

JACK IN THE BOX INC /NEW/  
 Form 4  
 November 25, 2015

**FORM 4**

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

OMB APPROVAL

OMB Number: 3235-0287  
 Expires: January 31, 2015  
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

**STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES**

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

(Print or Type Responses)

1. Name and Address of Reporting Person \*  
 COMMA LEONARD A

2. Issuer Name and Ticker or Trading Symbol  
 JACK IN THE BOX INC /NEW/ [JACK]

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

(Last) (First) (Middle)  
 9330 BALBOA AVENUE  
 (Street)

3. Date of Earliest Transaction (Month/Day/Year)  
 11/24/2015

Director  10% Owner  
 Officer (give title below)  Other (specify below)  
 CHAIRMAN & CEO

SAN DIEGO, CA 92123  
 (City) (State) (Zip)

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)  
 Form filed by One Reporting Person  
 Form filed by More than One Reporting Person

**Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned**

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
COMMON STOCK	11/24/2015		A	(A) or (D) Amount <u>14,310</u> <sup>(1)</sup>	\$ 0 112,276	D	
COMMON STOCK	11/24/2015		A	(A) or (D) Amount <u>49,560</u> <sup>(2)</sup>	\$ 0 161,836	D	

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

**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.**

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

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount of Underlying Security (Instr. 3 and 4)
NON QUALIFIED STOCK OPTION	\$ 75.24	11/24/2015		A	43,365	11/24/2016 <sup>(3)</sup> 11/24/2022	COMMON STOCK

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
COMMA LEONARD A 9330 BALBOA AVENUE SAN DIEGO, CA 92123	X		CHAIRMAN & CEO	

## Signatures

Leonard A  
Comma  
11/24/2015  
Date

\*\*Signature of Reporting Person

## 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).
- (1) These securities are restricted stock units that vest in four equal installments commencing one year from the grant date, with after-tax net shares subject to a 50% holding requirement until separation of service from the Company.
- (2) These securities are restricted stock units, 50% of which cliff vest on the fourth anniversary of the grant date, and the remaining 50% on the fifth anniversary of the grant date, with after-tax net shares subject to a 50% holding requirement until separation of service from the Company.
- (3) These options become exercisable in three equal installments commencing one year after the date of grant.

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.