</b>	At any time during calendar year 2013, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? . . . . . See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign country ►	<b>16</b>	Yes	No ✓

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

	Yes	No
<b>1a</b> 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? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(6) Agree to pay money or property to a government official? ( <b>Exception.</b> Check "No" if 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.) . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b> If any answer is "Yes" to 1a(1)–(6), did <b>any</b> 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 instructions)? . . . . .	<b>1b</b>	
Organizations relying on a current notice regarding disaster assistance check here . . . . . <input type="checkbox"/>		
<b>c</b> 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 2013? . . . . .	<b>1c</b>	✓
<b>2</b> 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)):		
<b>a</b> At the end of tax year 2013, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2013? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ► 20 , 20 , 20 , 20		
<b>b</b> Are there any years listed in 2a for which the foundation is <b>not</b> 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) to all years listed, answer "No" and attach statement—see instructions.) . . . . .	<b>2b</b>	
<b>c</b> If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here. ► 20 , 20 , 20 , 20		
<b>3a</b> Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b> If "Yes," did it have excess business holdings in 2013 as a result of (1) any purchase by the foundation or 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 foundation had excess business holdings in 2013.) . . . . .	<b>3b</b>	
<b>4a</b> Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	<b>4a</b>	✓
<b>b</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 2013?	<b>4b</b>	✓

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**

- 5a** During the year did the foundation pay or incur any amount to:
- (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☒ No
- (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No
- (3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No
- (4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions) ☐ Yes ☒ No
- (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No
- b** If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? ☐ Yes ☒ No  
Organizations relying on a current notice regarding disaster assistance check here ☐
- c** If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? ☐ Yes ☒ No  
If "Yes," attach the statement required by Regulations section 53.4945–5(d).
- 6a** Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No
- b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No  
If "Yes" to 6b, file Form 8870.
- 7a** At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☒ No
- b** If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? ☐ Yes ☒ No

5b

6b

7b

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors****1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).**

(a) Name and address	(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 compensation	(e) Expense account, other allowances
STATEMENT 2				

**2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."**

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances

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

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors** *(continued)***3 Five highest-paid independent contractors for professional services** (see instructions). If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
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 beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	
2	
3	
4	

**Part IX-B Summary of Program-Related Investments** (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3	



**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
<b>a</b>	Average monthly fair market value of securities . . . . .	<b>1a</b>	
<b>b</b>	Average of monthly cash balances . . . . .	<b>1b</b>	681,382.00
<b>c</b>	Fair market value of all other assets (see instructions) . . . . .	<b>1c</b>	
<b>d</b>	<b>Total</b> (add lines 1a, b, and c) . . . . .	<b>1d</b>	681,382.00
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) . . . . .	<b>1e</b>	
<b>2</b>	Acquisition indebtedness applicable to line 1 assets . . . . .	<b>2</b>	
<b>3</b>	Subtract line 2 from line 1d . . . . .	<b>3</b>	681,382.00
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see instructions) . . . . .	<b>4</b>	10,220.73
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4 . . . . .	<b>5</b>	671,161.27
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5 . . . . .	<b>6</b>	33,558.06

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

<b>1</b>	Minimum investment return from Part X, line 6 . . . . .	<b>1</b>	33,558.06
<b>2a</b>	Tax on investment income for 2013 from Part VI, line 5 . . . . .	<b>2a</b>	
<b>b</b>	Income tax for 2013. (This does not include the tax from Part VI.) . . . . .	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b . . . . .	<b>2c</b>	
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1 . . . . .	<b>3</b>	33,558.06
<b>4</b>	Recoveries of amounts treated as qualifying distributions . . . . .	<b>4</b>	
<b>5</b>	Add lines 3 and 4 . . . . .	<b>5</b>	33,558.06
<b>6</b>	Deduction from distributable amount (see instructions) . . . . .	<b>6</b>	
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 . . . . .	<b>7</b>	33,558.06

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26 . . . . .	<b>1a</b>	1,649,799.00
<b>b</b>	Program-related investments—total from Part IX-B . . . . .	<b>1b</b>	
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes . . . . .	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the:		
<b>a</b>	Suitability test (prior IRS approval required) . . . . .	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule) . . . . .	<b>3b</b>	0.00
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 . . . . .	<b>4</b>	1,649,799.00
<b>5</b>	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 instructions) . . . . .	<b>5</b>	
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4 . . . . .	<b>6</b>	1,649,799.00

