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## DLN: 93491163004267

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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public. ► Information about Form 990-PF and its instructions is at <u>www.irs.gov/form990pf</u>.

For	caler	ndar year 2015, or tax year beginning 12-0	1-2015	, an	d ending 1	1-30-2016	
	e of foun				A Employer ıd	entification numbe	er
MC	ONE EIC	HLER FUND INC			20-4006310		
	ber and s REMSEN	street (or P O $$ box number if mail is not delivered to street address) $$ AVE	Room/suite		<b>B</b> Telephone nur	nber (see instruction	s)
City	or town	state or province, country, and ZIP or foreign postal code			C If exemption	application is pendin	a check here
	SEY, NY					- FF.100 0011 10 F0.10111	, and an increase in the control of
<b>G</b> C l	neck all	that apply Initial return Initial return of a f	ormer public charity	,	<b>D 1.</b> Foreign or	ganizations, check h	ere <b>•</b>
		Final return A mended return					Г
		Address change Name change		!		rganizations meeting k here and attach co	
<b>H</b> Ch	eck typ	be of organization $\sqrt{S}$ Section 501(c)(3) exempt privat	e foundation			ındatıon status was t n 507(b)(1)(A), ched	
•			ole private foundation				- 1
of۱		om Part II, col (c), Other (specify)	✓ Cash   Accru be on cash basis )	ıaı		ation is in a 60-mont n 507(b)(1)(B), chec	
Da	rt I	Analysis of Revenue and Expenses		<del></del> -			Disbursements
		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	Revenue and expenses per (a) books	(b)	et investment income	Adjusted net (c) Income	for charitable purposes (d) (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach					
		schedule)	253,779				
	2	Check ► ☐ If the foundation is <b>not</b> required to attach					
		Sch B					
	3	Interest on savings and temporary cash investments  Dividends and interest from securities					
	5a	Gross rents					
	ь	Net rental income or (loss)					
KIE	6a	Net gain or (loss) from sale of assets not on line 10					
Reversie	b	Gross sales price for all assets on line 6a					
~	7	Capital gain net income (from Part IV, line 2)					
	8	Net short-term capital gain					
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	b c	Less Cost of goods sold  Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)					
	12	Total.Add lines 1 through 11	253,779		0		
	13	Compensation of officers, directors, trustees, etc	233,773				
	14	Other employee salaries and wages					
Ş	15	Pension plans, employee benefits					
nse	16a	Legal fees (attach schedule)					
Expenses	b	Accounting fees (attach schedule)	1,500				
	с	Other professional fees (attach schedule)					
Administrative	17	Interest					
stra	18	Taxes (attach schedule) (see instructions)					
Ē	19	Depreciation (attach schedule) and depletion					
\dr.	20	Occupancy					
<del>յ</del> թւ	21	Travel, conferences, and meetings					
and	22	Printing and publications					
Operating	23	Other expenses (attach schedule)					
erat	24	Total operating and administrative expenses.	1 500		0		0
ă	25	Add lines 13 through 23	1,500 243,628		0		243,628
	25 26		243,020				273,020
		<b>Total expenses and disbursements.</b> Add lines 24 and 25	245,128		0		243,628
	27	Subtract line 26 from line 12	0.651				
	a	Excess of revenue over expenses and disbursements  Net investment income (if negative, enter -0-)	8,651		0		
	b c	Adjusted net income (if negative, enter -0-)			0		
	. ~		ı J	i			i

Pa	rt 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	<u> </u>
			(a) Book Value	(b) Book Val	ue 8,992	(c) Fair Market Value
	1	Cash—non-interest-bearing	341		0,992	
	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 ▶				
ţs	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges				
Ă	10a	Investments—U S and state government obligations (attach schedule)			$ \bot $	
	b	Investments—corporate stock (attach schedule)				
	С	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)				
	16	<b>Total assets</b> (to be completed by all filers—see the				_
		Instructions Also, see page 1, item I)	341		8,992	0
	17	Accounts payable and accrued expenses				
s	18	Grants payable				
ıtıe	19	Deferred revenue				
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons				
Ë	21	Mortgages and other notes payable (attach schedule)				
	22	Other liabilities (describe)			0	
	23	Total liabilities(add lines 17 through 22)				
S		Foundations that follow SFAS 117, check here ► and complete lines 24 through 26 and lines 30 and 31.				
nce	24					
ala	24	Temporarily restricted				
Fund Balance	25 26	Permanently restricted				
Ĕ	20	Foundations that do not follow SFAS 117, check here				
		and complete lines 27 through 31.				
s or	27	Capital stock, trust principal, or current funds				
set	28	Paid-in or capital surplus, or land, bldg, and equipment fund				
Assets	29	Retained earnings, accumulated income, endowment, or other funds	341		8,992	
Net	30	Total net assets or fund balances(see instructions)	341		8,992	
Z	31	Total liabilities and net assets/fund balances(see instructions)	341		8,992	
Pa	rt 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 ad	ree	$\Box$	
-					.	341
2		Enter amount from Part I, line 27a			_	8,651
3		Other increases not included in line 2 (itemize)		3	_	<u> </u>
4		Add lines 1, 2, and 3		4	.	8,992
5		Decreases not included in line 2 (itemize) ▶		_ 5		
6		Total net assets or fund balances at end of year (line 4 minus line 5)—F	Part II, column (b), lir	ne 30 . <b>6</b>		8,992

