



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



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

**2009**

Department of the Treasury  
Internal Revenue Service

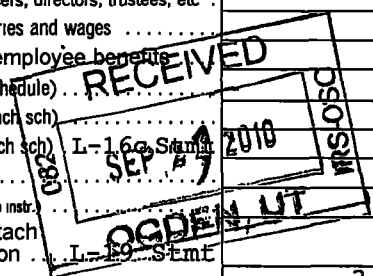
Note: The foundation may be able to use a copy of this return to satisfy state reporting requirements.

For calendar year **2009**, or tax year beginning **2009**, and ending **2009**

**G** Check all that apply:  Initial return  Initial Return of a former public charity  Final return  
 Amended return  Address change  Name change

<b>Use the IRS label. Otherwise, print or type. See Specific Instructions.</b>	Name of foundation <b>BREARWOOD CHARITABLE TRUST</b>	<b>A</b> Employer identification number <b>91-1808246</b>
	Number and street (or P.O. box number if mail is not delivered to street address) Room/suite <b>129 BELL ST</b>	<b>B</b> Telephone number (see the instructions) <b>(858) 336-4571</b>
	City or town State ZIP code <b>RENO NV 89503</b>	<b>C</b> If exemption application is pending, check here <input type="checkbox"/> <b>D 1</b> Foreign organizations, check here <input type="checkbox"/> <b>2</b> Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/> <b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/> <b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>
<b>H</b> 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		
<b>I</b> Fair market value of all assets at end of year (from Part II, column (c), line 16) \$ <b>275,972.</b>	<b>J</b> Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)	

	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 the instructions).)	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
<b>REVENUE</b>	<b>1</b> Contributions, gifts, grants, etc., received (att sch) <span style="float:right">0</span>				
	<b>2</b> Ck <input checked="" type="checkbox"/> if the foundn is not req to att Sch B				
	<b>3</b> Interest on savings and temporary cash investments <span style="float:right">50.</span>	50.	50.		
	<b>4</b> Dividends and interest from securities <span style="float:right">445.</span>	445.	445.		
	<b>5a</b> Gross rents				
	<b>b</b> Net rental income or (loss)				
	<b>6a</b> Net gain/(loss) from sale of assets not on line 10				
	<b>b</b> Gross sales price for all assets on line 6a				
	<b>7</b> Capital gain net income (from Part IV, line 2)		0.		
	<b>8</b> Net short-term capital gain				
	<b>9</b> Income modifications				
	<b>10a</b> Gross sales less returns and allowances				
<b>b</b> Less: Cost of goods sold					
<b>c</b> Gross profit/(loss) (att sch)					
<b>11</b> Other income (attach schedule)					
<b>12</b> Total. Add lines 1 through 11		495.	495.		
<b>ADMINISTRATIVE AND OPERATING EXPENSES</b>	<b>13</b> Compensation of officers, directors, trustees, etc.				
	<b>14</b> Other employee salaries and wages				
	<b>15</b> Pension plans, employee benefits				
	<b>16a</b> Legal fees (attach schedule)				
	<b>b</b> Accounting fees (attach sch)				
	<b>c</b> Other prof fees (attach sch)		600.	150.	450.
	<b>17</b> Interest				
	<b>18</b> Taxes (attach schedule) (see instr.)				
	<b>19</b> Depreciation (attach sch) and depletion		459.		
	<b>20</b> Occupancy		3,000.	2,250.	750.
<b>21</b> Travel, conferences, and meetings		2,445.	1,834.	611.	
<b>22</b> Printing and publications					
<b>23</b> Other expenses (attach schedule) See Line 23 Stmt		5,873.	4,405.	1,468.	
<b>24</b> Total operating and administrative expenses. Add lines 13 through 23		12,377.	8,639.	3,279.	
<b>25</b> Contributions, gifts, grants paid					
<b>26</b> Total expenses and disbursements. Add lines 24 and 25		12,377.	8,639.	3,279.	
<b>27</b> Subtract line 26 from line 12:					
<b>a</b> Excess of revenue over expenses and disbursements		-11,882.			
<b>b</b> Net investment income (if negative, enter -0-)			0.		
<b>c</b> Adjusted net income (if negative, enter -0-)					