**Note.** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2012	(c) 2012	(d) 2013
<b>1</b> Distributable amount for 2013 from Part XI, line 7 . . . . .				<b>33,558.06</b>
<b>2</b> Undistributed income, if any, as of the end of 2013.				
<b>a</b> Enter amount for 2012 only . . . . .				
<b>b</b> Total for prior years: 20____, 20____, 20____				
<b>3</b> Excess distributions carryover, if any, to 2013:				
<b>a</b> From 2008 . . . . .	2,140,861.00			
<b>b</b> From 2009 . . . . .	2,146,497.00			
<b>c</b> From 2010 . . . . .	1,865,896.00			
<b>d</b> From 2011 . . . . .	1,733,006.36			
<b>e</b> From 2012 . . . . .	1,595,477.79			
<b>f</b> <b>Total</b> of lines 3a through e . . . . .	<b>9,481,738.15</b>			
<b>4</b> Qualifying distributions for 2013 from Part XII, line 4: ► \$ <b>1,649,799.00</b>				
<b>a</b> Applied to 2012, but not more than line 2a . . . . .				
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions) . . . . .				
<b>c</b> Treated as distributions out of corpus (Election required—see instructions) . . . . .				
<b>d</b> Applied to 2013 distributable amount . . . . .				<b>33,558.06</b>
<b>e</b> Remaining amount distributed out of corpus . . . . .	<b>1,616,240.94</b>			
<b>5</b> Excess distributions carryover applied to 2013 (If an amount appears in column (d), the same amount must be shown in column (a) )				
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 . . . . .	<b>11,097,979.09</b>			
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b . . . . .				
<b>c</b> 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 . . . . .				
<b>d</b> Subtract line 6c from line 6b. Taxable amount—see instructions . . . . .				
<b>e</b> Undistributed income for 2012. Subtract line 4a from line 2a. Taxable amount—see instructions . . . . .				
<b>f</b> Undistributed income for 2013. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2014 . . . . .				<b>0.00</b>
<b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions) . . . . .				
<b>8</b> Excess distributions carryover from 2008 not applied on line 5 or line 7 (see instructions) . . . . .	<b>2,140,861.00</b>			
<b>9</b> <b>Excess distributions carryover to 2014.</b> Subtract lines 7 and 8 from line 6a . . . . .	<b>8,957,118.09</b>			
<b>10</b> Analysis of line 9.				
<b>a</b> Excess from 2009 . . . . .	2,146,497.00			
<b>b</b> Excess from 2010 . . . . .	1,865,896.00			
<b>c</b> Excess from 2011 . . . . .	1,733,006.36			
<b>d</b> Excess from 2012 . . . . .	1,595,477.79			
<b>e</b> Excess from 2013 . . . . .	1,616,240.94			

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

<b>1a</b>	If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2013, enter the date of the ruling . . . ▶				N/A
<b>b</b>	Check box to indicate whether the foundation is a private operating foundation described in section <input type="checkbox"/> 4942(j)(3) or <input type="checkbox"/> 4942(j)(5)				
<b>2a</b>	Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .				
	Tax year	Prior 3 years			(e) Total
	(a) 2013	(b) 2012	(c) 2011	(d) 2010	
<b>b</b>	85% of line 2a . . . . .				N/A
<b>c</b>	Qualifying distributions from Part XII, line 4 for each year listed . . . . .				
<b>d</b>	Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .				
<b>e</b>	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .				
<b>3</b>	Complete 3a, b, or c for the alternative test relied upon:				
<b>a</b>	"Assets" alternative test—enter:				
	(1) Value of all assets . . . . .				
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i) . . . . .				
<b>b</b>	"Endowment" alternative test—enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed . . . . .				
<b>c</b>	"Support" alternative test—enter:				
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .				
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) . . . . .				
	(3) Largest amount of support from an exempt organization . . . . .				
	(4) Gross investment income . . . . .				