		the kınd(s) of property sold (e g , ehouse, or common stock, 200 sh	•	How acquire P—Purchase (b) D—Donation	Date	acquired , day, yr )	Date sold (d) (mo , day, yr )
1a							
b							
С							
d							
e							
	) Gross sales price	Depreciation allow (f) (or allowable)		st or other basis s expense of sale	1 (		or (loss) (f) minus (g)
a		(**************************************	(3)		<u> </u>	-7 (-7	(-,
b							
С							
d							
	mploto only for accets	showing gain in column (h) and owi	nod by the foundati	on on 12/21/60	+		(1-)
	· · · · · · · · · · · · · · · · · · ·	Adjusted basis		xcess of col (i)			(h) gain minus t less than -0-) <b>oi</b>
(i)	FM V as of 12/31/69	(j) as of 12/31/69		ver col (j), if any	(1)	. ,,	from col (h))
a							
b							
С							
d							
e							
3	If gain, also enter in in Part I, line 8	al gain or (loss) as defined in sect Part I, line 8, column (c) (see inst 	ructions) If (loss),	enter - 0 - • • •	}   3		
f sectio Was the	onal use by domestic j in 4940(d)(2) applies, foundation liable for th	e section 4942 tax on the distribu	section 4940(a) ta utable amount of ar	ex on net investmen	t income )		┌ Yes ┌ No
		ot qualify under section 4940(e) I unt in each column for each year,	'	<u> </u>	tries		
Base	(a) period years Calendar ir tax year beginning in)	(b) Adjusted qualifying distributions		(c) haritable-use assets		(d) Distribution (b) divided	
	2014						
	2013						
	2012						
	2011						
	2010						
2	·	n (d)		<b> </b>	2		
3	the number of years	ratio for the 5-year base period—c the foundation has been in existen	ce if less than 5 ye	ears , , ,	3		
4		f noncharitable-use assets for 201	•	- L	4		
5		23		- F	5		
6		stment income (1% of Part I, line	•	- L	6		
7				, , , , , , , , , , , , , , , , , , ,	7		
8		ibutions from Part XII, line 4		L	8		
	If line 8 is equal to o the Part VI instruction	r greater than line 7, check the box ons	x in Part VI, line 11	b, and complete tha	t part using	ja1% tax	rate See

-01	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 49	,40(e),	or 4946—see pag	e 18 of the inst	ructio	ins)	
1a		· [	)				
	and enter "N/A" on line 1  Date of ruling or determination letter		Į				
	(attach copy of letter if necessary-see instructions)		ſ				
b	Domestic foundations that meet the section 4940(e) requirements in Part V ,	check	J	1			0
	here ▶ ☐ and enter 1% of Part I, line 27b · · · · · · · · · · · · · · · · · · ·		′				
С	All other domestic foundations enter 2% of line 27b Exempt foreign organiza Part I, line 12, col (b)	tions e	enter 4% of				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foun enter -0-)	dation	s only Others	2			
3	Add lines 1 and 2			3			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable four enter -0-)	ndation	s only Others	4			
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, en	nter -0		5			
6	Credits/Payments						
а	2015 estimated tax payments and 2014 overpayment credited to 2015	6a		<u> </u>			
b	Exempt foreign organizations—tax withheld at source	6b		_			
c	Tax paid with application for extension of time to file (Form 8868)	<b>6</b> c		<u> </u>			
d	Backup withholding erroneously withheld	6d		] [			
7	Total credits and payments Add lines 6a through 6d			7			
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here	2220 i	s attached	8			
9	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> .			9			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount	t overp	oaid 🕨	10			
11	Enter the amount of line 10 to be Credited to 2015 estimated tax		Ref unded <b>P</b>	11			
Par	t VII-A Statements Regarding Activities						
1a	During the tax year, did the foundation attempt to influence any national, state	, or loc	al legislation or c	ıd		Yes	No
	it participate or intervene in any political campaign?				1a		No
b	Did it spend more than \$100 during the year (either directly or indirectly) for p	olitica	l purposes (see I	nstructions			
	for definition)?				1b		No
	If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities	and co	pies of any materi	als			
	published or distributed by the foundation in connection with the activities				_		
с	,				<b>1</b> c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) impos						
	(1) On the foundation > \$ (2) On foundation managers						
е	Enter the reimbursement (if any) paid by the foundation during the year for poli	ticale	xpenditure tax im	posea			
_	on foundation managers  \$		IDC2		_		N-
2	Has the foundation engaged in any activities that have not previously been rep	ortea i	to the IRS?		2		No
2	If "Yes," attach a detailed description of the activities		rning instrument	articles			
3	Has the foundation made any changes, not previously reported to the IRS, in it of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a confo</i>	_			3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more di				4a		No
b	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?	_	ne year		4b		No
5	Was there a liquidation, termination, dissolution, or substantial contraction dur		· · · · ·		5		No
,	If "Yes," attach the statement required by General Instruction T	ing the	e year				140
6	Are the requirements of section 508(e) (relating to sections 4941 through 494	45) ca	ticfied either				
Ŭ	<ul> <li>By language in the governing instrument, or</li> </ul>	73 <i>)</i> 3 u	district citater			\ '	
	By state legislation that effectively amends the governing instrument so that	at no m	nandatory directio	ns			
	that conflict with the state law remain in the governing instrument?				6	ĺ	No
7	Did the foundation have at least \$5,000 in assets at any time during the year?			. col (c).			
	and Part XV		·		7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (s	see ins	tructions)				
	▶NY		·				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 99	0-PF t	to the Attorney				
	General (or designate) of each state as required by General Instruction G? If $^{\prime\prime}$	'No," at	tach explanation .		8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the $\mathbf{n}$	neanın	g of section 4942	(j)(3)			
	or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see	ee inst	ructions for Part	XIV)?			
	If "Yes," complete Part XIV				9		No
10	Did any persons become substantial contributors during the tax year? If "Yes,"	" attach	a schedule listing	their names	10		No