SCANNED OCT 07 2010

174  
17

Part II Balance Sheets		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
ASSETS	1 Cash – non-interest-bearing			
	2 Savings and temporary cash investments	233,163.	232,174.	232,174.
	3 Accounts receivable			
	Less: allowance for doubtful accounts			
	4 Pledges receivable			
	Less: allowance for doubtful accounts			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see the instructions)			
	7 Other notes and loans receivable (attach sch)			
	Less: allowance for doubtful accounts			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments – U.S. and state government obligations (attach schedule)			
	b Investments – corporate stock (attach schedule) L-10b Stmt	24,779.	59,633.	42,875.
	c Investments – corporate bonds (attach schedule)			
	11 Investments – land, buildings, and equipment: basis			
Less: accumulated depreciation (attach schedule)				
12 Investments – mortgage loans				
13 Investments – other (attach schedule)				
14 Land, buildings, and equipment: basis 2,509.				
Less: accumulated depreciation (attach schedule) L-14 Stmt 1,586.	1,382.	923.	923.	
15 Other assets (describe)				
16 Total assets (to be completed by all filers – see instructions. Also, see page 1, item I)	259,324.	292,730.	275,972.	
LIABILITIES	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, & other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe)			
	23 Total liabilities (add lines 17 through 22)			
NET FUND ASSETS OR FUND BALANCES	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. <input type="checkbox"/>			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. <input checked="" type="checkbox"/>			
	27 Capital stock, trust principal, or current funds	259,324.	292,730.	
	28 Paid-in or capital surplus, or land, building, and equipment fund			
29 Retained earnings, accumulated income, endowment, or other funds				
30 Total net assets or fund balances (see the instructions)	259,324.	292,730.		
31 Total liabilities and net assets/fund balances (see the instructions)	259,324.	292,730.		

Part III Analysis of Changes in Net Assets or Fund Balances

1 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)	1	259,324.
2 Enter amount from Part I, line 27a	2	-11,882.
3 Other increases not included in line 2 (itemize) FUND ADJ	3	28,530.
4 Add lines 1, 2, and 3	4	275,972.
5 Decreases not included in line 2 (itemize) FUND ADJ	5	-16,758.
6 Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 30	6	292,730.

**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 shares MLC Company)	(b) How acquired P - Purchase D - Donation	(c) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1 a PLS SEE ATTACHED SCHEDULE SHORT	P	07/15/08	03/24/09
b PLS SEE ATTACHED SCHEDULE LONG	P	02/04/08	03/20/09
c			
d			
e			

(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)
a 48,688.		64,821.	-16,133.
b 19,843.		44,103.	-24,260.
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Column (h) gain minus column (k), but not less than -0-) or Losses (from column (h))
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (i) over column (j), if any	
a			-16,133.
b			-24,260.
c			
d			
e			

2 Capital gain net income or (net capital loss). <span style="float:right">[ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 ]</span>	2	-40,393.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): <span style="float:right">[ If gain, also enter in Part I, line 8, column (c) (see the instructions). If (loss), enter -0- in Part I, line 8 ]</span>	3	

**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 (column (b) divided by column (c))
2008	43,695.	278,457.	0.156918
2007	32,829.	345,001.	0.095156
2006	19,138.	263,823.	0.072541
2005	15,631.	242,261.	0.064521
2004		199,441.	

2 Total of line 1, column (d)	2	0.389136
3 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	3	0.097284
4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5	4	144,050.
5 Multiply line 4 by line 3	5	14,014.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	0.
7 Add lines 5 and 6	7	14,014.
8 Enter qualifying distributions from Part XII, line 4	8	3,279.

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.

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

1 a	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 instr.)		
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	1	0.
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	0.
3	Add lines 1 and 2	3	0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	0.
6	Credits/Payments:		
a	2009 estimated tax pmts and 2008 overpayment credited to 2009	6a	
b	Exempt foreign organizations – tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d	7	
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	0.
11	Enter the amount of line 10 to be: Credited to 2010 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>	11	

**Part VII A Statements Regarding Activities**

	Yes	No
1 a		X
b		X
c		X
d		
e		
2		X
3		X
4a		X
4b		
5		X
6	X	
7	X	
8a		
8b	X	
9		X
10		X

