# Form **990**

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047 2022

Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public.

Open to Public

A	Fari	ha 2022 aalaa		www.irs.gov/Form990 for inst				1.		mspection
<u> </u>			dar year, or tax year b	eginning	, 2022, ar	nd ending	<u> </u>			, 20
В		if applicable:						D Employ	er iden	tification number
	∐^	ddress change	Breakthrough 1	Men's Community				77-	0115	5704
	ЦΝ	ame change	532 Abrego St	00040				E Telepho	ne nun	nber
	lr	nitial return	Monterey, CA	93940				(83)	1) 2	219-6919
	Fi	nal return/terminated						100		.13 0313
	ПА	mended return						G Gross re	cointe	\$ 308,236.
	$\prod_{A}$	pplication pending	F Name and address of pr	incipal officer:	<del></del>		-I(a) is this	a group retur		
		, , ,	Same As C Abo	·						1 1 63 1 140
$\overline{}$	Tay	-exempt status:	X 501(c)(3) 501(c		1 A047(a)(1) as 1	1507	If "No,	l subordinates " attach a list.	See in	ed? Yes No structions.
<del>'</del>			<del></del>		4947(a)(1) or	527				
			w.breakthrough					exemption nu	mber	
K		n of organization:	X Corporation Trust	Association Other	L Yea	r of formatio	n: 1 <u>98</u>	7 <b>M</b> s	tate of	legal domicile: CA
Pa	ırt I	Summar	у				_			
	1	Briefly descri	be the organization's r	mission or most significant	activities:Prov	<u>ide ed</u>	lucati	onal c	lass	ses and
à		workshop	<u>s_and_scholars</u>	hips for classes	and worksh	lops.				
Ē					<b></b>					_ <b></b> _
E			- <b></b>		<b></b>					
Activities & Governance	2	Check this bo	x if the organiz	zation discontinued its ope	erations or dispose	⋴ <b>⋜⋸</b> ⋓	ēl₩Æ[2	25% of its⊪	net as	ssets.
অ	3	Number of vo	ting members of the g	poverning body (Part VI, linds bear softhe governing body)	<sup>ne 1a)</sup> .∴Attorn	ev Ga	norali	e Offica	3	14
S	4	Tatal number of the	dependent voting men	ibers of the governing boo	ly (Part VI, 'Ime' II	69.9	ilciai.	ع کرازانط		14
ŧ	5	Total number	of individuals employ	ed in calendar year 2022 ( te if necessary)	Part V, line 2a)	NOV:1	E 202	<b>2</b> · · · · · · [	5	10
5	7a	Total uprolate	of volunteers (estima	om Part VIII, column (C),		INO.Y J	. U 4U.L.	ا ا	6	75
◂		Not unrelated	business tevenue II	om Part VIII, column (C), ome from Form 990-T, Par	Ine 12	of Charit			7a	0.
_		TVEL UITTETALEU	business taxable mice	me irom Form 990-1, Par	t i, line i incylsiry.	UI CHAN			7b	0.
		Contributions	and areads (David \/III	C 11->			Р	rior Year		Current Year
ē	8	Program same	and grants (Part VIII,	line 1h)				129,4		209,544.
Revenue	9	Program serv	ice revenue (Part VIII,	line 2g)			L	133,1	24.	98,673.
é	10	investment in	come (Part VIII, colun	nn (A), lines 3, 4, and 7d)					14.	19.
•	11	Tatal revenue	e (Part VIII, column (A	), lines 5, 6d, 8c, 9c, 10c,	and 11e)					
	12	Total revenue	- add lines 8 through	n 11 (must equal Part VIII,	column (A), line	12)	ļ	262,5	55.	308,236.
	13			art IX, column (A), lines 1				_		
	14			art IX, column (A), line 4).						
ø	15			oyee benefits (Part IX, co				160,6	34.	94,745.
Expenses	16a	Professional f	undraising fees (Part	IX, column (A), line 11e).						
ē			ing expenses (Part IX			92.	74		123	
ω̈́	17			), lines 11a-11d, 11f-24e).		92.				
				ust equal Part IX, column				93,8		113,962.
								254,4	$\overline{}$	208,707.
	יו	Revenue less	expenses. Subtract III	ne 18 from line 12				<u>8,1</u>	-	99,529.
t Assets or id Balances	20	Total a+ 1	Dank V. Brand 165				Beginnin	g of Current		End of Year
	20	Total assets (	Part X, line 16)					141,5		241,229.
Ž								3,2	77.	3,400.
	22			ct line 21 from line 20				138,3	oo.l	237,829.
Pa	rt II	Signature	Block		1			<u>'</u>		
Jnde	r penalt	ties of perjury, I dec	clare that I have examined thi	s return, including accompanying s d on all information of which prepa	nedules and statement	ts, and to the	e best of m	v knowledge a	nd heli	ef it is true correct and
comp	lete. De	eclaration of prepar	er (other than officer) is base	d on all information of which prepa	fer has any knowledge.			,		ary it is that your sort and
Sig	n	Signature of o	officer	////////			Date			11 / /
Hei	'e	Arnold	Westphal	to Ny		Ex	ecuti	ve Dir	act c	r 11/9/123
		Type or print	name and title					70 211		/- // // /
		Print/Type pr	eparer's name	Preparer's signature	Da	ate		Check	if	PTIN
Pai	d	Bonnie	Adcox					_	, ,	
	u pare			ccountancy Corpo	ration			self-employed	<u>' _ l</u>	P01381828
Use	On	y Firm's addres			LACTUII			F1		04.004
	- <b>-</b> - 11	Firm's addres		c St Ste 300				Firm's EIN		<u>-2147667</u>
A :	4h - ''	DO 41:	Monterey,	JA 93940				Phone no.	<u>831-</u>	-372-7348
vıay	the II	へっ aiscuss thi	s return with the prepa	arer shown above? See in	structions					X Yes No

