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

Return of Private Foundation
or Section 4947(a)(1) Trust Treated as Private Foundation
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 Information about Form 990-PF and its instructions is at www.irs.gov/form990pf.

OMB No 1545-0052
2015
Open to Public Inspection

For calendar year 2015, or tax year beginning 01-01-2015, and ending 12-31-2015

Name of foundation MAKEYOURSELF FOUNDATION C/O PROVIDENT FM		A Employer identification number 47-0921336
Number and street (or P O box number if mail is not delivered to street address) PO BOX 4084	Room/suite	B Telephone number (see instructions) (310) 282-0477
City or town, state or province, country, and ZIP or foreign postal code SANTA MONICA, CA 90411		C If exemption application is pending, check here <input type="checkbox"/>
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H 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		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$ 60,396	J 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)	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))</i>		Revenue and expenses per books (a)	Net investment income (b)	Adjusted net income (c)	Disbursements for charitable purposes (d) (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)	35,692			
	2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities				
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a _____				
	7 Capital gain net income (from Part IV, line 2)		0		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule)	190,083	0	190,083		
12 Total. Add lines 1 through 11	225,775	0	190,083		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	0	0	0	0
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule).				
	b Accounting fees (attach schedule).				
	c Other professional fees (attach schedule)	2,018	0	0	0
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	10	0	0	0
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule).	116,047	0	0	0
	24 Total operating and administrative expenses. Add lines 13 through 23	118,075	0	0	0
	25 Contributions, gifts, grants paid	50,521			50,521
26 Total expenses and disbursements. Add lines 24 and 25	168,596	0	0	50,521	
27 Subtract line 26 from line 12					
a Excess of revenue over expenses and disbursements	57,179				
b Net investment income (if negative, enter -0-)		0			
c Adjusted net income (if negative, enter -0-)			190,083		

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	3,523	59,098	59,098
	2 Savings and temporary cash investments			
	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 instructions).			
	7 Other notes and loans receivable (attach schedule) ▶ _____ 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)			
	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 ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
15 Other assets (describe ▶ _____)	0	1,298	1,298	
16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	3,523	60,396	60,396	
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule).			
	22 Other liabilities (describe ▶ _____)			
	23 Total liabilities (add lines 17 through 22)	0	0	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds	0	0	
	28 Paid-in or capital surplus, or land, bldg, and equipment fund	0	0	
29 Retained earnings, accumulated income, endowment, or other funds	3,523	60,396		
30 Total net assets or fund balances (see instructions)	3,523	60,396		
31 Total liabilities and net assets/fund balances (see instructions)	3,523	60,396		

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	3,523
2	Enter amount from Part I, line 27a	2	57,179
3	Other increases not included in line 2 (itemize) ▶ _____	3	0
4	Add lines 1, 2, and 3	4	60,702
5	Decreases not included in line 2 (itemize) ▶ _____	5	306
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	60,396

Part IV Capital Gains and Losses for Tax on Investment Income

(a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a			
b			
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			
b			
c			
d			
e			

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

2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8		3

Part V 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

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(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 (col (b) divided by col (c))
2014	0	12,004	0 000000
2013	86,600	38,574	2 245036
2012	145,057	105,705	1 372281
2011	10,127	53,340	0 189858
2010	136,000	71,967	1 889755

2 Total of line 1, column (d).	2	5 696930
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	1 139386
4 Enter the net value of noncharitable-use assets for 2015 from Part X, line 5.	4	41,511
5 Multiply line 4 by line 3.	5	47,297
6 Enter 1% of net investment income (1% of Part I, line 27b).	6	0
7 Add lines 5 and 6.	7	47,297
8 Enter qualifying distributions from Part XII, line 4.	8	50,521

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 page 18 of the instructions)

Table with 11 rows for excise tax calculation. Rows include: 1a Exempt operating foundations, b Domestic foundations, c All other domestic foundations, 2 Tax under section 511, 3 Add lines 1 and 2, 4 Subtitle A (income) tax, 5 Tax based on investment income, 6 Credits/Payments (6a-6d), 7 Total credits and payments, 8 Enter any penalty, 9 Tax due, 10 Overpayment, 11 Enter the amount of line 10 to be Credited to 2015 estimated tax Refunded.