Par	t 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?	13	Yes	
	Website address ► <u>N/A</u>			
14	The books are in care of ►MOSHE EICHLER Telephone no ►(845)	426-	1777	
	Located at ▶34 REMSEN AVE MONSEY NY ZIP+4 ▶10952			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here		▶ □	-
	and enter the amount of tax-exempt interest received or accrued during the year	•	,	
16			Yes	l No
10	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?	16	165	No No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial	10		140
	Accounts (FBAR) If "Yes", enter the name of the foreign country			
Par	t 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?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		i i	
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes V No		i i	
	Tes IV No.		! ! 	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?  Yes No  (5) Transfer any income or assets to a disqualified person (or make any of either available	] 	 	
	frontly broads arranged for discount for discount for discount and			
	for the benefit or use of a disqualified person)	) 	 	
	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 ) Yes Vo			
ь	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> 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)?	1b		No
	Organizations relying on a current notice regarding disaster assistance check here			
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?	<b>1</b> c		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))			
а	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? Yes ▼ No	 	 	
	If "Yes," list the years > 20, 20, 20, 20			
Ь	Are there any years listed in 2a for which the foundation is <b>not</b> 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 <b>all</b> years listed, answer "No" and attach statement—see instructions )	2b		No
с	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here			
	<b>▶</b> 20, 20, 20			
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
	any time during the year?			
b	If "Yes," did it have excess business holdings in 2015 as a result of <b>(1)</b> any purchase by the foundation			
	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved			
	by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3)			
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine			
	if the foundation had excess business holdings in 2015 )	3b		No
<b>4</b> a	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