**Part XV Supplementary Information** (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)

<b>1</b>	<b>Information Regarding Foundation Managers:</b>
<b>a</b>	List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2))
	N/A
<b>b</b>	List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.
	N/A
<b>2</b>	<b>Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:</b>
	Check here <input checked="" type="checkbox"/> if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.
<b>a</b>	The name, address, and telephone number or e-mail address of the person to whom applications should be addressed:
<b>b</b>	The form in which applications should be submitted and information and materials they should include:
<b>c</b>	Any submission deadlines:
<b>d</b>	Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:



**Part XVI-A Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1	Program service revenue.					
a						
b						
c						
d						
e						
f						
g	Fees and contracts from government agencies					
2	Membership dues and assessments . . . . .					
3	Interest on savings and temporary cash investments					
4	Dividends and interest from securities . . . . .					
5	Net rental income or (loss) from real estate:					
a	Debt-financed property . . . . .					
b	Not debt-financed property . . . . .					
6	Net rental income or (loss) from personal property					
7	Other investment income . . . . .					
8	Gain or (loss) from sales of assets other than inventory					
9	Net income or (loss) from special events . . . . .					
10	Gross profit or (loss) from sales of inventory . . . . .					
11	Other revenue: a					
b						
c						
d						
e						
12	Subtotal. Add columns (b), (d), and (e) . . . . .					
13	Total. Add line 12, columns (b), (d), and (e) . . . . .					

(See worksheet in line 13 instructions to verify calculations.)

<b>Part XVI-B</b>	<b>Relationship of Activities to the Accomplishment of Exempt Purposes</b>
-------------------	--

[illegible]

**Part XVII** Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

<b>1</b>	Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?	<b>Yes</b>	<b>No</b>
<b>a</b>	Transfers from the reporting foundation to a noncharitable exempt organization of:		
<b>(1)</b>	Cash	<b>1a(1)</b>	✓
<b>(2)</b>	Other assets	<b>1a(2)</b>	✓
<b>b</b>	Other transactions:		
<b>(1)</b>	Sales of assets to a noncharitable exempt organization	<b>1b(1)</b>	✓
<b>(2)</b>	Purchases of assets from a noncharitable exempt organization	<b>1b(2)</b>	✓
<b>(3)</b>	Rental of facilities, equipment, or other assets	<b>1b(3)</b>	✓
<b>(4)</b>	Reimbursement arrangements	<b>1b(4)</b>	✓
<b>(5)</b>	Loans or loan guarantees	<b>1b(5)</b>	✓
<b>(6)</b>	Performance of services or membership or fundraising solicitations	<b>1b(6)</b>	✓
<b>c</b>	Sharing of facilities, equipment, mailing lists, other assets, or paid employees	<b>1c</b>	✓
<b>d</b>	If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.		

[illegible]

**2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? . . . . . ☐ Yes ☒ No

**b** If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship

**Sign Here** Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

*[Signature]* 2/28/15 Director  
 Signature of officer or trustee Date Title

May the IRS discuss this return with the preparer shown below (see instructions)? ☐ Yes ☒ No

<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Firm's name ▶			Firm's EIN ▶	
	Firm's address ▶			Phone no	

**Schedule of Contributors**

OMB No 1545-0047

**2013**

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

▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Name of the organization

**JACK IN THE BOX FOUNDATION**

Employer identification number

**33-0776076**

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

Form 990-PF

☒ 501(c)(3) exempt private foundation

☐ 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 33 $\frac{1}{3}$ % 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 II.
- ☐ 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, total 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 total 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 during the year . . . . . ▶ \$ .....

**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 its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

<b>Name of organization</b> JACK IN THE BOX FOUNDATION	<b>Employer identification number</b> 33-0776076
---	---

**Part I** Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JACK IN THE BOX INC 9330 BALBOA AVENUE SAN DIEGO, CA 92123	\$ 561,658	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	WELLS FARGO 101 FEDERAL STREET, 20TH FLOOR BOSTON, MA 02110	\$ 7,750	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	BAMA COMPANIES INC. 2727 E 11TH STREET TULSA, OK 74159	\$ 8,275	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	BARCO UNIFORMS 350 W. ROSECRANS AVENUE GARDENA, CA 90248	\$ 7,750	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	CARGILL 31155 VIA CRISTAL SAN JUAN CAPISTRANO, CA 92675	\$ 7,750	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	COCA-COLA REFRESHMENTS THREE PARK PLAZA, STE 600 IRVINE, CA 92614	\$ 11,675	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)



Name of organization

Employer identification number

JACK IN THE BOX FOUNDATION

33-0776076

**Part I** Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	CONAGRA FOODS LAMB WESTON 18725 MARTHA AVENUE SARATOGA, CA 95070	\$ 5,250	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
8	CTI FOODS, LLC 22303 HWY 95 WILDER, ID 83676	\$ 7,750	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
9	DR PEPPER SNAPPLE GROUP 4050 E. SIDEWINDER COURT GILBERT, AZ 85297	\$ 15,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
10	FIELDALE FARMS CORP PO BOX 558 BALDWIN, GA 30511	\$ 5,250	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
11	FLOWERS FOODS BAKERIES GROUP 2322 W. LINCOLN STREET PHOENIX, AZ 85009	\$ 7,750	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
12	GOLDEN STATE FOODS 640 S. SIXTH STREET CITY OF INDUSTRY, CA 91746	\$ 5,250	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