Part VII-A Statements Regarding Activities

Table with 10 rows for statements regarding activities. Rows include: 1a Did the foundation attempt to influence any national, state, or local legislation, b Did it spend more than \$100 during the year for political purposes, c Did the foundation file Form 1120-POL, d Enter the amount of tax on political expenditures, e Enter the reimbursement paid by the foundation, 2 Has the foundation engaged in any activities that have not previously been reported to the IRS?, 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, 4a Did the foundation have unrelated business gross income of \$1,000 or more, 4b If "Yes," has it filed a tax return on Form 990-T, 5 Was there a liquidation, termination, dissolution, or substantial contraction, 6 Are the requirements of section 508(e) satisfied, 7 Did the foundation have at least \$5,000 in assets, 8a Enter the states to which the foundation reports, b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General, 9 Is the foundation claiming status as a private operating foundation, 10 Did any persons become substantial contributors during the tax year?

Part VII-A 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		No
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		No
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► WWW.MAKEYOURSELFFOUNDATION.ORG	13	Yes	
14 The books are in care of ► PROVIDENT FINANCIAL MANAGEMENT Telephone no ► (310) 282-0477 Located at ► PO BOX 4084 SANTA MONICA CA ZIP+4 ► 904114084			
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here and enter the amount of tax-exempt interest received or accrued during the year	15		
16 At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country ►	16	Yes	No

Part VII-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
1a 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 instructions)? Organizations relying on a current notice regarding disaster assistance check here. ► <input type="checkbox"/>	1b		
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 2015?	1c		No
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 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015? <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 instructions). 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____	2b		
3a 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 2015 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? (<i>Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015</i>).	3b		
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
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 2015?	4b		No

Part VII-B 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 4945(d)(4)(A)? (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)? Yes No
 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? Yes No
 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? Yes No
 If "Yes" to 6b, file Form 8870

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

Part VIII 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	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
MICHAEL EINZIGER PO BOX 4084 SANTA MONICA, CA 904114084	CHIEF EXECUTIVE OFFICER 0 00	0	0	0
BRANDON BOYD PO BOX 4084 SANTA MONICA, CA 904114084	SECRETARY 0 00	0	0	0
JOSE PASTILLAS PO BOX 4084 SANTA MONICA, CA 904114084	CHIEF FINANCIAL OFFICER 0 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	Title, and average hours per week (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred compensation (d)	Expense account, (e) other allowances
NONE				

Total number of other employees paid over \$50,000. 0

Part VIII 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. **0**

Part IX-A 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	
2	
3	
4	

Part IX-B 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	
2	
All other program-related investments. See instructions	
3	

Total. Add lines 1 through 3 **0**

Part X Minimum Investment Return

(All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities.	1a	0
b	Average of monthly cash balances.	1b	42,143
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	42,143
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	42,143
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	632
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	41,511
6	Minimum investment return. Enter 5% of line 5.	6	2,076

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.)

1	Minimum investment return from Part X, line 6.	1	2,076
2a	Tax on investment income for 2015 from Part VI, line 5.	2a	
b	Income tax for 2015 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	0
3	Distributable amount before adjustments Subtract line 2c from line 1.	3	2,076
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	2,076
6	Deduction from distributable amount (see instructions).	6	0
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1.	7	2,076

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.	1a	50,521
b	Program-related investments—total from Part IX-B.	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	50,521
5	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).	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	50,521