Pal	Ti VIII: Statements Reg	ardi	ng Activities for	Wh	ich Form 4720	мау	y Be Required <i>(Con</i>	tinue	ed)	
5a	During the year did the foundation	on pa	or incurany amount	t to						
	(1) Carry on propaganda, or oth	erwise	e attempt to influence	e leg	ıslatıon (section 494	45 (e	e)) <sup>?</sup>	✓ No		
	(2) Influence the outcome of an	y spe	cıfıc publıc election (	see	section 4955), or to	car	ry			
	on, directly or indirectly, any	vote	r registration drive?.				Yes	✓ No		
	(3) Provide a grant to an individ	ual fo	r travel, study, or oth	ersi	ımılar purposes?		☐ Yes [	✓ No		
	(4) Provide a grant to an organiz	zation	other than a charita	ble, e	etc , organization de:	scrit	ped			
	ın section 4945(d)(4)(A)? (	see in	structions)				Tyes [	√ No		
	(5) Provide for any purpose other								ĺ	ĺ
	educational purposes, or for	the p	revention of cruelty t	o ch	ıldren or anımals?.		· · ·	√ No		
b	If any answer is "Yes" to 5a(1)-	·(5), d	did <b>any</b> of the transact	tions	fail to qualify under	the	exceptions described in			
	Regulations section 53 4945 or	ına	current notice regard	ıng d	lisaster assistance (	(see	instructions)?		5b	No
	Organizations relying on a curre	nt no	tice regarding disast	eras	sistance check here	e				
										1 1
С	If the answer is "Yes" to question		• • •							
	tax because it maintained exper					•	· · · · · TYes	✓ No		
	If "Yes," attach the statement req		· -							
<b>6</b> a	Did the foundation, during the ye		•	-	• • • •			_		
	a personal benefit contract?						, ,	•	i	 
b	Did the foundation, during the ye	ear, pa	ay premiums, directly	or I	ndırectly, on a perso	nal	benefit contract?	•	6b	No
<b>-</b> -	If "Yes" to 6b, file Form 8870							_		
	, , , ,							•	i	     <sub> </sub>
b	If yes, did the foundation receiv		<u>'</u>						7b	No
Pai	and Contractors	at Oi	nicers, Directors	, 11	ustees, rounua	uo	n Managers, Highly	Pai	u Emp	noyees,
1	List all officers, directors, truste	es, fo	undation managers a	nd t	heir compensation (	see i	nstructions).			
			Title, and average	(c)	Compensation( <b>If</b>		(d)			
	(a) Name and address	/,,	hours per week		not paid, enter	e	Contributions to mployee benefit plans	(e)		se account, allowances
		(6)	devoted to position		-0-)	and	d deferred compensation			
	HE EICHLER	⊢ P re 2 0	sıdent o		0					
	REMSEN AVE NSEY,NY 10952		0							
	Y EICHLER	Tre	asurer		0					
34 R	EMSEN AVE	70 O								
	NSEY,NY 10952	$\perp$								
	M EICHLER	Sec 0 0	retary		0					
	REMSEN AVE NSEY,NY 10952	100	O							
	Compensation of five highest-pa	id em	ployees (other than t	hose	e included on line 1—	-see	instructions). If none, e	nter "	NONE.	7
	(a)		Title, and avera	age			Contributions to			
Nar	me and address of each employee	paid	hours per wee	èk	(c) Compensatio	n	employee benefit plans and deferred	(e)		se account, allowances
	more than \$50,000		(b) devoted to posi	tion			(d) compensation	( )		
NON	IE									
			_							
			4							
			-							
Tota	I number of other employees paid	over	\$50,000				<u> ▶</u>			

Tive ingliese paid independent contractors for professional services (se	ee instructions). If none, enter "NOI	NE".
(a) Name and address of each person paid more than \$50,000	<b>(b)</b> ⊤ype of service	(c) Compensation
ONE		
al number of others receiving over \$50,000 for professional services.		<u> </u>
art IX-A Summary of Direct Charitable Activities		
the foundation's four largest direct chantable activities during the tax year. Include releva		er of Expenses
anizations and other beneficiaries served, conferences convened, research papers produce	ed, etc	Lxpelises
1		
2		
34		
art IX-B Summary of Program-Related Investments (se	e instructions)	
Summary of Flogram-Related investments (36	e instructions)	
Describe the two largest program-related investments made by the foundation during the	tax year on lines 1 and 2	A mount
Describe the two largest program-related investments made by the foundation during the	tax year on lines 1 and 2	A mount
	tax year on lines 1 and 2	A mount
	tax year on lines 1 and 2	A mount
	tax year on lines 1 and 2	A mount
	tax year on lines 1 and 2	A mount
	tax year on lines 1 and 2	A mount
2	tax year on lines 1 and 2	A mount
Describe the two largest program-related investments made by the foundation during the  2  All other program-related investments. See instructions.	tax year on lines 1 and 2	A mount

## Form 990-PF (2015) Part X Minimum Investment Return

|--|

	(All domestic foundations must complete this part. Foreign foundations,see instruction	s.)	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc ,		
	purposes		
а	A verage monthly fair market value of securities	1a	0
b	A verage of monthly cash balances	1b	10,201
c	Fair market value of all other assets (see instructions)	1c	0
d	<b>Total</b> (add lines 1a, b, and c)	1d	10,201
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	10,201
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	ınstructions)	4	153
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	10,048
6	Minimum investment return.Enter 5% of line 5	6	502
Pai	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and cer check here ► □ and do not complete this part.)	rtaın f	oreign organizations
1	Minimum investment return from Part X, line 6	1	502
<b>2</b> a	Tax on investment income for 2015 from Part VI, line 5		
b	Income tax for 2015 (This does not include the tax from Part VI ) 2b		
С	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	502
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	502
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amountas adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	502
ar	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	243,628
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc ,		
	purposes	2	
3	A mounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	<b>Qualifying distributions.</b> Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	243,628
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	ıncome Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	243,628
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth the section 4940(e) reduction of tax in those years	er the	foundation qualifies for