	m 990 (2022) Breakthrough Men's Community	77-0115704	Page 2
Pai	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		П
1	Briefly describe the organization's mission:		
	Provide educational classes and workshops and scholarships for	classes and work	shops
			<u></u>
	Did the organization undertake any significant program services during the year which were not listed on the	prior	
	Form 990 or 990-EZ?		X No
	If "Yes," describe these new services on Schedule O.		N NO
3		services? Yes	X No
	If "Yes," describe these changes on Schedule O.	scrvices:	X No
4		omilaan an was a wall be	
	Section 501(C)(3) and 501(C)(4) organizations are required to report the amount of grants and allocate	tions to others, the total exi	penses. Senses
	and revenue, if any, for each program service reported.	ment to this e, the total exp	0011000,
4a	(Code:) (Expenses \$ 127,684. including grants of \$	) (Revenue \$	)
	Conducted educational classes and workshops for personal growth		and
	to further their work against sexism.	- 31 Parererpunce	4114
46	(Code: ) (Expenses \$ including grants of \$		
40	(Code:) (Expenses \$ including grants of \$)	(Revenue \$	)
		<b>-</b>	
		<b>-</b>	
		<b></b>	
		<b>-</b>	
		<b></b>	
<b>4</b> c	(Code:) (Expenses \$ including grants of \$)	(Revenue \$	)
			<b>-</b>
4d	Other program services (Describe on Schedule O.)		<del></del>
	(Expenses \$ including grants of \$ ) (Revenue	\$	
46	Total program service expenses 127 694	·	<del></del>

1	Is the organization described in section 501(c)(2) or 4047(c)(1) (other than a private foundation)? If IIV II		Yes	No
•	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	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.	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II.	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I.	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or $X$ , as applicable.			N,
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		Х
b	Did the organization report an amount for investments — other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		Х
	Did the organization report an amount for investments – program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII.	12a	ĺ	Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b		
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV.	15		
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		
	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
2 ^ ^				

Pa	rt IV	Checklist	of Reau	uired Sch	redules	(continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J.	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If a "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	-	Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I.	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III.	27		х
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):	As \$\frac{1}{2}\$.	/7 <b>3</b>	*
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV.	28b		Х
c	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV.	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I.	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1.	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2.	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		Х
	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?  Note: All Form 990 filers are required to complete Schedule O.	38	Х	
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
12	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			#f
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			<u> </u>
> A A	(gambling) winnings to prize winners?  TEEA0104L 09/01/22	1c	Х	
BAA	1 LEAO 1041 03/01/22	Form	990 (	20221