BAA

**Part III Statements Regarding Activities Continued**

11	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) .....	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008? .....	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? .....	13	X	
Website address .....				
▶ N/A				
14	The books are in care of ▶ ANNA HARELSON Telephone no. ▶ (858) 336-4571			
Located at ▶ P O BOX 1678, LA JOLLA, CA ZIP + 4 ▶ 92038				
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here .....	▶ <input type="checkbox"/>		
and enter the amount of tax-exempt interest received or accrued during the year .....				
▶ 15				

**Part III 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
1 a	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? (Exception. 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	If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see the instructions)? .....	1b	X
Organizations relying on a current notice regarding disaster assistance check here .....			
▶ <input checked="" type="checkbox"/>			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2009? .....	1c	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
a	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
If 'Yes,' list the years ▶ 20__ , 20__ , 20__ , 20__ .			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer 'No' and attach statement - see the instructions.) .....	2b	
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ▶ 20__ , 20__ , 20__ , 20__ .		
3 a	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	If 'Yes,' did it have excess business holdings in 2009 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 2009.) .....	3b	
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? .....	4a	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009? .....	4b	X

BAA

**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)?

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?

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?

If 'Yes' to 6b, file Form 8870.

Yes  No

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

**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
ANNA HARELSON 5836 LA JOLLA HERMOSA LA JOLLA CA 92037	TRUSTEE 2.00	0.	0.	0.
-----				
-----				
-----				
-----				

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
NONE				
0				
0				
0				
0				

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

None

**Part VII 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 ..... None

**Part VIII 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 NONE	
-----	0.
2	
-----	

**Part IX 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 PREVENTION OF BIPOLAR	
-----	0.
2 PREVENTION OF DDH	
-----	0.

All other program-related investments. See instructions.  
 3 -----

Total. Add lines 1 through 3 ..... None

BAA

**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>1 a</b>	24,779.
<b>b</b>	Average of monthly cash balances .....	<b>1 b</b>	121,465.
<b>c</b>	Fair market value of all other assets (see instructions) .....	<b>1 c</b>	
<b>d</b>	<b>Total</b> (add lines 1a, b, and c) .....	<b>1 d</b>	146,244.
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) .....	<b>1 e</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>	146,244.
<b>4</b>	Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions) .....	<b>4</b>	2,194.
<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>	144,050.
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5 .....	<b>6</b>	7,203.

**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>	7,203.
<b>2a</b>	Tax on investment income for 2009 from Part VI, line 5 .....	<b>2 a</b>	0.
<b>b</b>	Income tax for 2009. (This does not include the tax from Part VI.) .....	<b>2 b</b>	
<b>c</b>	Add lines 2a and 2b .....	<b>2 c</b>	0.
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1 .....	<b>3</b>	7,203.
<b>4</b>	Recoveries of amounts treated as qualifying distributions .....	<b>4</b>	
<b>5</b>	Add lines 3 and 4 .....	<b>5</b>	7,203.
<b>6</b>	Deduction from distributable amount (see instructions) .....	<b>6</b>	
<b>7</b>	<b>Distributable amount as adjusted.</b> Subtract line 6 from line 5. Enter here and on Part XIII, line 1 .....	<b>7</b>	7,203.

**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>1 a</b>	3,279.
<b>b</b>	Program-related investments — total from Part IX-B .....	<b>1 b</b>	0.
<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>3 a</b>	
<b>b</b>	Cash distribution test (attach the required schedule) .....	<b>3 b</b>	
<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>	3,279.
<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>	0.
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4 .....	<b>6</b>	3,279.

**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.

**Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI, line 7				7,203.
2 Undistributed income, if any, as of the end of 2009:				
a Enter amount for 2008 only			0.	
b Total for prior years: 20__, 20__, 20__				
3 Excess distributions carryover, if any, to 2009:				
a From 2004	0.			
b From 2005	3,703.			
c From 2006	5,947.			
d From 2007	15,579.			
e From 2008	29,772.			
f Total of lines 3a through e	55,001.			
4 Qualifying distributions for 2009 from Part XII, line 4: \$ 3,279.				
a Applied to 2008, but not more than line 2a				
b Applied to undistributed income of prior years (Election required - see instructions)				
c Treated as distributions out of corpus (Election required - see instructions)				
d Applied to 2009 distributable amount				3,279.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a).)	3,924.			3,924.
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	51,077.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b. Taxable amount - see instructions		0.		
e Undistributed income for 2008. Subtract line 4a from line 2a. Taxable amount - see instructions			0.	
f Undistributed income for 2009. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2010				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)				
8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	51,077.			
10 Analysis of line 9:				
a Excess from 2005	0.			
b Excess from 2006	5,726.			
c Excess from 2007	15,579.			
d Excess from 2008	29,772.			
e Excess from 2009	0.			

