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Form **990-EZ**
Department of the Treasury
Internal Revenue Service

Short Form
Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

OMB No 1545-1150
2009
Open to Public Inspection

▶ Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form.
▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

A For the 2009 calendar year, or tax year beginning 06-01-2009, and ending 05-31-2010

B Check if applicable: Address change, Name change, Initial return, Terminated, Amended return, Application pending.
C Name of organization: MURDOCK ELEMENTARY SCHOOL FOUNDATION INC.
Number and street (or P O box, if mail is not delivered to street address) Room/suite: 2320 Murdock Road
City or town, state or country, and ZIP + 4: Manetta, GA 30062
D Employer identification number: 77-0634995
E Telephone number: (770) 579-0768
F Group Exemption Number:

▶ **Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).**
G Accounting method: Cash Accrual
Other (specify) ▶

I Website:
J Tax-Exempt status (check only one): 501(c)(3) (insert no) 4947(a)(1) or 527
H Check if the organization is **not** required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

K Check if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally **not** more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return.
L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$500,000 or more, file Form 990 instead of Form 990-EZ ▶ \$ 92,710

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I)

Revenue	
1 Contributions, gifts, grants, and similar amounts received	1 74,266
2 Program service revenue including government fees and contracts	2 0
3 Membership dues and assessments	3 0
4 Investment income	4 692
5a Gross amount from sale of assets other than inventory	5a 0
b Less cost or other basis and sales expenses	5b 0
c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c 0
6 Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here <input type="checkbox"/>	
a Gross revenue (not including \$ 0 of contributions reported on line 1)	6a 17,752
b Less direct expenses other than fundraising expenses	6b 7,605
c Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c 10,147
7a Gross sales of inventory, less returns and allowances	7a 0
b Less cost of goods sold	7b 0
c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c 0
8 Other revenue (describe)	8 0
9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9 85,105
Expenses	
10 Grants and similar amounts paid (attach schedule)	10 91,272
11 Benefits paid to or for members	11 0
12 Salaries, other compensation, and employee benefits	12 0
13 Professional fees and other payments to independent contractors	13 29,014
14 Occupancy, rent, utilities, and maintenance	14 0
15 Printing, publications, postage, and shipping	15 457
16 Other expenses (describe)	16 673
17 Total expenses. Add lines 10 through 16	17 121,416
Net Assets	
18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18 -36,311
19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19 107,669
20 Other changes in net assets or fund balances (attach explanation)	20 0
21 Net assets or fund balances at end of year Combine lines 18 through 20	21 71,358

Part II Balance Sheets—If total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ

(See the instructions for Part II)

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	107,669	22 71,358
23 Land and buildings	0	23 0
24 Other assets (describe)	0	24 0
25 Total assets	107,669	25 71,358
26 Total liabilities (describe)	0	26 0
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	107,669	27 71,358

Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only.

All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 and 51.

	Yes	No
46 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		No
47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II		No
48 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		No
49a Did the organization make any transfers to an exempt non-charitable related organization?		No
49b If "Yes," was the related organization a section 527 organization?		

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				

50(f) Total number of other employees paid over \$100,000

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
NONE		

51(d) Total number of other independent contractors each receiving over \$100,000

Please 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 officer) is based on all information of which preparer has any knowledge.

Signature of officer 2010-10-05
Date

Anneke Loubser Treasurer
Type or print name and title

Paid Preparer's Use Only	Preparer's signature <input type="text"/>	Date <input type="text"/>	Check if self-employed <input type="checkbox"/>	Preparer's identifying number (See instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4 <input type="text"/>			EIN <input type="text"/>
				Phone no <input type="text"/>

May the IRS discuss this return with the preparer shown above? See instructions Yes No

SCHEDULE A
(Form 990 or 990EZ)

Public Charity Status and Public Support

OMB No 1545-0047

2009

Open to Public Inspection

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Department of the Treasury
Internal Revenue Service

Name of the organization
MURDOCK ELEMENTARY SCHOOL FOUNDATION INC

Employer identification number

77-0634995

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

- 1 A church, convention of churches, or association of churches **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state

- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 8 A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)
- 10 An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h
 a Type I b Type II c Type III - Functionally integrated d Type III - Other
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
- f If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?
 (ii) a family member of a person described in (i) above?
 (iii) a 35% controlled entity of a person described in (i) or (ii) above?
- h Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support?
			Yes	No	Yes	No	Yes	No	
Total									

Part II Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
 (Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public Support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income (Explain in Part IV.) Do not include gain or loss from the sale of capital assets						
11 Total support (Add lines 7 through 10)						

12 Gross receipts from related activities, etc (See instructions) 12

13 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

14 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f)) 14

15 Public Support Percentage for 2008 Schedule A, Part II, line 14 15

16a 33 1/3% support test—2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

b 33 1/3% support test—2008. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