Form 990 (2022) Breakthrough Men's Community

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

			Yes	No			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 10						
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X				
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X			
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O.	3b		<del></del>			
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		х			
b	If "Yes," enter the name of the foreign country	4a		A			
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).						
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		x			
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X			
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		<del></del>			
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?						
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6a 6b					
7	Organizations that may receive deductible contributions under section 170(c).	- 05	G.				
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and						
	services provided to the payor?	7a		Х			
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b					
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7с		X			
d	If "Yes," indicate the number of Forms 8282 filed during the year	70					
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	20	X			
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X			
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g					
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h					
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring						
	organization have excess business holdings at any time during the year?	8					
	Sponsoring organizations maintaining donor advised funds.			1886			
	Did the sponsoring organization make any taxable distributions under section 4966?	9a					
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b					
	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12	7					
	Initiation fees and capital contributions included on Part VIII, line 12	4.2.					
	Section 501(c)(12) organizations. Enter:						
	Gross income from members or shareholders						
	Gross income from other sources. (Do not net amounts due or paid to other sources		Agil				
	against amounts due or received from them.)						
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b	12a					
	Section 501(c)(29) qualified nonprofit health insurance issuers.						
	Is the organization licensed to issue qualified health plans in more than one state?	13a					
	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.	1.54	- 3				
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans						
С	Enter the amount of reserves on hand						
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X			
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b					
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		X			
	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		<u>x</u>			
	If "Yes," complete Form 4720, Schedule O.	16	-				
	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would						
	result in the imposition of an excise tax under section 4951, 4952, or 4953?	17					

Form 990 (2022) Breakthrough Men's Community 77-0115704 Page 6 Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year..... 1a 14 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. **b** Enter the number of voting members included on line 1a, above, who are independent . . . . 1b 14 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?..... 2 X Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?..... 3 Х Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?..... X 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . . . . . X 5 6 Did the organization have members or stockholders?..... 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?..... Х 7a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?..... 7h Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?.... Яa Х **b** Each committee with authority to act on behalf of the governing body?..... Χ 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O..... 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates?.... 10a Х b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?..... X 11a **b** Describe on Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O 12a Did the organization have a written conflict of interest policy? If "No," go to line 13...... X 12a **b** Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done.... 12c 13 Did the organization have a written whistleblower policy?..... 13 14 Did the organization have a written document retention and destruction policy?..... 14 X 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official..... 15a 15b X If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?..... X 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?. Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed CA Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website X Upon request Other (explain on Schedule O) Describe on Schedule 0 whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year. See Schedule O 20 State the name, address, and telephone number of the person who possesses the organization's books and records. Arnold Westphal 532 Abrego St Monterey CA 93940 (831) 219-6919

# Part VII | Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII...

## Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

X Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

				(C)	)					
(A) Name and title	(B) Average hours per	15	both dir	ector	ot che unles officer /truste	and a	) compensation from		(E) Reportable compensation from	<b>(F)</b> Estimated amount of other
	per week (list any hours for related organiza- tions below dotted line)	individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099- MISC/1099-NEC)	related organizations (W-271099- MISC/1099-NEC)	compensation from the organization and related organizations
(1) Stephen Osborne Executive Director	$-\frac{40}{0}$					Х		30,000.	0.	0
(2) Paul Gaucher	5					Λ		30,000.		0.
Secretary	0	Х		X				0.	0.	0.
(3) Arnold Westphal Chair	5-0	х		Х				0.	0.	-
(A) Tom I oo	5	^		Λ	_		-	0.	0.	0.
Vice-Chair/Trs	0	Х		Х				0.	0.	0.
(5)										
(6)										
<u>(7)</u>										
(8)										
(9)										
(10)										
(11)			i							
(12)										
(13)										
(14)										
BAA	TEE A 0.1	071	20/01	/22						Form 000 (2022)

\$100,000 of compensation from the organization

Total number of independent contractors (including but not limited to those listed above) who received more than