	m 990-PF (2015)	Transaction (see transaction)	(atropa)			Page <b>9</b>
P	art XIII Undistributed	Income (see instru		(a)		1 7 1
			<b>(a)</b> Corpus	(b) Years prior to 2014	<b>(c)</b> 2014	(d) 2015
1	Distributable amount for 2015	from Part XI June 7	Сограз	rears prior to 2011	2011	502
	Undistributed income, if any, as	·				
a						
b		, 20 <u> </u>				
	Excess distributions carryover					
	From 2010	101,980				
b	From 2011	122,840				
c	From 2012	121,779				
d	From 2013	194,207				
е	From 2014	216,084				
f	<b>Total</b> of lines 3a through e		756,890			
	Qualifying distributions for 201					
	XII, line 4 <b>&gt;</b> \$	243,628				
а	Applied to 2014, but not more					
b	Applied to undistributed incom-	e of prior years				
	(Election required—see instruc					
C	Treated as distributions out of		0			
	required—see instructions)	_				500
	Applied to 2015 distributable a	F	242.426			502
	Remaining amount distributed	· · -	243,126			
5	Excess distributions carryover	· · · ·				
	(If an amount appears in column same amount must be show	' ''				
6	Enter the net total of each col	umn as				
	indicated below:					
а	Corpus Add lines 3f, 4c, and 4	e Subtract line 5	1,000,016			
b	Prior years' undistributed incom					
	line 4b from line 2b	_				
С	Enter the amount of prior years income for which a notice of del					
	been issued, or on which the se					
	tax has been previously assess	` '				
d	Subtract line 6c from line 6b T	axable amount				
	—see instructions					
е	Undistributed income for 2014					
	4a from line 2a Taxable amour					
f	Undistributed income for 2016	<u> </u>				
•	lines 4d and 5 from line 1 This	1				
	be distributed in 2015					0
7	Amounts treated as distribution	ns out of				
	corpus to satisfy requirements					
	section 170(b)(1)(F) or 4942(c					
٥	be required - see instructions) Excess distributions carryover	_				
o	applied on line 5 or line 7 (see		101,980			
9	Excess distributions carryover	· –				
-	Subtract lines 7 and 8 from line	<b>_</b>	898,036			
10	Analysis of line 9					
а	Excess from 2011	122,840				
b	Excess from 2012	121,779				
c	Excess from 2013	194,207				
d	Excess from 2014	216,084				
е	Excess from 2015	243,126				1

	m 990-PF (2015)					Page <b>10</b>
	art XIV Private Operating Foundat				9)	
1a	If the foundation has received a ruling or determ foundation, and the ruling is effective for 2015,					
	Check box to indicate whether the organization	is a private opera	ting foundation de	scribed in section	4942(j)(3) or	4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for each year listed	(a) 2015	<b>(b)</b> 2014	(c) 2013	(d) 2012	(5) 15151
b	35% of line 2a					
С	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					
е	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					
	<ul><li>(1) Value of all assets</li><li>(2) Value of assets qualifying under section 4942(j)(3)(B)(i)</li></ul>					
b	"Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
С	"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					
Pa	rt XV Supplementary Information (			e organizatio	n had \$5,000 o	r more in
1	assets at any time during the Information Regarding Foundation Managers:	year—see ins	tructions.)			
	List any managers of the foundation who have c before the close of any tax year (but only if they					ation
	MOSHE EICHLER					
D	List any managers of the foundation who own 10 ownership of a partnership or other entity) of whether the state of the foundation who own 10 ownership or other entity) of who ownership or other entity) or other entity) of who ownership ownership or other entity) or other entity) or other entity) or other entity) of who ownership ownership or other entity) or other entity of the e		•	, , ,	large portion of th	e
2	Information Regarding Contribution, Grant, Gif					
	Check here $\blacktriangleright \boxed{\checkmark}$ if the foundation only makes of unsolicited requests for funds. If the foundation other conditions, complete items 2a, b, c, and conditions.	makes gifts, gran				
а	The name, address, and telephone number or e	maıl address of th	e person to whom	applications shou	ld be addressed	
b	The form in which applications should be subm	itted and informati	on and materials t	they should includ	e	
c	Any submission deadlines					
d	Any restrictions or limitations on awards, such factors	as by geographic	al areas, charitabl	e fields, kinds of ii	nstitutions, or othe	r

Form 990-PF (2015) Page **11** Part XV Supplementary Information(continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation show any relationship to Purpose of grant or status of A mount contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year See Additional Data Table 243,628 **b** Approved for future payment