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

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7				2,076
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only.			0	
b Total for prior years 20___, 20___, 20___		0		
3 Excess distributions carryover, if any, to 2015				
a From 2010.				132,402
b From 2011.				7,460
c From 2012.				139,772
d From 2013.				84,671
e From 2014.				
f Total of lines 3a through e.	364,305			
4 Qualifying distributions for 2015 from Part XII, line 4 ▶ \$ <u>50,521</u>				
a Applied to 2014, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2015 distributable amount.				2,076
e Remaining amount distributed out of corpus	48,445			
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a))	0			0
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	412,750			
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.		0		
d Subtract line 6c from line 6b Taxable amount—see instructions.		0		
e Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount—see instructions.			0	
f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015.				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).	0			
8 Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions).	132,402			
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a.	280,348			
10 Analysis of line 9				
a Excess from 2011.				7,460
b Excess from 2012.				139,772
c Excess from 2013.				84,671
d Excess from 2014.				
e Excess from 2015.				48,445

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2015, enter the date of the ruling. . . . ▶

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

2a 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) 2015	(b) 2014	(c) 2013	(d) 2012	
b 85% of line 2a				
c Qualifying distributions from Part XII, line 4 for each year listed				
d Amounts included in line 2c not used directly for active conduct of exempt activities				
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c				
3 Complete 3a, b, or c for the alternative test relied upon				
a "Assets" alternative test—enter				
(1) Value of all assets				
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)				
b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.				
c "Support" alternative test—enter				
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)				
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).				
(3) Largest amount of support from an exempt organization				
(4) Gross investment income				

Part XV 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))

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

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 or email address of the person to whom applications should be addressed

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

c Any submission deadlines

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

Part XV Supplementary Information(continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<p>a <i>Paid during the year</i> See Additional Data Table</p>				
<p>Total</p>			▶ 3a	50,521
<p>b <i>Approved for future payment</i></p>				
<p>Total</p>			▶ 3b	0