Form 990 (2022) Breakthrough Men's Community 77-0115704 Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII... (B) Related or (A) Total revenue (C) (D) Revenue excluded from tax Unrelated exempt business under sections 512-514 function revenue revenue 1a Federated campaigns...... 1a **b** Membership dues..... 1b c Fundraising events..... 1c GĦB, **d** Related organizations...... 1d e Government grants (contributions) . . . . 1e Contributions, and Other Sin f All other contributions, gifts, grants, and similar amounts not included above . . . 1f 209,544 g Noncash contributions included in 1g h Total. Add lines 1a-1f..... 209,544 Program Service Revenue **Business Code** 2a Class and workshop fees 77,054 77,054 Miscellaneous-refunds 11,719 11,719 Summer retreat \_\_\_\_ 9,900 9,900 f All other program service revenue ... g Total. Add lines 2a-2f..... 98,673. Investment income (including dividends, interest, and other similar amounts) ....... 19 19. Income from investment of tax-exempt bond proceeds (i) Real (ii) Personal 6a Gross rents..... 6a **b** Less: rental expenses 6b c Rental income or (loss) 6c **d** Net rental income or (loss)...... (i) Securities (ii) Other 7a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss)..... 7c **d** Net gain or (loss)..... 8a Gross income from fundraising events Revenue (not including \$ of contributions reported on line 1c). See Part IV, line 18 . . . . . . . . . . . . 8a 4 Other **b** Less: direct expenses...... 8b c Net income or (loss) from fundraising events ..... 9a Gross income from gaming activities. 9a **b** Less: direct expenses...... 9b c Net income or (loss) from gaming activities..... Gross sales of inventory, less.....

		Net income or (loss) from sales of inve	entory				
50			Business Code				42
ន្ត	ը 11a	a					
₩.		,					
# 1		:					
Misc	Ž (	All other revenue					
Σ	E	Total. Add lines 11a-11d			5 &		- 8.
	12	Total revenue. See instructions		308,236.	98,673.	0.	19

**b** Less: cost of goods sold . . . .

i 0a

10b

Seci	Check if Schedule O contains a re				X
	not include amounts reported on lines	(A)	(B)	(C)	(D)
	7b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.				
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members		-		
5	Compensation of current officers, directors, trustees, and key employees	30,000.	15,000.	15,000.	0.
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	57,440.	28,720.	28,720.	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)		20,720.	20,720.	
9	Other employee benefits				
10 11	Payroll taxes	7,305.	3,653.	3,652.	
а	Management				
b	Legal				
С	Accounting	6,140.		6,140.	
	Lobbying			0,140.	
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
	Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule 0.)				
	L	44 404			
13	Office expenses	11,401.	5,701.	5,700.	
14	Information technology.				
15	Royalties				ļ. <u> </u>
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates	·-··			
22	Depreciation, depletion, and amortization				
23	Insurance	12,007.	6,004.	6,003.	<u> </u>
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses	그래는 선생님			
	on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
а	Contract Labor-Marketing	30,262.	30,262.	And the second s	
		14,808.	7,404.	7,404.	
С	Marketing Exp	8,677.	8,677.		
d	Meeting Expense	8,257.	4,129.	A 120	
	All other expenses. See Sch. O.	22,410.	18,134.	4,128. 4,184.	02
	Total functional expenses. Add lines 1 through 24e	208,707.	127,684.	80,931.	92.
		200, 101.	147,004.	80,931.	92.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.  Check here  if following SOP 98-2 (ASC 958-720)				

Form 990 (2022) Breakthrough Men's Community

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		<b>(B)</b> End of year
	1	Cash — non-interest-bearing	112,975.	1	112,613.
	2	Savings and temporary cash investments	28,602.	2	128,616.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			
			åe UKA	5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
SS	9	Prepaid expenses and deferred charges		9	
⋖		Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D			
	b	Less: accumulated depreciation	<del></del>	10c	
	11	Investments — publicly traded securities.		11	
	12	Investments – other securities. See Part IV, line 11		12	
	13	Investments – program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	<u> </u>	15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	141,577.	16	241,229.
	17	Accounts payable and accrued expenses.	3,277.	17	3,400.
	18	Grants payable	5/2//.	18	3,100.
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
es	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		-	
	23	Secured mortgages and notes payable to unrelated third parties.		22	
	24	Unsecured notes and loans payable to unrelated third parties.		23	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D.		24	
	26	Total liabilities. Add lines 17 through 25.	3,277.	26	3,400.
alances		Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.	5,211.		3,400.
듄	27	Net assets without donor restrictions	138,300.	27	237,829.
	28	Net assets with donor restrictions.	130,300.	28	237,829.
Net Assets or Fund B		Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.		20	
5	20				
2	29	Capital stock or trust principal, or current funds.		29	
8	30	Paid-in or capital surplus, or land, building, or equipment fund.		30	
As	31	Retained earnings, endowment, accumulated income, or other funds		31	
اقة	32	Total liabilities and ask seeds (four liberal liabilities)	138,300.	32	<u>237,829.</u>
	33	Total liabilities and net assets/fund balances	141,577.	33	241,229.
BA	4	TEEA0111L 09/01/22			Form 990 (2022)