<b>Name of organization</b> JACK IN THE BOX FOUNDATION	<b>Employer identification number</b> 33-0776076
---	---

**Part I** **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	HEINZ NORTH AMERICA 1057 IMPERIAL HWY #413 PLACENTIA, CA 92870	\$ 5,250	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
14	HORIZON MEDIA INC. 1940 CENTARY PARK EAST LOS ANGELES, CA 90067	\$ 8,800	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
15	HUGHES NETWORK SYSTEMS 11717 EXPLORATION LN GERMANTOWN, MD 20876	\$ 7,750	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
16	MBM 2641 MEADOWBROOK ROAD ROCKY MOUNT, NC 27802	\$ 15,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
17	MICHIGAN TURKEY PRODUCERS 1100 HALL ST. S W. GRAND RAPIDS, MI 49503	\$ 5,250	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
18	MINDSHARE TECHNOLOGIES, INC. 310 EAST 4500 SOUTH, STE 450 SALT LAKE CITY, UT 84107	\$ 7,750	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

<b>Name of organization</b> JACK IN THE BOX FOUNDATION	<b>Employer identification number</b> 33-0776076
---	---

**Part I** **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
19	NASSER COMPANY, INC. 22720 SAVI RANCH PARKWAY YORBA LINDA, CA 92887	\$ 7,750	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
20	NATIONAL FRANCHISE ASSOCIATION 11411 NE 124TH STREET, STE 170 KIRKLAND, WA 98034	\$ 25,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
21	OSI INDUSTRIES 1225 CORPORATE DRIVE AURORA, IL 60505	\$ 5,250	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
22	PREFERRED MARKETING GROUP 20715 DEARBORN STREET CHATSWORTH, CA 91311	\$ 7,750	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
23	S&D COFFEE, INC 6103 BROOKSHADOW CT GREENSBORO, NC 27410	\$ 7,750	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
24	SCHREIBER FOODS 425 PINE STREET GREEN BAY, WI 54307	\$ 7,750	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization <b>JACK IN THE BOX FOUNDATION</b>	Employer identification number <b>33-0776076</b>
---	---

**Part I** Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
25	SECRET WEAPON MARKETING 1658 10TH STREET SANTA MONICA, CA 90404	\$ 7,750	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
26	SUGARDALE FOOD SERVICE 1888 SOUTHWAY STREET SE MASSILLON, OH 44646	\$ 5,250	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
27	TAYLOR FARMS 911-B BLANCO CIRCLE SALINAS, CA 93902	\$ 7,750	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
28	TAYLOR FREEZERS OF CALIFORNIA 6825 E WASHINGTON BLVD COMMERCE, CA 90010	\$ 7,750	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
29	TBS FOODS, INC. 4917 GENESTA AVE ENCINO, CA 91316	\$ 5,375	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
30	TURANO BAKING COMPANY 6501 WEST ROOSEVELT ROAD BERWYN, IL 60402	\$ 5,250	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

<b>Name of organization</b> JACK IN THE BOX FOUNDATION	<b>Employer identification number</b> 33-0776076
---	---

**Part I** Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
31	TYSON FOODS 2200 DON TYSON PARKWAY SPRINGDALE, AZ 72762	\$ 7,750	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
32	UNIVERSITY OF PHOENIX 4025 S RIVERPOINT PARKWAY PHOENIX, AZ 85040	\$ 8,075	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
33	VEG FRESH FARMS 1400 RINCON ROAD CORONA, CA 92880	\$ 7,750	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
34	VENTURA FOODS 45165 SAGEWIND COURT TEMECULA, CA 92592	\$ 5,250	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
35	VTP ENTERPRISES 2865 WESTHOLLOW DRIVE, UNIT 41 HOUSTON, TX 77082	\$ 9,520	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
36	WAYNE FARMS LLC 4110 CONTINENTAL DRIVE, BLDG A OAKWOOD, GA 30566	\$ 7,750	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization <b>JACK IN THE BOX FOUNDATION</b>	Employer identification number <b>33-0776076</b>
---	---