	amounts unless otherwise indicated	Unrelated bu	isiness income	Excluded by section	512, 513, or 514	(e) Related or exemp
<b>1</b> Program	n service revenue	(a) Business code	<b>(b)</b> A mount	(c) Exclusion code	(d) A mount	function income (See
a						instructions )
	and contracts from government agencies					
	rship dues and assessments					
	ments					
<b>1</b> Dividen	nds and interest from securities					
	tal income or (loss) from real estate					
	financed property ebt-financed property					
	ntal income or (loss) from personal					
propert	ty					
	nvestment income					
	· (loss) from sales of assets other than ory					
9 Netinc	ome or (loss) from special events					
<b>o</b> Gross p	profit or (loss) from sales of inventory					
L Othern	evenue a					
	al Add columns (b), (d), and (e).					
	dd line 12, columns (b), (d), and (e).			:	.3	
	orksheet in line 13 instructions to verify of <b>Relationship of Activities to</b>		plishment of E	xempt Purpos	es	
	Relationship of Activities to		ported in column (		ontributed importa	intly to
Line No. ▼	Explain below how each activity for whith the accomplishment of the foundation's instructions )			providing funds for	such purposes) (	
	Explain below how each activity for whith the accomplishment of the foundation's			providing funds for	such purposes) (	
	Explain below how each activity for whith the accomplishment of the foundation's			providing funds for	such purposes) (	
	Explain below how each activity for whith the accomplishment of the foundation's			providing funds for	such purposes) (	
	Explain below how each activity for whith the accomplishment of the foundation's			providing funds for	such purposes) (	
	Explain below how each activity for whith the accomplishment of the foundation's			providing funds for	such purposes) (	
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	Explain below how each activity for whith the accomplishment of the foundation's			providing funds for	such purposes) (	
	Explain below how each activity for whith the accomplishment of the foundation's			providing funds for	such purposes) (	
Line No.	Explain below how each activity for whith the accomplishment of the foundation's			providing funds for	such purposes) (	

Part Av.	Noncharitable				actions and i	Relationships	WICH		
	organization directly or i	ndırectly en	igage in any of t	he following wit				Yes	No
organiza	` '			· g	,,				
<b>a</b> Transfe	rs from the reporting foui	ndation to a	noncharitable e	exempt organiza	ition of				
<b>(1)</b> Ca	sh						. 1a(1	)	No
<b>(2)</b> Oth	herassets						1a(2	:)	No
	ransactions								
	les of assets to a noncha						1b(1		No
	rchases of assets from a							-	No
` '	ntal of facilities, equipme	•						_	No No
	ımbursement arrangemer ans or loan guarantees.						1b(4	_	No
• •	ormance of services or m						1b(5	_	No
	of facilities, equipment,	•	_					-	No
_	nswer to any of the above	_							1
	oods, other assets, or se ransaction or sharing arr		, ,	_				ле	
(a) Line No	(b) Amount involved	(c) Name of	f noncharitable exe	mpt organization	(d) Description	of transfers, transacti	ons, and sharing ar	rangeme	nts
describe <b>√</b> No	oundation directly or indiced in section 501(c) of the complete the following	ne Code (otl	her than sectior	•	in section 527?.	·	tion of relationship	Yes	
	(a) Harrie of organization		,,,	, Type or organiza		(e) besemp	den or relationship		
th	nder penalties of perjury, ie best of my knowledge a formation of which prepai	and belief, it	is true, correct				n taxpayer) ıs b	ased or	n all
Here	*****			2017-06-12	*****		May the IRS return with the prej		
	Signature of officer or t	rustee		Date	Tıtle		below (see ınstr )?	√Yes	No
	Print/Type preparer's Aharon Friedman E		Preparer's Signa	ature	Date	Check if self- employed ▶ 🗸	PTIN P0023	6381	
Paid Prepare Use		ounting Inc			I	Firm's EIN ▶	l		
Only	Firm's address ► 5 Remsen Avenue Su	ite 1 Monse	y, NY 10952			Phone no (845	) 425-6809		

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

Recipient If recipient is an individual, Foundation Purpose of grant or Amount

Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
a Paid during the year	or substantial contributor			
CONGREGATION BINAS YISOCHER 1321 43RD ST BROOKLYN,NY 11219	None	Exempt	General Contribution	430
CONGREGATION KHAL YEREIM 21 MONSEY BLVD MONSEY,NY 10952	None	Exempt	General Contribution	7,000
CONGREGATION OHEL SHLOME 1238 41ST STREET BROOKLYN,NY 11218	None	Exempt	General Contribution	24,300
SMACH ZEVILIN OF NY INC 18 STOUNHOUSE RD MONSEY,NY 10952	None	Exempt	General Contribution	180
CONGREGATION VYOEL MOSHE PO BOX 500 MONSEY,NY 10952	None	Exempt	General Contribution	14,160
Total	243,628			

Form 990PF Part XV Line 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	Foundation status of recipient	Purpose of grant or contribution	A mount
Name and address (home or business)	or substantial contributor			
a Paid during the year				
UNITED TALMUDICAL ACADEMY 89 SOUTH MAIN STREET Spring Valley,NY 10977	None	Exempt	General Contribution	26,680
CHEVRA OSAI TZEDUKAH CHESED VCHESED 44 ADAR COURT MONSEY,NY 10952	None	Exempt	General Contribution	4,000
CONGREGATION MOSDOS ZEVHIL 9 ZEISSNER LN SPRING VALLEY,NY 10977	None	Exempt	General Contribution	1,000
DIVREI SHMIEL 2 PHILLIS TERRACE MONSEY,NY 10952	None	Exempt	General Contribution	780
BNEI LEVI FOUNDATION 33 Beth Halevy Street Boisbriand,, QUEBEC J7E 4H4 CA	None	Exempt	General Contribution	1,000
Total			▶ 3a	243,628