	n 990 (2022) Breakthrough Men's Community 77	-0115704		P	age <b>12</b>
Pa	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	3	08,	236.
2	Total expenses (must equal Part IX, column (A), line 25).	2	2	08,	707.
3	Revenue less expenses. Subtract line 2 from line 1				529.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))		1		300.
5	Net unrealized gains (losses) on investments.				
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments				
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				<del></del>
D ==	column (B))	10	2	37,	<u>829.</u>
Pal	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual X Other See Sch. (	)	7.79		<b>†</b>
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or review separate basis, consolidated basis, or both:  Separate basis  Consolidated basis  Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a sepa		20		<u> </u>
	basis, consolidated basis, or both:	iaic			
	Separate basis Consolidated basis Both consolidated and separate basis			4	Pro-
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the aud review, or compilation of its financial statements and selection of an independent accountant?	t,	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.				Y .
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Guidance, 2 C.F.R Part 200, Subpart F?	Uniform	3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required au	ıdit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
BAA	TEEA0112L 09/01/22		Form	990	(2022)

#### SCHEDULE A (Form 990)

## **Public Charity Status and Public Support**

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.

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2022

Open to Public Inspection

Name	Name of the organization Employer identification number								
	akthrough Men's Comm					77-011570	14		
Par	Reason for Public Cha	arity Status. (All	organizations must	compl	ete thi	s part.) See instruc	ctions.		
The d	organization is not a private foun	dation because it is:	(For lines 1 through 12,	check o	only one	box.)			
1	A church, convention of church	nes, or association of o	churches described in <b>sec</b>	tion 170	(b)(1)(A)	(i).			
2	A school described in section	n 170(b)(1)(A)(ii). (At	ttach Schedule E (Form	990).)					
3	A hospital or a cooperative l								
4	A medical research organiza	ition operated in conj	junction with a hospital	describe	ed in <b>se</b>	ction 170(b)(1)(A)(iii). E	Inter the hospital's		
	name, city, and state:						·		
5	An organization operated for section 170(b)(1)(A)(iv). (Co	r the benefit of a colle omplete Part II.)	ege or university owned	or ope	ated by	a governmental unit de	escribed in		
6	A federal, state, or local gov	ernment or governme	ental unit described in s	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 <b>section 170(b)(1)(A)(vi)</b> . (Complete Part II.)								
8	A community trust described	l in section 170(b)(1)	(A)(vi). (Complete Part	II.)					
9	An agricultural research organ				coniuncti	on with a land-grant colle	ene		
	or university or a non-land-gra	nt college of agriculture	e (see instructions). Ente	r the nar	ne, city,	and state of the college	or		
	university:					•			
10	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.)								
11	An organization organized a	nd operated exclusive	ely to test for public saf	ety. See	section	n 509(a)(4).			
12	An organization organized a or more publicly supported clines 12a through 12d that di	irganizations describe	ed in <b>section 509(a)(1)</b> (	ar sectio	n 509/a	V2) See section 509/s	ut the purposes of one <b>(3).</b> Check the box on		
а	Type I. A supporting organization organization (s) the power to recomplete Part IV, Sections A	on operated, supervise gularly appoint or elec	ed or controlled by its sur	norted o	rnanizat	ion(s) typically by giving	the supported on. <b>You must</b>		
b	Type II. A supporting organize management of the supporting must complete Part IV, Sect	Organization vested in	controlled in connection the same persons that c	with its ontrol or	suppor manage	ted organization(s), by the supported organizat	having control or ion(s). <b>You</b>		
c	Type III functionally integrated organization(s) (see instruction	. A supporting organiza	tion operated in connection	n with, a	nd functi	onally integrated with, its	supported		
d	Type III non-functionally integ functionally integrated. The c instructions). You must com	rated. A supporting ord	nanization operated in cor	nection	with ite	supported organization(s) t and an attentiveness	that is not requirement (see		
е	Check this box if the organiz	ation received a writt	ten determination from t	the IRS	that it is	a Type I Type II Typ	e III functionally		
	integrated, or Type III non-fu	inctionally integrated	supporting organization	١.			e in functionally		
f	Enter the number of supported	organizations							
	Provide the following informatio			<del>-</del>					
(	<ol> <li>Name of supported organization</li> </ol>	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	organiza in your g	s the tion listed loverning ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)		
				Yes	No				
(Δ)									
<u>(A)</u>				<u> </u>					
(B)	(B)								
(C)	с)								
(D)					,				
(E)									
Total				, Switter	8				