**Part I** Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
37	JIM EDMONDSON 6103 BROOKSHADOW COURT GREENSBORO, NC 27410	\$ 9,250	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
38	BEN ERAMYA 38044 AUGUSTA LANE MURRIETA, CA 92563	\$ 7,900	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
39	LAUREN GLASS 30252 TOMAS STREET, STE 200 RANCHO SANTA MARGARITA, CA 92688	\$ 8,650	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
40	MIKE HERRICK 616 CALLE PLANO CAMARILLO, CA 93012	\$ 5,590	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
41	BEN NEMATZEDAH 4917 GENESTA AVENUE ENCINO, CA 91316	\$ 15,375	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
42	JOHN PASSANTE 2865 WESTHOLLOW DR, UNIT 41 HOUSTON, TX 77082	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

<b>Name of organization</b> JACK IN THE BOX FOUNDATION	<b>Employer identification number</b> 33-0776076
---	---

**Part I** **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
43	ANIL YADAV 11411 NE 124TH STREET, STE 170 KIRKLAND, WA 98034	\$ 8,430	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )

## Part 1, line 1- Contributions, gifts, grants, etc

<u>Contributor</u>	<u>Amount</u>
Bowl-a-thon	\$ 44,264
Contrib Club	\$ 15,842
Golf Tournament	\$ 711,183
Jack Communities	\$ 8,790
Jack in the Box Inc	\$ 500,000
Various One-time employee contributions	\$ 39,971
JIB/employees for BBBS	\$ 259,371
<b>Total</b>	<b>\$ 1,579,421</b>

## Part 1, line 23- Other expenses

<u>Description</u>	<u>Amount</u>
Bowl-a-thon expenses	\$ 8,000
Golf tournament expenses	\$ 629,645
<b>Total</b>	<b>\$ 637,645</b>



**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 Compensation	(E) Expense Account & Other Allowances
1	Brian Luscomb 9330 Balboa Ave San Diego, CA 92123	President 0 Hours Per Week	0	0	0
2	Mark Blankenship 9330 Balboa Ave San Diego, CA 92123	Director 0 Hours Per Week	0	0	0
3	Lenny Comma 9330 Balboa Ave San Diego, CA 92123	Director 0 Hours Per Week	0	0	0
4	Keith Guilbault 9330 Balboa Ave San Diego, CA 92123	Director 0 Hours Per Week	0	0	0
5	Paul Melancon 9330 Balboa Ave San Diego, CA 92123	Director 0 Hours Per Week	0	0	0
6	Phillip Rudolph 9330 Balboa Ave San Diego, CA 92123	Director 0 Hours Per Week	0	0	0
7	Karen Trissel 9330 Balboa Ave San Diego, CA 92123	Director 0 Hours Per Week	0	0	0
8	Eric Tunquist 9330 Balboa Ave San Diego, CA 92123	Director 0 Hours Per Week	0	0	0
9	Christine Willis 9330 Balboa Ave San Diego, CA 92123	Director 0 Hours Per Week	0	0	0
10	Kathy Kovacevich 9330 Balboa Ave San Diego, CA 92123	Secretary 40 Hours Per Week	0	0	0