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a <i>Paid during the year</i>				
SAVE THE WAVES COALITION PO BOX 183 3500 HIGHWAY ONE DAVENPORT,CA 95017		NC	TO PROTECT AND PRESERVE THE COSTAL ENVIRONMENT, WITH AN EMPHASIS ON THE SURF ZONE, AND EDUCATING THE PUBLIC ABOUT ITS VALUE	35
LIFE ROLLS ON FOUNDATION 2901 WASHINGTON BLVD MARINA DEL REY,CA 90292		NC	THE ASSIST AND INSPIRE YOUNGE PEOPLE AFFECTED BY SPINAL CORD INJURY AND USE ACTION SPORTS AS A PLATEFORM TO DEMONSTRATE INFINITE POSSIBILITIES DESPITE PARALYSIS	40
ZENO MOUNTAIN FARM 950 ZENO RD LINCOLN,VT 05443		NC	TO PROVIDE AN ATHLETIC, ARTISTIC AND CULTURAL RETREAT FOR PERSONS WITH DISABILITIES	58
ARTISTS FOR PEACE AND JUSTICE 87 WALKER ST 6B NEWYORK,NY 10013		NC	TO SUPPORT COMMUNITIES AN HAITI THROUGH PROGRAMS IN EDUCATION, HEALTHCARE AND DIGNITY	168
HEAL THE BAY 1444 9TH STREET SANTA MONICA,CA 90401		NC	TO MAKE SOUTHERN CALIFORNIA COASTAL WATERS AND WATERSHEDS SAFE, HEALTHY AND CLEAN	234
MUSIC FOR RELIEF CO GSO BUSINESS MANAGEMENT 15260 VENTURA BLVD SUITE 2100 SHERMAN OAKS,CA 91403		NC	TO SUPPORT DIASTER RELIEF AND REDUCE GLOBAL WARMING	66
INTERNATIONAL DOCUMENTARY ASSOCIATION 3470 WILSHIRE BLVD SUITE 980 LOS ANGELES,CA 90010		NC	TO SUPPORT DOCUMENTARY FILMMAKING WORLDWIDE	20,000
MR HOLLAND'S OPUS FOUNDATION INC 4370 TUJUNGA AVENUE SUITE 330 STUDIO CITY,CA 91604		NC	TO KEEP MUSIC ALIVE IN SCHOOLS	264
KISS THE GROUND 628 FLOWER AVE VENICE,CA 90291		NC	TO INSPIRE AND ADVOCATE FOR THE RESTORATION OF SOIL WORLDWIDE	26,215
WAVES FOR WATER INC 527 SAN VICENTE BLVD 210 SANTA MONICA,CA 90402		NC	TO GET CLEAN WATER TO EVERY SINGLE PERSON WHO NEEDS IT WAVES FOR WATER HAS INITIATED THE CLEAN WATERS COURIERS PROGRAM TO BRING CLEAN WTAER TO CATASTROPHIC STRICKEN REGIONS AROUND THE WORLD	243
OCEAN CONSERVANCY 1300 19TH STREET NW 8TH FLR WASHINGTON,DC 20036		NC	TO EDUCATE AND EMPOWER PEOPLE TO TAKE ACTION ON BEHALF OF THE OCEAN THROUGH ENGAGING, BRINGING SCIENCE, POLITICAL ACTION AND COMMUNICATIONS TOGETHER TO CONDITION THE SOCIAL CLIMATE FOR CHANGE AND PROTECT THE OCEAN FOR FUTURE GENERATIONS	231
MUSICIANS ON CALL 39 WEST 32ND STREET SUITE 1103 NEWYORK,NY 10001		NC	TO BRING LIVE AND RECORDED MUSIC TO THE BEDSIDES OF PATIENTS IN THE HEALTHCARE FACILITIES	178
ST JUDE CHILDREN'S RESEARCH HOSPITAL 262 DANNY THOMAS PLACE MEMPHIS,TN 38105		NC	TO FIND CURES AND MEANS OF PREVENTION FOR CHILDHOOD CATASTROPHIC DISEASES THROUGH RESEARCH AND TREATMENT NO CHILD IS DENIED TREATMENT BASED ON RACE, RELIGIOIN OR A FAMILY'S ABILITY TO PAY	442
TJ MARTELL FOUNDATION 15053 VENTURA BLVD SUITE 206 SHERMAN OAKS,CA 91403		NC	TO FUND INNOVATIVE MEDICAL RESEARCH FOCUSED ON FINDING CURES FOR LEUKEMIA, CANCER AND AIDS THE FOUNDATION SUPPORTS EARLY-STAGE RESERACH PROJECTS AIMED AT DEVELOPING MORE EFFECTIVE CLINICAL TREATMENTS FOR PATIENTS WHICH OTHERWISE MIGHT NOT BE FUNDED	115
ROCKY MOUNTAIN INSTITUTE 1820 FOLSOM STREET BOULDER,CO 80302		NC	TO DRIVE THE EFFICIENT AND RESTORATIVE USES OF RESOURCES RMI'S VISION IS A WORLD OF THRIVING, VERDANT, AND SECURE, FOR ALL, FOREVER	173
Total ▶ 3a				50,521