Schedule A (Form 990) 2022 Breakthrough Men's Community 77-0115704

Part II Support Schedule for Organizations Described in Sections 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 or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Se	ction A. Public Support								
	endar year (or fiscal year inning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	<b>(d)</b> 2021	<b>(e)</b> 2022	(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	<b>Public support.</b> Subtract line 5 from line 4					7. Tag			
Sec	tion B. Total Support								
	endar year (or fiscal year inning in)	<b>(a)</b> 2018	<b>(b)</b> 2019	<b>(c)</b> 2020	(d) 2021	<b>(e)</b> 2022	(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. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)								
	Total support. Add lines 7 through 10				. ,	· .			
12	Gross receipts from related activ	ities, etc. (see ins	structions)						
	<b>First 5 years.</b> If the Form 990 is a organization, check this box and	stop nere	• • • • • • • • • • • • • • • • • • • •	third, fourth, or fit	fth tax year as a s	section 501(c)(3)			
Sec	tion C. Computation of Pub	olic Support P	ercentage						
14	Public support percentage for 20	22 (line 6, columr	(f), divided by lin	ne 11, column (f))		14	%		
	Public support percentage from 2						%		
16a	6a 33-1/3% support test—2022. 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	b 33-1/3% support test—2021. If the organization did not check a 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 ter or more, and if the organization re the organization meets the facts-	neers the tacts.at	nd-circi imetancae	tact chack this h	ay and ctan have	Euplain in Daul \	// 1		
	<b>10%-facts-and-circumstances tes</b> or more, and if the organization rorganization meets the facts-and	rieets the facts-ar -circumstances te	nd-circumstances est. The organizati	test, check this bo on qualifies as a p	ox and <b>stop here.</b> oublicly supported	.Explain in Part \ d organization	/I how the		
18	Private foundation. If the organiz	ation did not che	ck a box on line 1	3, 16a, 16b, 17a,	or 17b, check this	s box and see ins	tructions		
BAA						C-level to	A (F 000) 0000		

