GOEBEL DAVID Form 4 March 16, 2018

## FORM 4

## OMB APPROVAL

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB Number: 3235-0287

Check this box if no longer subject to Section 16. Form 4 or

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

Expires: 2005
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January 31,

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Form 4 or Form 5 obligations may continue.

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

**SECURITIES** 

response...

See Instruction 1(b).

(Print or Type Responses)

1. Name and Add GOEBEL DA	Symbol	JACK IN THE BOX INC /NEW/				5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)				
(Last) 9330 BALBO	(First) (Mide	earliest Transaction (/Year) 8				_X_ Director 10% Owner Officer (give title Other (specify below)				
	(Street)	dment, Date h/Day/Year)	Original			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
SAN DIEGO, CA 92123							Form filed by More than One Reporting Person			
(City)	(State) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned									
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Code	TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5)  (A) or		)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			
COMMON STOCK	03/16/2018		A	15 <u>(1)</u>	A	\$0	23,173	D		
COMMON	03/16/2018		Α	15 (2)	Δ	\$ 0	23 188	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

A

15 (2)

\$0

03/16/2018

**STOCK** 

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1474

(9-02)

D

23,188

#### Edgar Filing: GOEBEL DAVID - Form 4

#### Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Title	and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	TransactionNumber		Expiration D	ate	Amount	t of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underly	ing	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securitie	es	(Instr. 5)	Bene
	Derivative				Securities			(Instr. 3	and 4)		Own
	Security				Acquired						Follo
	•				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
								^	mount		
									mount		
						Date	Expiration Date	or Title Number of			
						Exercisable					
				C + V	(A) (D)						
				Code V	(A) (D)			S	hares		

## **Reporting Owners**

Relationships Reporting Owner Name / Address

> 10% Owner Officer Other Director

**GOEBEL DAVID** 9330 BALBOA AVENUE X SAN DIEGO, CA 92123

### **Signatures**

STEPHANIE BRINSFIELD by Power of Attorney for DAVID **GOEBEL** 

03/16/2018

\*\*Signature of Reporting Person

Date

## **Explanation of Responses:**

- If the form is filed by more than one reporting person, see Instruction 4(b)(v).
- Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. \*\* 78ff(a).
- Represents dividend equivalents on the outstanding Common Stock Equivalents credited to the reporting person's account under the Jack in the Box Inc. Deferred Compensation Plan for Non-Management Directors on the dividend record date for the **(1)** quarterly dividend declared on 2/19/2018.
- Represents dividend equivalents on vested Restricted Stock Units that were granted on 2/23/2015, 2/22/2016 and 3/1/2017 and **(2)** were deferred by the reporting person until his or her termination of board service. Dividend equivalents are credited to the reporting person's account on the dividend record date for the quarterly dividend declared on 2/19/2018.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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