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

**1** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2009, enter the date of the ruling ▶ 09/05/97

**b** Check box to indicate whether the foundation is a private operating foundation described in section  4942(j)(3) or  4942(j)(5)

**2** 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) 2009	(b) 2008	(c) 2007	(d) 2006	
<b>b</b> 85% of line 2a					
<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:					
<b>(1)</b> Value of all assets					
<b>(2)</b> 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:					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
<b>(3)</b> Largest amount of support from an exempt organization					
<b>(4)</b> Gross investment income					

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

**1 Information Regarding Foundation Managers:**

**a** 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).)

ROBERT AND ANNA HARELSON  
P O BOX 1678, LA JOLLA, CA 92038

**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.

NONE

---

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc, Programs:**

Check here  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.

**a** The name, address, and telephone number of the person to whom applications should be addressed:

ROBERT AND ANNA HARELSON  
P O BOX 1678  
LA JOLLA, CA 92038 (858) 336-4571

**b** The form in which applications should be submitted and information and materials they should include:

NONE

**c** Any submission deadlines:

NONE

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

NONE







**Depreciation and Amortization  
(Including Information on Listed Property)**

▶ See separate instructions. ▶ Attach to your tax return.

Name(s) shown on return

**BREARWOOD CHARITABLE TRUST**

Identifying number

**91-1808246**

Business or activity to which this form relates

Form **990-PF** page **1**

**Part I Election To Expense Certain Property Under Section 179**

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount. See the instructions for a higher limit for certain businesses	1	\$250,000.
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	\$800,000.
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2008 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instrs)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2010. Add lines 9 and 10, less line 12	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

**Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.)** (See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

**Part III MACRS Depreciation (Do not include listed property.)** (See instructions)

**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2009	17	459.
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		

**Section B – Assets Placed in Service During 2009 Tax Year Using the General Depreciation System**

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only – see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27.5 yrs	MM	S/L	
i Nonresidential real property			39 yrs	MM	S/L	

**Section C – Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System**

20a Class life					S/L	
b 12-year			12 yrs		S/L	
c 40-year			40 yrs	MM	S/L	

**Part IV Summary** (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations – see instructions	22	459.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

**Listed Property** (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)

**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

**Section A – Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)**

24 a Do you have evidence to support the business/investment use claimed? .....									<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	24b If 'Yes,' is the evidence written? .....		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/Convention	(h) Depreciation deduction	(i) Elected section 179 cost						
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions) .....								25						
26 Property used more than 50% in a qualified business use:														
27 Property used 50% or less in a qualified business use:														
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 .....								28						
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1 .....								29						

**Section B – Information on Use of Vehicles**

Complete this section for vehicles used by a sole proprietor, partner, or other 'more than 5% owner,' or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
30 Total business/investment miles driven during the year (do not include commuting miles) .....												
31 Total commuting miles driven during the year .....												
32 Total other personal (noncommuting) miles driven .....												
33 Total miles driven during the year. Add lines 30 through 32 .....												
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
34 Was the vehicle available for personal use during off-duty hours? .....												
35 Was the vehicle used primarily by a more than 5% owner or related person? .....												
36 Is another vehicle available for personal use? .....												

**Section C – Questions for Employers Who Provide Vehicles for Use by Their Employees**

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions).

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? .....	Yes	No
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners .....		
39 Do you treat all use of vehicles by employees as personal use? .....		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? .....		
41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.) .....		
<b>Note:</b> If your answer to 37, 38, 39, 40, or 41 is 'Yes,' do not complete Section B for the covered vehicles.		