17a 10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization

b 10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization

18 Private Foundation If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions

Part III Support Schedule for Organizations Described in IRC 509(a)(2)

(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	25,132	26,610	33,608	28,918	74,266	188,534
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	50,777	74,863	75,705	59,771	17,752	278,868
3 Gross receipts from activities that are not an unrelated trade or business under section 513	0	0	0	0	0	0
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0	0	0
5 The value of services or facilities furnished by a governmental unit to the organization without charge	0	0	0	0	0	0
6 Total. Add lines 1 through 5	75,909	101,473	109,313	88,689	92,018	467,402
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	0	0	0	0	0	0
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year	0	0	0	0	0	0
c Add lines 7a and 7b	0	0	0	0	0	0
8 Public Support (Subtract line 7c from line 6)						467,402

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6	75,909	101,473	109,313	88,689	92,018	467,402
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	780	2,276	2,035	953	692	6,736
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	0	0	0	0	0	0
c Add lines 10a and 10b	780	2,276	2,035	953	692	6,736
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	0	0	0	0	0	0
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	0	0	0	0	0	0
13 Total support (Add lines 9, 10c, 11 and 12)	76,689	103,749	111,348	89,642	92,710	474,138
14 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public Support Percentage for 2009 (line 8 column (f) divided by line 13 column (f))	15	98.579 %
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	99 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c column (f) divided by line 13 column (f))	17	1.421 %
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	1 %
19a 33 1/3% support tests—2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization <input checked="" type="checkbox"/>		
b 33 1/3% support tests—2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
20 Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions <input type="checkbox"/>		

Part IV **Supplemental Information.** Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

Part III Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events
		<u>Kid's Art Sale</u> (event type)	<u>Other Fundraisers</u> (event type)	<u>0</u> (total number)	(Add col (a) through col (c))
Revenue	1 Gross receipts	9,970	7,782		17,752
	2 Less Charitable contributions	0	0		0
	3 Gross income (line 1 minus line 2)	9,970	7,782		17,752
Direct Expenses	4 Cash prizes	0	0		0
	5 Non-cash prizes	0	0		0
	6 Rent/facility costs	0	0		0
	7 Food and beverages	0	0		0
	8 Entertainment	0	0		0
	9 Other direct expenses	6,966	639		7,605
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				7,605
11 Net income summary Combine lines 3, column d, and line 10. ▶				10,147	

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming
					(Add col (a) through col (c))
Revenue	1 Gross revenue				
	2 Cash prizes				
Direct Expenses	3 Non-cash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No		
7 Direct expense summary Add lines 2 through 5 in column (d) ▶					
8 Net gaming income summary Combine lines 1, column d, and line 7 ▶					

		Yes	No
9 Enter the state(s) in which the organization operates gaming activities _____			
a Is the organization licensed to operate gaming activities in each of these states?	9a		
b If "No," Explain _____			
10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	10a		
b If "Yes," Explain _____			
11 Does the organization operate gaming activities with nonmembers?	11		
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	12		

		Yes	No
13 Indicate the percentage of gaming activity operated in			
a The organization's facility	13a		
b An outside facility	13b		
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records			
Name ▶ _____			
Address ▶ _____			
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?		15a	
b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____			
c If "Yes," enter name and address			
Name ▶ _____			
Address ▶ _____			
16 Gaming manager information			
Name ▶ _____			
Gaming manager compensation ▶ \$ _____			
Description of services provided ▶ _____			
<input type="checkbox"/> Director/officer <input type="checkbox"/> Employee <input type="checkbox"/> Independent contractor			
17 Mandatory distributions			
a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?		17a	
b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____			

TY 2009 Grants and Similar Amounts Paid Schedule

Name: MURDOCK ELEMENTARY SCHOOL FOUNDATION INC

EIN: 77-0634995

Software ID: 09000073

Software Version: v1.00

Item No.	1
Class of Activity	NonCash
Donee's Name	Murdock Elementary School
Donee's Address	2320 Murdock Road Marietta, GA 30062
Amount (FMV)	7,050
Purpose of Payment to Affiliate	Technology and curriculum enrichment
Relationship	Elementary sch. recipient
Description	Software - IXL and First in Math
Book Value	7,050
How BV Determined	cost to purchase new
How FMV Determined	cost to purchase new
Date of Gift	2009-08

Item No.	2
Class of Activity	NonCash
Donee's Name	Murdock Elementary School
Donee's Address	2320 Murdock Road Marietta, GA 30062
Amount (FMV)	632
Purpose of Payment to Affiliate	Technology and curriculum enrichment
Relationship	Elementary Sch. recipient
Description	Supplies for Spanish and Science Teachers
Book Value	632
How BV Determined	cost to purchase new
How FMV Determined	cost to purchase new
Date of Gift	2010-05