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

Line	Recipient Name	Recipient Address	City	State	Zip	If recipient is an individual show any relationship to any foundation manager or substantial contributor	Foundation Status of recipient	Purpose of grant or Contribution	Amount
1	ALLIANCE FOR CHILDRENS RIGHT	3333 WILSHIRE BLVD, STE 550	LOS ANGELES	CA	90010		Exempt	Donation	13,000
2	AMERICAN RED CROSS NATIONAL	3950 CALLE FORTUNADA	SAN DIEGO	CA	92123		Exempt	Donation	38,837
3	BAKERSFIELD MEMORIAL HOSPITAL FOUNDATION	PO BOX 2401	BAKERSFIELD	CA	93303		Exempt	Donation	844
4	BIG BROTHERS BIG SISTERS COLUMBIA NORTHWEST	1827 NE 44TH AVE STE 100	PORTLAND	OR	97213		Exempt	Donation	686
5	BIG BROTHERS BIG SISTERS OF CENTRAL ARIZONA	1010 E MCDOWELL RD STE 400	PHOENIX	AZ	85006		Exempt	Donation	13,780
6	BIG BROTHERS BIG SISTERS OF CENTRAL CALIFORNIA FRESNO	905 N FULTON	FRESNO	CA	93728		Exempt	Donation	1,433
7	BIG BROTHERS BIG SISTERS OF CENTRAL TEXAS AUSTIN	1400 TILLERY ST	AUSTIN	TX	78721		Exempt	Donation	230
8	BIG BROTHERS BIG SISTERS OF CHARLOTTE	3801 INDEPENDENCE BLVD #101	CHARLOTTE	NC	28205		Exempt	Donation	406
9	BIG BROTHERS BIG SISTERS OF COLORADO	1391 N SPEER BLVD #450	DENVER	CO	80204		Exempt	Donation	366
10	BIG BROTHERS BIG SISTERS OF GREATER KANSAS CITY	3908 WASHINGTON STREET	KANSAS CITY	MO	64111		Exempt	Donation	163
11	BIG BROTHERS BIG SISTERS OF IRVING	450 E JOHN CARPENTER FWY	IRVING	TX	75062		Exempt	Donation	395,000
12	BIG BROTHERS BIG SISTERS OF LONE STAR	450 E JOHN CARPENTER FWY	IRVING	TX	75062		Exempt	Donation	5,463
13	BIG BROTHERS BIG SISTERS OF LOS ANGELES	800 S FIGUEROA STE 620	LOS ANGELES	CA	90017		Exempt	Donation	23,606
14	BIG BROTHERS BIG SISTERS OF MIDDLE TENNESSEE	1704 CHARLOTTE AVE #130	NASHVILLE	TN	37203		Exempt	Donation	7,758
15	BIG BROTHERS BIG SISTERS OF ORANGE	14131 YORBA	TUSTIN	CA	92780		Exempt	Donation	1,307
16	BIG BROTHERS BIG SISTERS OF PUGET SOUND	1600 S GRAHAM	SEATTLE	WA	98118		Exempt	Donation	2,834
17	BIG BROTHERS BIG SISTERS OF SAN DIEGO	8515 ARJONS DRIVE STE A	SAN DIEGO	CA	92128		Exempt	Donation	30,244
18	BIG BROTHERS BIG SISTERS OF SOUTH TEXAS	202 BALTIMORE AVE	SAN ANTONIO	TX	78215		Exempt	Donation	2,387
19	BIG BROTHERS BIG SISTERS OF SOUTHERN NEVADA	2000 E FLAMINGO ROAD	LAS VEGAS	NV	89119		Exempt	Donation	1,665
20	BIG BROTHERS BIG SISTERS OF SOUTHWEST IDAHO INC	110 N 127TH ST	BOISE	ID	83702		Exempt	Donation	401
21	BIG BROTHERS BIG SISTERS OF SWLA	4135 COMMON ST	LAKE CHARLES	LA	70607		Exempt	Donation	50
22	BIG BROTHERS BIG SISTERS OF THE BAY AREA	649 MISSION ST 5TH FLOOR	SAN FRANCISCO	CA	94105		Exempt	Donation	4,950
23	BIG BROTHERS BIG SISTERS OF THE GREATER SACRAMENTO AREA	1451 RIVER PARK DR STE 241	SACRAMENTO	CA	95815		Exempt	Donation	1,340
24	BIG BROTHERS BIG SISTERS OF THE INLAND	222 W MISSION AVE STE 40	SPOKANE	WA	99201		Exempt	Donation	91
25	BIG BROTHERS BIG SISTERS OF THE UPSTATE	620 NORTH MAIN STREET STE 102	GREENVILLE	SC	29601		Exempt	Donation	1,087
26	BIG BROTHERS BIG SISTERS-EASTERN MO	501 N GRAND BLVD #100	ST LOUIS	MO	63103		Exempt	Donation	60
27	CAROLINAS HEALTHCARE FOUNDATION	PO BOX 32861	CHARLOTTE	NC	28232		Exempt	Donation	895
28	CATHOLIC BIG BROTHERS BIG SISTERS	1530 JAMES M WOOD BLVD	LOS ANGELES	CA	90015		Exempt	Donation	10,000
29	CHARLOTTE CHECKERS CHARITABLE	210 E TRADE ST #E480	CHARLOTTE	NC	28202		Exempt	Donation	612
30	CHILDRENS HOSPITAL COLORADO	13123 E 16TH AVE B045	AURORA	CO	80045		Exempt	Donation	78
31	CHILDRENS HOSPITAL LOS ANGELES	4650 SUNSET BLVD MS29	LOS ANGELES	CA	90027		Exempt	Donation	9,143
32	CHILDRENS HOSPITAL OF ORANGE	1201 WEST LA VETA AVE	ORANGE	CA	92668		Exempt	Donation	584