**Amortization**

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2009 tax year (see instructions):					
43 Amortization of costs that began before your 2009 tax year .....					43
44 <b>Total.</b> Add amounts in column (f). See the instructions for where to report .....					44

Form 990-PF, Page 1, Part I, Line 23

**Line 23 Stmt**

Other expenses:	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
DUES AND SUBS	118.	89.		29.
OTHER EXPENSES	5,755.	4,316.		1,439.
<b>Total</b>	<b>5,873.</b>	<b>4,405.</b>		<b>1,468.</b>

Form 990-PF, Page 1, Part I

**Line 16c - Other Professional Fees**

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ROBERT ABBOTT TAX	TAX PREPARATION	600.	150.		450.
<b>Total</b>		<b>600.</b>	<b>150.</b>		<b>450.</b>

Form 990-PF, Line 19

**Allocated Depreciation**

Description	Date Acquire	Cost or Basis	Prior Yr. Depr	Mthd	Life	Current Depr	Net Invest Income	Adjusted Net Income
COMPUTER	01/07/07	1165	606	200DB	5.00	224		
OFFICE FURNITURE	01/07/07	1344	521	200DB	7.00	235		

Total

Form 990-PF, Page 2, Part II, Line 10b

**L-10b Stmt**

Line 10b - Investments - Corporate Stock:	End of Year	
	Book Value	Fair Market Value
AMERITRADE	59,633.	42,875.
<b>Total</b>	<b>59,633.</b>	<b>42,875.</b>

Form 990-PF, Page 2, Part II, Line 14

**L-14 Stmt**

Line 14b - Description of Land, Buildings, and Equipment	(a) Cost/Other Basis	(b) Accumulated Depreciation	(c) Book Value
COMPUTERS	1,165.	756.	409.
OFFICE FURNITURES	1,344.	830.	514.
<b>Total</b>	<b>2,509.</b>	<b>1,586.</b>	<b>923.</b>

**Supporting Statement of:**

Form 990-PF, p2/Line 2(a)

Description	Amount
AMERITRADE	110,824.
PACIFIC WESTERN	122,339.
Total	<u>233,163.</u>

**Supporting Statement of:**

Form 990-PF, p2/Line 2(b)

<b>Description</b>	<b>Amount</b>
PACIFIC WESTERN	85,280.
AMERITRADE	146,894.
Total	<u>232,174.</u>



Statement for Account # 788-739628  
03/01/09 - 03/31/09

Money Market Fund Account Interest Credited					
Begin Date	Balance	Number of Days	Interest Rate	Interest Accrued	MTD PAID
03/31/09	179,611.24	1	0.0500	0.25	5.32
Total Interest Income					\$5.32

Positions Closed This Period												
Investment Description	Account Type	Symbol/ CUSIP	Quantity	Purchase Date	Cost Basis	Sale Date	Proceeds	Realized Gain(Loss)	% Gain(Loss)	Interest	Accrued	MTD PAID
APPLE INC COM	Cash	AAPL	100	02/04/08	\$ 13,537.99	03/20/09	\$ 10,216.28	\$ (3,321.70) LT ✓	(24.5)%			
APPLE INC COM	Cash	AAPL	50	07/15/08	8,449.49	03/20/09	5,108.15	(3,341.34) ST	(39.5)%			
APPLE INC COM	Cash	AAPL	50	07/15/08	8,449.49	03/24/09	5,429.47	(3,020.02) ST	(35.7)%			
BANK OF AMERICA CORP COM	Cash	BAC	200	02/04/08	8,837.80	03/20/09	1,274.02	(7,563.78) LT ✓	(85.6)%			
CEMEX S.A.B. DE C.V.	Cash	CX	200	02/22/06	5,170.00	03/24/09	1,218.20	(3,951.80) LT ✓	(76.4)%			
SPONS ADR PART CER	Cash	GLW	400	03/13/08	9,381.63	03/20/09	6,190.38	(4,191.25) LT ✓	(44.7)%			
CORNING INC CM	Cash	F	8,000	12/11/08	24,155.18	03/20/09	21,588.88	(2,566.30) ST	(10.6)%			
FORD MOTOR CO COM	Cash	F	2,000	12/11/08	5,863.80	03/24/09	5,750.37	(113.43) ST ✓	(1.9)%			
FORD MOTOR CO COM	Cash	GE	200	02/04/08	7,175.80	03/20/09	1,944.01	(5,231.79) LT ✓	(72.9)%			
GENERAL ELECTRIC CO COM	Cash	GE	300	09/17/08	6,795.24	03/20/09	2,916.02	(3,879.22) ST	(57.1)%			
GENERAL ELECTRIC CO COM	Cash	LCAV	600	05/19/08	4,929.99	03/24/09	1,898.05	(3,031.94) ST	(61.5)%			
LCA-VISION INC COM	Cash	MDT	200	12/09/08	6,177.79	03/24/09	5,996.21	(181.58) ST	(2.9)%			
MEDTRONIC INC COM	Cash											
Total					\$108,924.20		\$68,531.05	\$ (40,393.15)				