Item No.	3
Class of Activity	NonCash
Donee's Name	Murdock Elementary School
Donee's Address	2320 Murdock Road Marietta, GA 30062
Amount (FMV)	37,177
Purpose of Payment to Affiliate	Technology and curriculum enrichment
Relationship	Elementary Sch recipient
Description	Support salaries to Spanish and Science Teachers
Book Value	37,177
How BV Determined	Yearly salary of teachers
How FMV Determined	Yearly salary of teachers
Date of Gift	2010-05

Item No.	4
Class of Activity	Noncash
Donee's Name	Murdock Elementary School
Donee's Address	2320 Murdock Road Marietta, GA 30062
Amount (FMV)	3,660
Purpose of Payment to Affiliate	Technology and curriculum enrichment
Relationship	Elementary Sch recipient
Description	Books for different grade levels
Book Value	3,660
How BV Determined	cost to purchase new
How FMV Determined	cost to purchase new
Date of Gift	2010-05

Item No.	5
Class of Activity	Noncash
Donee's Name	Murdock Elementary School
Donee's Address	2320 Murdock Rd Marietta, GA 30062
Amount (FMV)	13,002
Purpose of Payment to Affiliate	Technology and curriculum enrichment
Relationship	Elementary Sch recipient
Description	Grants to teachers for training
Book Value	13,002
How BV Determined	cost to purchase
How FMV Determined	cost to purchase
Date of Gift	2010-05

Item No.	6
Class of Activity	Noncash
Donee's Name	Murdock Elementary School
Donee's Address	2320 Murdock Rd Marietta, GA 30062
Amount (FMV)	664
Purpose of Payment to Affiliate	Technology and curriculum enrichment
Relationship	Elementary Sch recipient
Description	USA Mural for school
Book Value	664
How BV Determined	cost to purchase new
How FMV Determined	cost to purchase new
Date of Gift	2009-10

Item No.	7
Class of Activity	NonCash
Donee's Name	Murdock Elementary School
Donee's Address	2320 Murdock Road Marietta, GA 30062
Amount (FMV)	22,865
Purpose of Payment to Affiliate	Technology and curriculum enrichment
Relationship	Elementary Sch recipient
Description	purchase 27 computers for the school
Book Value	22,865
How BV Determined	cost to purchase new
How FMV Determined	cost to purchase new
Date of Gift	2009-09

Item No.	8
Class of Activity	Noncash
Donee's Name	Murdock Elementary School
Donee's Address	2320 Murdock Rd Marietta, GA 30062
Amount (FMV)	6,106
Purpose of Payment to Affiliate	Technology and curriculum enrichment
Relationship	Elementary sch recipient
Description	Cartridges, bulbs, batteries, phonic ear replacements
Book Value	6,106
How BV Determined	cost to purchase new
How FMV Determined	cost to purchase new
Date of Gift	2010-02

Item No.	9
Class of Activity	Noncash
Donee's Name	Murdock Elementary School
Donee's Address	2320 Murdock Rd Marietta, GA 30062
Amount (FMV)	116
Purpose of Payment to Affiliate	Technology and curriculum enrichment
Relationship	Elementary sch recipient
Description	Camera for Art Class
Book Value	116
How BV Determined	Cost to purchase new
How FMV Determined	Cost to purchase new
Date of Gift	2010-05

TY 2009 Other Expenses Schedule**Name:** MURDOCK ELEMENTARY SCHOOL FOUNDATION INC**EIN:** 77-0634995**Software ID:** 09000073**Software Version:** v1.00

Description	Amount
Bank Fees	70
Credit Card Fees	133
Liability Insurance	415
Corporate Registration	55

Additional Data**Software ID:****Software Version:****EIN:** 77-0634995**Name:** MURDOCK ELEMENTARY SCHOOL FOUNDATION INC**Form 990EZ, Part IV - List of Officers, Directors, Trustees, and Key Employees**

(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 & deferred compensation	(E) Expense account and other allowances
Cindy Barber 2320 Murdock Rd Marietta, GA 30062	President 20 00	0	0	0
Allison Redhead 2320 Murdock Road Marietta, GA 30062	Vice President 10 00	0	0	0
Anneke Loubser 2320 Murdock Road Marietta, GA 30062	Treasurer 10 00	0	0	0
Tracy Foreman 2320 Murdock Road Marietta, GA 30062	Secretary 10 00	0	0	0
Jayne Becker 2320 Murdock Road Marietta, GA 30062	Teacher Liason 5	0	0	0
Renee Kopkowski 2320 Murdock Road Marietta, GA 30062	PTA Liason 5	0	0	0
Patricia Kramer 2320 Murdock Road Marietta, GA 30062	Past President 5	0	0	0
Brad Contat 2320 Murdock Road Marietta, GA 30062	Teacher Liason 5	0	0	0
Natalie Richman 2320 Murdock Road Marietta, GA 30062	Board Member 10	0	0	0
Peggy Flemming 2320 Murdock Road Marietta, GA 30062	Board Member 10	0	0	0