33	CHILDRENS HOSPITAL OF SAN ANTONIO	100 NE LOOP 410 STE 706	SAN ANTONIO	TX	78216		Exempt	Donation	91
34	CHILDRENS MEDICAL CENTER FOUNDATION	2777 N STEMMONS FWY STE 700	DALLAS	TX	75207		Exempt	Donation	1,445
35	CHILDRENS MEDICAL RESEARCH INC-OKLAHOMA CITY	800 RESEARCH PKWY STE 150	OKLAHOMA CITY	OK	73104		Exempt	Donation	435
36	CHILDRENS MERCY HOSPITAL	2401 GILLHAM RD	KANSAS CITY	MO	64108		Exempt	Donation	3
37	CLASSROOM OF THE FUTURE FOUNDATION	6401 LINDA VISTA ROAD	SAN DIEGO	CA	92111		Exempt	Donation	28,500
38	DELL CHILDRENS MEDICAL	4900 MUELLER BLVD	AUSTIN	TX	78723		Exempt	Donation	829
39	EMBRACE	705 16TH ST, STE 100E	SAN DIEGO	CA	92101		Exempt	Donation	2,500
40	GREENVILLE HOSP SYSTEM	313 MEMORIAL DR	GREER	SC	29615-1522		Exempt	Donation	75
41	HEART PROGRAM	6717 STUEBNER AIRLINE RD #207	HOUSTON	TX	77091		Exempt	Donation	2,500
42	HUNTINGTONS DISEASE	PO BOX 19524	SAN DIEGO	CA	92159-0524		Exempt	Donation	5,000
43	JACK IN THE BOX FOUNDATION GOLF TOURNAMENT EVENT	9330 BALBOA AVE	SAN DIEGO	CA	92123		Exempt	Donation	25,500
44	JOHN CORCORAN FOUNDATION INC	1925 SOUTH COAST HWY	OCEANSIDE	CA	92054		Exempt	Donation	1,350
45	JUNIOR ACHIEVEMENT OF SAN DIEGO	4756 MISSION GORGE PL	SAN DIEGO	CA	92120		Exempt	Donation	80,145
46	LEGACY EMANUEL CHILDRENS HOSPITAL	PO BOX 4484	PORTLAND	OR	97208		Exempt	Donation	342
47	MARCH OF DIMES FOUNDATION	9325 SKY PARK COURT, STE 250	SAN DIEGO	CA	92123		Exempt	Donation	68,897
48	MBM CORPORATION-9277	2841 MEADOWBROOK RD	ROCKY MOUNT	NC	27801		Exempt	Donation	1,940
49	MONROE CARELL JR CHILDRENS HOSPITAL	HOSPITAL AT VANDERBILT GIFT PROCESSING OFFICE	NASHVILLE	TN	37240		Exempt	Donation	696
50	NATURAL HIGH	9404 GENESEE AVE, STE 210	LA JOLLA	CA	92037		Exempt	Donation	3,500
51	OUR LADY OF THE LAKE FOUNDATION	PO BOX 84357	BATON ROUGE	LA	70884		Exempt	Donation	120
52	PHOENIX CHILDRENS HOSPITAL	2929 EAST CAMELBACK RD STE 122	PHOENIX	AZ	85018		Exempt	Donation	1,104
53	PROMOTIONAL PARTNERS WORLDWIDE	811 WILSHIRE BLVD #550	LOS ANGELES	CA	90017		Exempt	Donation	251
54	PROVIDENCE HEALTH CARE FOUNDATION	PO BOX 2555	SPOKANE	WA	99220		Exempt	Donation	220
55	SAN DIEGO CHILDRENS HOSPITAL	385 W MAIN ST	EL CENTRO	CA	92243		Exempt	Donation	31,990
56	SAN DIEGO DOWNTOWN BREAKFAST	PO BOX 80336	SAN DIEGO	CA	92138-0336		Exempt	Donation	3,000
57	SEATTLE CHILDRENS HOSPITAL	PO BOX 5371 MAIL STOP S-200	SEATTLE	WA	98145		Exempt	Donation	1,886
58	SECRET WEAPON MARKETING	1560 VENTURA BLVD 1040	SHERMAN OAKS	CA	91403		Exempt	Donation	500
59	ST JUDE MEDICAL CENTER	101 E VALENCIA MESA DR	FULLERTON	CA	92835		Exempt	Donation	5,000
60	ST LOUIS CHILDRENS HOSPITAL FOUNDATION	1 CHILDRENS PL	ST LOUIS	MO	63110		Exempt	Donation	2,055
61	ST LUKES REGIONAL MEDICAL CTR	190 E BANNOCK	BOISE	ID	83712		Exempt	Donation	48
62	STAR PAL	4110 54TH ST	SAN DIEGO	CA	92105		Exempt	Donation	5,000
63	SUNRISE CHILDRENS HOSPITAL	3186 MARYLAND PKWY	LAS VEGAS	NV	89109		Exempt	Donation	1,090
64	TEXAS CHILDRENS HOSPITAL	1919S BRAESWOOD, MC 4-4483	HOUSTON	TX	77230		Exempt	Donation	3,132
65	TONY HAWK FOUNDATION	1811-A S MELROSE DR #360	VISTA	CA	92081		Exempt	Donation	1,500
66	TRINITY MOTHER FRANCES	811 S FLEISHEL	TYLER	TX	75701		Exempt	Donation	225
67	UC DAVIS MEDICAL CENTER	4900 BROADWAY STE 1150	SACRAMENTO	CA	95820		Exempt	Donation	10
68	UCSD FOUNDATION	9500 GILMAN DR 0536	LA JOLLA	CA	92093		Exempt	Donation	50,000
69	UCSF BENIOFF CHILDRENS HOSPITAL	PO BOX 45339	SAN FRANCISCO	CA	94145-0339		Exempt	Donation	1,669
70	USS MIDWAY MUSEUM	910 N HARBOR DRIVE	SAN DIEGO	CA	92101		Exempt	Donation	30,000
71	YMCA OF SAN DIEGO COUNTY	3708 RUFFIN ROAD	SAN DIEGO	CA	92123		Exempt	Donation	80,500