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a <i>Paid during the year</i>				
JP HAITIAN RELIEF ORGANIZATION 6464 SUNSET BLVD SUITE 1140 LOS ANGELES, CA 90028		NC	TO SAVE LIVES AND BRING SUSTAINABLE PROGRAMS TO THE HAITIAN PEOPLE QUICKLY AND EFFECTIVELY	70
MUSICARES FOUNDATION 3030 OLYMPIC BLVD SANTA MONICA, CA 90404		NC	TO PROVIDE A SAFETY NET OF CRITICAL ASSISTANCE FOR MUSIC PEOPLE IN TIMES OF NEED	121
OXFAM AMERICA 226 CAUSEWAY STREET 5TH FLOOR BOSTON, MA 02114		NC	WORKING TO RIGHT THE WRONGS OF POVERTY, HUNGER, AND INJUSTICE THEY SAVE LIVES, DEVELOP LONG-TERM SOLUTIONS TO POVERTY, AND CAMPAIGN FOR SOCIAL CHANGE	39
ROCK THE EARTH 1536 WYNKOOP STREET SUITE B200 DENVER, CO 80202		NC	TO PROTECT AND DEFEND NATURAL RESOURCES THROUGH PARTNERSHIPS WITH THE MUSIC INDUSTRY ROCK THE EARTH IS AN ADVOCATE FOR INDIVIDUALS AND COMMUNITIES WHOSE ENVIRONMENT OR NATURAL SURROUNDINGS HAVE BEEN ADVERSELY AFFECTED BY OTHERS	146
SURFRIDER FOUNDATION 942 CALLE NEGOCIO SUITE 350 SAN CLEMENTE, CA 92673		NC	TO PROTECT AND THE ENJOYMENT OF OUR WORLD'S OCEANS, WAVES AND BEACHES THROUGH A POWERFUL ACTIVIST NETWORK	158
OCEANA INC 1350 CONNECTICUT AVE NW 5TH FLR WASHINGTON, DC 20036		NC	TO PROTECT THE WORLD'S OCEANS AND TO MAKE OUR OCEANS AS RICH, HEALTHY AND ABUNDANT AS THEY ONCE WERE	152
WAR CHILD USA TIMES SQUARE PO BOX 668 NEW YORK, NY 10108		NC	TO WORK WITH CHILDREN ALL OVER THE WORLD TO REDUCE THE EFFECTS OF POVERTY, PROVIDE AN EDUCATION AND TO DEFEND AND PROMOTE CHILD RIGHTS WAR CHILD WORKS TO HELP CHILDREN WHOSE LIVES HAVE BEEN TORN APART BY CONFLICT, AND PROVIDE THEM WITH THE MEANS TO BUILD A BRIGHTER FUTURE	107
ISLAND ACTS CO ALICE MARSHALL PUBLIC RELATIONS 126 FIFTH AVENUE SUITE 801 NEW YORK, NY 10011		NC	TO RELIEVE THE POOR AND UNDERPRIVILEGED, PRIMARILY THROUGH THE ADVANCEMENT OF EDUCATION, HEALTHCARE AND COMMUNITY DEVELOPMENT PROJECTS IN JAMAICA	52
UNITED NATIONS FOUNDATION 1750 PENNSYLVANIA AVE NW 300 WASHINGTON, DC 20006		NC	TO MOBILIZE THE ENERGY AND EXPERTISE OF BUSINESS AND NON-GOVERNMENTAL ORGANIZATIONS TO HELP THE UN TACKLE ISSUES INCLUDING CLIMATE CHANGE, GLOBAL HEALTH, PEACE AND SECURITY, WOMEN'S EMPOWERMENT, POVERTY ERADICATION, ENERGY ACCESS, AND U S - UN RELATIONS	69
AMNESTY INTERNATIONAL USA HEADQUARTERS 5 PENN PLAZA 16TH FLOOR NEW YORK, NY 10001		NC	TO WORK TO A WORLD WHERE EVERY PERSON - REGARDLESS OF RACE, RELIGION, ETHNICITY, SEXUAL ORIENTATION OR GENDER IDENTITY - ENJOYS ALL OF THE HUMAN RIGHTS ENSHRINED IN THE UNIVERSAL DECLARATION OF HUMAN RIGHTS (UDHR) AND OTHER INTERNATIONALLY RECOGNIZED HUMAN RIGHTS STANDARDS	1,145
Total ▶ 3a				50,521

TY 2015 Other Assets Schedule**Name:** MAKEYOURSELF FOUNDATION

C/O PROVIDENT FM

EIN: 47-0921336

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
DUE FROM AFFILIATES		1,298	1,298