2009 Consolidated Forms 1099

Details of Form 1099-B - Proceeds from Broker and Barter Exchange Transactions

(OMB No: 1545-0715)

LINE #2 STOCKS, BONDS, ETC. REPORTED TO IRS - GROSS PROCEEDS LESS COMMISSIONS AND OPTIONS PREMIUMS

LINE # 1A)	DATE	DESCRIPTION (LINE # 7)	SYMBOL	CUSIP (LINE # 1B)	INFORMATION	# SHARES EXCHANGED (LINE # 5)	CLASS (LINE # 6)	AMOUNT (LINE # 2)	FEDERAL TAX WITHHELD (LINE # 4)	NO LOSS IF CHECKED (LINE # 12)	
03/20/09		APPLE INC COM	AAPL	037833100	SELL	150	C	15,324.44	0.00		
03/24/09		APPLE INC COM	AAPL	037833100	SELL	50	C	5,429.47	0.00		
03/20/09		BANK OF AMERICA CORP COM	BAC	060505104	SELL	200	C	1,274.02	0.00		
03/24/09		CEMEX S A B DE C.V SPONS ADR PART CER	CX	151290889	SELL	200	O	1,218.20	0.00		
03/20/09		CORNING INC CM	GLW	219350105	SELL	400	C	5,190.38	0.00		
03/20/09		FORD MOTOR COM	F	345370860	SELL	8,000	C	21,589.88	0.00		
03/24/09		FORD MOTOR COM	F	345370860	SELL	2,000	C	5,750.37	0.00		
03/20/09		GENERAL ELECTRIC CO COM	GE	369604103	SELL	500	C	4,860.03	0.00		
03/24/09		LCA-VISION INC COM	LCAV	501803308	SELL	600	C	1,898.05	0.00		
03/24/09		MEDTRONIC INC COM	MDT	585055106	SELL	200	C	5,996.21	0.00		
<b>TOTALS</b>									<b>12,300</b>	<b>\$</b>	<b>68,531.05</b>
											<b>0.00</b>

**After Visit Summary**

Anna M Harelson (MPN # 000012307503)

**Visit and Patient Information****Visit Information**

Date & Time	Provider	Department
9/2/2010 3:10 PM	BRIAN KIYOSHI BARROZO MD	Intsdclm Pci2 2i

**Visit Summary****Vitals - Last Recorded**

BP	Pulse	Temp(Src)	Ht	Wt
157/63	66	98.7 °F (37.1 °C) (Tympanic)	1.676 m (5' 6")	77.565 kg (171 lb)

Vitals History Recorded

**BMI Data**

Body Mass Index	Body Surface Area
27.61 kg/m <sup>2</sup>	1.90 m <sup>2</sup>

**Visit Diagnoses**

**HX OF STROKE WO RESIDUAL**  
**HYPERLIPIDEMIA**  
**ESSENTIAL HTN**  
**TRANSIENT CEREBRAL ISCHEMIA**  
**PERIPHERAL VENOUS INSUFFICIENCY**  
**POSTNASAL DRIP**

**Patient Instructions**

- 1) use Clonidine as needed for systolic blood pressure >160
- 2) continue HCTZ 25mg every day
- 3) restart exercise (walk for at least 20 minutes at a time)

Rx: Flonase 1-2 sprays per nostril every day for post-nasal drip

**Allergies****Allergies as of 9/2/2010**

Allergies as of 9/2/2010	Noted	Type	Date Reviewed: 9/2/2010	Reactions
Doxycycline Hyclate	8/6/2004			
Erythromycin Base	9/16/2001			
Lisinopril	9/16/2001			Headaches

**Medications****NEW Medications**

Fluticasone (FLONASE) 50 mcg/Actuation Nasl SpSn

**Patient Reported Taking**

Medication	Dosage
Fluticasone (FLONASE) 50 mcg/Actuation Nasl SpSn (Taking)	USE 2 SPRAYS IN EACH NOSTRIL DAILY FOR ALLERGY
Dipyridamole-Aspirin (AGGRENOX) 200-25	TAKE 1 CAPSULE 2 TIMES A DAY