Total Contributions, Gifts, Grants Paid

1,012,144

# Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

► **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).

**Do not complete Part II unless** you have already been granted an automatic 3-month extension on a previously filed Form 8868.

**Electronic filing (e-file).** You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit [www.irs.gov/efile](http://www.irs.gov/efile) and click on *e-file for Charities & Nonprofits*.

## Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete Part I only ☐

*All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.*

Type or print	Name of exempt organization or other filer, see instructions	Enter filer's identifying number, see instructions Employer identification number (EIN) or
	<b>JACK IN THE BOX FOUNDATION</b>	<b>33-0776076</b>
File by the due date for filing your return. See instructions	Number, street, and room or suite no. If a P.O. box, see instructions. <b>C/O TAX DEPARTMENT, 9330 BALBOA AVENUE</b>	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>SAN DIEGO, CA 92123-1516</b>	

Enter the Return code for the return that this application is for (file a separate application for each return)

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

- The books are in the care of ► **TAX DEPARTMENT, 9330 BALBOA AVENUE, SAN DIEGO, CA 92123**

Telephone No. ► **858-571-2643** FAX No. ► **858-571-2319**

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)  . If this is for the whole group, check this box ☐ . If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **MAY 15**, 20 **15**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

► ☐ calendar year 20  or

► ☒ tax year beginning **SEPTEMBER 30**, 20 **13**, and ending **SEPTEMBER 28**, 20 **14**.

2 If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return  
☐ Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0
c <b>Balance due.</b> Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0

**Caution.** If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box ☐ **Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.
- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

**Part II Additional (Not Automatic) 3-Month Extension of Time.** Only file the original (no copies needed).

<b>Type or print</b>  File by the due date for filing your return. See instructions.	Name of exempt organization or other filer, see instructions	Enter filer's identifying number, see instructions Employer identification number (EIN) or
	Number, street, and room or suite no. If a P.O. box, see instructions	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	

Enter the Return code for the return that this application is for (file a separate application for each return)

☐

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01		
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

**STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.**

- The books are in the care of ☐ Telephone No. ☐ FAX No. ☐
- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ☐. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

- 4 I request an additional 3-month extension of time until \_\_\_\_\_, 20 \_\_\_\_.
- 5 For calendar year \_\_\_\_\_, or other tax year beginning \_\_\_\_\_, 20 \_\_\_\_\_, and ending \_\_\_\_\_, 20 \_\_\_\_.
- 6 If the tax year entered in line 5 is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period
- 7 State in detail why you need the extension \_\_\_\_\_

<b>8a</b> If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	<b>8a</b>	\$
<b>b</b> If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	<b>8b</b>	\$
<b>c Balance due.</b> Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	<b>8c</b>	\$

**Signature and Verification must be completed for Part II only.**

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ▶

*Paul M.*

Title ▶ DIRECTOR

Date ▶

2/13/15