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	A mount
a Paid during the year				
CONGREGATION OHR MOSHE 170-16 73RD AVENUE HILLCREST,NY 11365	None	Exempt	General Contribution	250
CONGREGATION AHAVAS CHAVEIRIM 33 ASHEL LANE MONSEY,NY 10952	None	Exempt	General Contribution	36
CONGREGATION AHAVAS YISROEL 147-02 73RD AVENUE FLUSHING,NY 11367	None	Exempt	General Contribution	500
CONGREGATION ZICHRON YAAKOV 1 CHALLENGER COURT MONSEY,NY 10952	None	Exempt	General Contribution	1,199
SHAREI CHESED 92 SADDLE RIVER ROAD MONSEY,NY 10952	None	Exempt	General Contribution	200
Total	▶ 3a	243,628		

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

| Page |

Recipient	If recipient is an individual,	Foundation	Purpose of grant or	A mount
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	
a Paid during the year				
CONGREGATION EZRAS YISROEL 4415 14th Avenue 4-A BROOKLYN,NY 11219	None	Exempt	General Contribution	3,000
KOLLEL ZICHRON MENACHEM 10 MAPLE TERRACE MONSEY,NY 10952	None	Exempt	GENERAL CONTRIBUTION	24,030
KOLLEL AVREICHIM D'SATMER 13 S RIGUAD RD SPRING VALLEY,NY 10977	None	Exempt	GENERAL CONTRIBUTION	1,800
CONGREGATION SHAAR HAMELECH 1435 53RD STREET BROOKLYN,NY 11219	None	Exempt	GENERAL CONTRIBUTION	2,000
YESHIVA TALPIOT PO BOX 240 MONSEY,NY 10952	None	Exempt	GENERAL CONTRIBUTION	1,000
Total	243,628			

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

| Page |

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	
a Paid during the year				
BINYAN TORAH INC 35 DYKSTRAS WAY E MONSEY,NY 10952	None	Exempt	GENERAL CONTRIBUTION	3,500
CONGREGATION HISACHDUS AVREICHIM 45 WITZEL CT MONSEY,NY 10952	None	Exempt	GENERAL CONTRIBUTION	18
MESIVTA TIFERETH ISRAEL OF RIZHIN 1320 45TH STREET BROOKLYN,NY 11219	None	Exempt	GENERAL CONTRIBUTION	38,000
OHOLEY YAKOV 1879 54TH STREET BROOKLYN,NY 11204	None	Exempt	GENERAL CONTRIBUTION	50
VARIOUS VARIOUS MONSEY,NY 10952	None	Exempt	GENERAL CONTRIBUTION	1,180
Total	▶ 3a	243,628		

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

Recipient	If recipient is an individual,	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	recipient	contribution	
<b>a</b> Paid during the year				
MEOR YITZCHAK 18 MEADOWBROOK LANE MONSEY,NY 10952	None	Exempt	GENERAL CONTRIBUTION	33,550
CONG TASHBAR NACHLAS CHAIM PO BOX 657 MONSEY,NY 10952	None	Exempt	GENERAL CONTRIBUTION	3,000
CONGREGATION GMACH YAKOV KOPEL INC PO BOX 433 MONSEY,NY 10952	None	EXEMPT	GENERAL CONTRIBUTION	1,000
CONG NACHLAS MOSHE MAKAVA 25 DANA ROAD MONSEY,NY 10952	None	EXEMPT	GENERAL CONTRIBUTION	860
CONGREGATION OHEL YAAKOV 1 CHALLENGER CT MONSEY,NY 10952	None	EXEMPT	GENERAL CONTRIBUTION	500
Total	243,628			

Recipient If recipient is an individual, Foundation Purpose of grant or Amount

Recipient	show any relationship to	status of	contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	
a Paid during the year				
TORAS EMACHU INC 246 NORTH MAIN ST SPRING VALLEY,NY 10977	None	EXEMPT	GENERAL CONTRIBUTION	500
KUPATH EZRA PO BOX 3 MONSEY,NY 10952	None	EXEMPT	GENERAL CONTRIBUTION	2,500
LMAHN ACHAI INC 3014 AVENUE L BROOKLYN,NY 11210	None	EXEMPT	GENERAL CONTRIBUTION	250
ZICHRON AVROHOM VESTHER FUND PO BOX 724 TALLMAN,NY 10982	None	EXEMPT	GENERAL CONTRIBUTION	180
MALBISH ZVI DKRULA 135 PARK LANE MONSEY,NY 10952	None	EXEMPT	GENERAL CONTRIBUTION	500
Total	243,628			