Part III

Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support							
	dar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	<b>(e)</b> 202	2	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include					<u>`</u> ′		
	any "unusual grants.")	142,877.	143,015.	212,336.	129,417.	209,5	44.	837,189.
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	115,158.	127,894.	134,726.	133,124.	98,6	73.	609,575.
3	Gross receipts from activities that are not an unrelated trade or business under section 513.							
4	Tax revenues levied for the organization's benefit and							0.
	either paid to or expended on its behalf							0
5	The value of services or							0.
	facilities furnished by a governmental unit to the organization without charge							0.
	Total. Add lines 1 through 5	258,035.	270,909.	347,062.	262,541.	308,2	17.	1,446,764.
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.
	Add lines 7a and 7b	0.	0.	0.	0.		0.	0.
	<b>Public support.</b> (Subtract line 7c from line 6.)				1	1. 1.		1,446,764.
Sec	tion B. Total Support							
Calen	dar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	<b>(e)</b> 202	2	(f) Total
	Amounts from line 6	258,035.	270,909.	347,062.	262,541.	308,2	17.	1,446,764.
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from							
b	similar sources	4.		9.	14.		19.	46.
	income (less section 511 taxes) from businesses acquired after June 30, 1975							n
_	Add lines 10a and 10b	4.	0.	9.	14.		19.	46.
11	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on.							
12	Other income. Do not include							0.
	gain or loss from the sale of capital assets (Explain in Part VI.)							0.
	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.)	258,039.	270,909.	347,071.	262,555.	308,2	36.	1,446,810.
	First 5 years. If the Form 990 is organization, check this box and	stop here		third, fourth, or fi	fth tax year as a s	ection 5010	C)(3)	
	tion C. Computation of Pu							
	Public support percentage for 20						15	100.00 %
	Public support percentage from						16	100.00 %
	tion D. Computation of Inv						- 1	
	Investment income percentage for						17	0.00 %
	Investment income percentage fi 33-1/3% support tests—2022. If t						18	0.00 %
	is not more than 33-1/3%, check 33-1/3% support tests—2021. If t	this box and <b>stop</b>	<b>here.</b> The organi	zation qualifies a	s a publicly suppo	rted organi	zation	X
	line 18 is not more than 33-1/3% <b>Private foundation.</b> If the organization	o, check this box a	ind <b>stop here.</b> The	organization qua	alifies as a publicl	y supported	orgar	nization
~0	ate roundation. If the organi.	Zadon did Hot Che	ch a box on nie i	→, ושמ, טו ושט, Cr	IECK THIS DOX SUG	see mstruci	. ZNOL	

#### Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section	Δ	ΔΙΙ	<b>Supporting Organizations</b>	
3660011	М.	$\sim$ 11	Supporting Organizations	

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1	,	
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		Pagas a
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the determination.	3b		Š
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b	.**	
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	<b>4</b> c	2758	
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		ÿ
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in <b>Part VI</b> .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7	- }	
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).	8	140	
9а	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in <b>Part VI</b> .	9a		2 72
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in <b>Part VI</b> .	9b		
С	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in <b>Part VI.</b>	9с		
0a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.	10a		*
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10b	ð:	

	rt IV Supporting Organizations (continued)  Breakthrough Men's Community 77-011570	14	F	Page <b>5</b>
			Yes	No
	Has the organization accepted a gift or contribution from any of the following persons?	[ · · · ·		
•	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?	11a	, 35v .	a fish
	<b>b</b> A family member of a person described on line 11a above?	11b		
	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.	11c		
	ction B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		
Sec	ction C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Sec	ction D. All Type III Supporting Organizations			
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	_	Yes	No
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).	2	1.474	
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.	3	*	·
Sec	ction E. Type III Functionally Integrated Supporting Organizations	<del></del>		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
	The organization satisfied the Activities Test. Complete line 2 below.			
ı	The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see	instru	ıctions	s).
2				
			Yes	No
•	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify those supported organizations and explain</b> how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
I	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.	- 30		4
ā	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in <b>Part VI</b> .	3a		
t	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.	3b		Ř.

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Breakthrough Men's Community

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Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	aniza	tions						
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.									
Sec	Section A — Adjusted Net Income  (A) Prior Year (Optional)								
_1	Net short-term capital gain	1							
2	Recoveries of prior-year distributions	2							
3	Other gross income (see instructions)	3							
4	Add lines 1 through 3.	4							
5	Depreciation and depletion	5							
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6							
7	Other expenses (see instructions)	7							
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8							
Sec	tion B — Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)					
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):								
	Average monthly value of securities	1a							
	Average monthly cash balances	1b							
	Fair market value of other non-exempt-use assets	1c							
	Total (add lines 1a, 1b, and 1c)	1d							
•	Discount claimed for blockage or other factors (explain in detail in Part VI):								
2	Acquisition indebtedness applicable to non-exempt-use assets	2							
3	Subtract line 2 from line 1d.	3							
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4							
_ 5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5							
6	Multiply line 5 by 0.035.	6							
7	Recoveries of prior-year distributions	7							
8	Minimum Asset Amount (add line 7 to line 6)	8							
Sec	tion C — Distributable Amount			Current Year					
_1	Adjusted net income for prior year (from Section A, line 8, column A)	1	. A	*					
2	Enter 0.85 of line 1.	2							
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3							
4	Enter greater of line 2 or line 3.	4							
5	Income tax imposed in prior year	5	4. £						
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6							
7	Check here if the current year is the organization's first as a non-functionally inter(see instructions).	grated	Type III supporting or	ganization					