TY 2015 Other Decreases Schedule**Name:** MAKEYOURSELF FOUNDATION

C/O PROVIDENT FM

EIN: 47-0921336

Description	Amount
NONDEDUCTIBLE PORTION OF CONTRIBUTIONS	306

TY 2015 Other Expenses Schedule

Name: MAKEYOURSELF FOUNDATION

C/O PROVIDENT FM

EIN: 47-0921336

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INSURANCE	3,238	0	0	0
OFFICE	3,362	0	0	0
DUES	227	0	0	0
PROMOTION	22,681	0	0	0
CO-SHARED EMPLOYEE SALARIES	55,638	0	0	0
CO-SHARED PAYROLL TAXES	5,839	0	0	0
CO-SHARED PAYROLL EXPENSES	855	0	0	0
TRAVEL	8,635	0	0	0
MERCHANDISE EXPENSE	6,364	0	0	0
CONTESTANT EXPENSES	1,966	0	0	0
PROFESSIONAL FEES	3,753	0	0	0
SHIPPING	3,380	0	0	0
TELEPHONE	109	0	0	0

TY 2015 Other Income Schedule**Name:** MAKEYOURSELF FOUNDATION

C/O PROVIDENT FM

EIN: 47-0921336

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
GROSS INCOME FROM SPECIAL FUNDRAISING EVENTS	190,083		190,083

TY 2015 Other Professional Fees Schedule**Name:** MAKEYOURSELF FOUNDATION

C/O PROVIDENT FM

EIN: 47-0921336

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
SERVICE FEES	2,018	0	0	0

TY 2015 Taxes Schedule**Name:** MAKEYOURSELF FOUNDATION

C/O PROVIDENT FM

EIN: 47-0921336

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
STATE TAXES	10	0	0	0

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

OMB No 1545-0047

2015

Attach to Form 990, 990-EZ, or 990-PF Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990

Name of the organization MAKEYOURSELF FOUNDATION C/O PROVIDENT FM

Employer identification number 47-0921336

Organization type (check one)

Filers of:

Section:

- Form 990 or 990-EZ [] 501(c)() (enter number) organization [] 4947(a)(1) nonexempt charitable trust not treated as a private foundation [] 527 political organization Form 990-PF [x] 501(c)(3) exempt private foundation [] 4947(a)(1) nonexempt charitable trust treated as a private foundation [] 501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions

General Rule

- [] For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor Complete Parts I and II See instructions for determining a contributor's total contributions

Special Rules

- [] For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II [] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III [] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc , purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc , purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc , contributions totaling \$5,000 or more during the year \$ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization
 MAKEYOURSELF FOUNDATION
 C/O PROVIDENT FM

Employer identification number
 47-0921336

Part I Contributors (see instructions) Use duplicate copies of Part I if additional space is needed			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	THE URGENCY NETWORK 9469 JEFFERSON BLVD SUITE 100 CULVER CITY, CA 90232	\$ 75	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

Name of organization MAKEYOURSELF FOUNDATION C/O PROVIDENT FM	Employer identification number 47-0921336
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Part II **Noncash Property**
 (see instructions) Use duplicate copies of Part II if additional space is needed

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____

Name of organization MAKEYOURSELF FOUNDATION C/O PROVIDENT FM	Employer identification number 47-0921336
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$ _____

Use duplicate copies of Part III if additional space is needed

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-	_____ _____ _____	_____ _____ _____	_____ _____ _____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4 _____ _____ --	Relationship of transferor to transferee _____ _____ _____	
-	_____ _____ _____	_____ _____ _____	_____ _____ _____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4 _____ _____ --	Relationship of transferor to transferee _____ _____ _____	
-	_____ _____ _____	_____ _____ _____	_____ _____ _____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4 _____ _____ --	Relationship of transferor to transferee _____ _____ _____	
-	_____ _____ _____	_____ _____ _____	_____ _____ _____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4 _____ _____ --	Relationship of transferor to transferee _____ _____ _____	