	edule A (Form 990) 2022 Breakthrough Men's	Community	77	'-011	L5704	Page :
	rt V Type III Non-Functionally Integrated 509(a)(3) S	Supporting Organiza	tions (continue	d)	-	
Sec	tion D — Distributions				Current Ye	ear
1	Amounts paid to supported organizations to accomplish exempt p	ourposes		1		
2	Amounts paid to perform activity that directly furthers exempt purposes	s of supported organizations	S,			
	in excess of income from activity			2		
3	to describe particular to describe par peace of a	supported organizations		3		
4	Amounts paid to acquire exempt-use assets			4		
5	Qualified set-aside amounts (prior IRS approval required - provided - provide	de details in <b>Part VI</b> )		5		
6	Other distributions (describe in Part VI). See instructions.			6		
_7	Total annual Communication / Red Infect / Rinoagif C:			7		
8	a service to enterior supported organizations to trillor the organization	ation is responsive (provide	details			
_	in Part VI). See instructions.			8		
	Distributable amount for 2022 from Section C, line 6			9		
	Line 8 amount divided by line 9 amount			10		
Sec	tion E — Distribution Allocations (see instructions)	(i) Excess	(ii) Underdistribution		(iii)	hla
500	aion E — Distribution Anocations (see instructions)	Distributions	Pre-2022	פווכ	Distributal Amount for 2	
1	Distributable amount for 2022 from Section C, line 6	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7				
2	Underdistributions, if any, for years prior to 2022 (reasonable				ja e	1.0
	cause required – explain in Part VI). See instructions.					
	Excess distributions carryover, if any, to 2022					- 446
	From 2017		4.5			
	From 2018		1.24			
	From 2019		Skar			
	From 2020					
	From 2021	A				
	f Total of lines 3a through 3e		14			
Ç	Applied to underdistributions of prior years			Ì		
	Applied to 2022 distributable amount					
	Carryover from 2017 not applied (see instructions)				# # # # # # # # # # # # # # # # # # #	-
	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		1.50			<del></del>
4	Distributions for 2022 from Section D.					
	line 7: \$		1			
	Applied to underdistributions of prior years					
	Applied to 2022 distributable amount					
	Remainder. Subtract lines 4a and 4b from line 4.				- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	7 k
5	Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.					
6	Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.	454, 45				
_ 7	Excess distributions carryover to 2023. Add lines 3j and 4c.				31 51 52 84	
8	Breakdown of line 7:					
а	Excess from 2018					
	Excess from 2019					
C	Excess from 2020					

**e** Excess from 2022 . . . . . BAA

d Excess from 2021.....

Schedule A (Form 990) 2022

Part VI

Supplemental Information. Provide the explanations required by Part II, line 10; Part III, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

#### **SCHEDULE 0** (Form 990)

### Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or Form 990-EZ.

2022 Open to Public Inspection Go to www.irs.gov/Form990 for the latest information.

Department of the Treasury Internal Revenue Service

Employer identification number

OMB No. 1545-0047

77-0115704

Breakthrough Men's Community

#### Form 990, Part VI, Line 11b - Form 990 Review Process

Tax Return will be reviewed by officer before signing.

#### Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

Upon request.

#### Form 990, Part IX, Line 24e Other Expenses

		(A)	(B) Program	(C) Management	(D)
	_	Total	Services_	& General	Fundraising
Bank & CC Charges Education-Misc		4,444.	2,222.	2,222.	
Event Expenses Fundraising Expense		1,717. 92.	859.	858.	92.
Mileage reimbursements Other taxes		312. 191.	156. 96.	156. 95.	52.
Postage and Shipping		754.	377.	377.	
Site expenses Summer retreat expenses		193. 8,104.	97. 8,104.	96.	
Telephone Expense Workshop Exp		760. 5,843.	380. 5,843.	380.	
* *	Total 3			\$ 4,184.	\$ 92.

Form 990, Part XII, Line 1 - Other Accounting Method

Hybrid