Form 990PF Part XV Line 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	1	Purpose of grant or	A mount
Name and address (home or business)		status of recipient	contribution	
a Paid during the year				
CONGREGATION TZDUKA VCHESED 18 STONEHOUSE RD MONSEY,NY 10952	None	EXEMPT	GENERAL CONTRIBUTION	11,910
KEREN ARON DBA UHAVTI SOIRUSAICHU 6 NEIL ROAD SPRING VALLEY,NY 10977	None	EXEMPT	GENERAL CONTRIBUTION	1,000
BAIS ROCHEL SCHOOL 145 SADDLE RIVER ROAD MONSEY,NY 10952	None	EXEMPT	GENERAL CONTRIBUTION	10,000
KOLLEL WILLIAMSBURG 128 RUTLEDGE STREET BROOKLYN,NY 11211	None	EXEMPT	GENERAL CONTRIBUTION	100
AHAVAS CHESED 1255 43RD STREET BROOKLYN,NY 11219	None	EXEMPT	GENERAL CONTRIBUTION	250
Total	▶ 3a	243,628		

Form 990PF Part XV Line 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	Purpose of grant or contribution	A mount
Name and address (home or business)		status of recipient	contribution	
a Paid during the year				
KOLLEL SHAS KEREN HATORAH INC PO BOX 1175 HILLBURN,NY 10931	None	EXEMPT	GENERAL CONTRIBUTION	955
KEREN OHR PREMISHALN INC 1 HILLCREST CTR STE 312 MONSEY,NY 10952	None	EXEMPT	GENERAL CONTRIBUTION	500
CONG KHAL AVREICHIM 31 DOVER TERRACE MONSEY,NY 10952	None	EXEMPT	GENERAL CONTRIBUTION	1,000
CONGREGATION CHEVRA LOMDEI TORAH 615 5TH STREET LAKEWOOD,NJ 08701	None	EXEMPT	GENERAL CONTRIBUTION	1,000
AMERICAN FRIENDS OF NISHMAS YISROEL 1324 AVENUE J BROOKLYN,NY 11230	None	EXEMPT	GENERAL CONTRIBUTION	3,000
Total	243,628			

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

| Page |

Recipient	If recipient is an individual,		Purpose of grant or	A mount
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	
a Paid during the year				
CONG OHEL YITZCHOK SVALIVA PO BOX 259 MONSEY,NY 10952	None	EXEMPT	GENERAL CONTRIBUTION	1,000
KOLEL ATZEI CHAIM 10 EAHAL CT MONROE, NY 10950	None	EXEMPT	GENERAL CONTRIBUTION	2,500
CONG ICHUD WALLABOUT INC 199 LEE AVENUE POB 221 BROOKLYN,NY 11211	None	EXEMPT	GENERAL CONTRIBUTION	2,000
CONGREGATION MACHZIKEI HADAS OF BEL 3 NORTH COLE AVENUE SPRING VALLEY,NY 10977	None	EXEMPT	GENERAL CONTRIBUTION	3,000
YESHIVA OHR TORAH POB 451 MONSEY,NY 10952	None	EXEMPT	GENERAL CONTRIBUTION	1,000
Total	243,628			

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

Recipient	If recipient is an individual,	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	recipient	contribution	
a Paid during the year				
MOSDOS CHERNOBEL INC 190 KEAP STREET BROOKLYN,NY 11211	None	EXEMPT	GENERAL CONTRIBUTION	500
CONG BEIR YAKOV 4118 14TH AVENUE STE 12 BROOKLYN,NY 11219	None	EXEMPT	GENERAL CONTRIBUTION	1,000
SHALHEVES INCORPORATED POB 430 MONSEY,NY 10952	None	EXEMPT	GENERAL CONTRIBUTION	180
TAT FAMILY RELIEF FUND OF KOLEL SHA 703 18TH STREET SANTA MONICA,CA 90402	None	EXEMPT	GENERAL CONTRIBUTION	100
YESHIVA SHAAREI ARAZIM PO BOX 523 MONSEY,NY 10952	None	EXEMPT	GENERAL CONTRIBUTION	500
Total	243,628			

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

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
a Paid during the year				
BREAD AND BUTTER AMBASSADORS INC 921 HAMLIN ST NE WASHINGTON,DC 20017	None	EXEMPT	GENERAL CONTRIBUTION	250
ECHO RIDGE SDA ELEMENTARY SCHOOL 15504 LIBERTY CIR NEVADA CITY,CA 95959	None	EXEMPT	GENERAL CONTRIBUTION	250
BRITH SHOLOM KNESETH ISRAEL CONGREG 829 N HANLEY RD SAINT LOUIS,MO 63130	None	EXEMPT	GENERAL CONTRIBUTION	1,000
CHABAD OF WAUKESHA- BROOKFIELD 1222 E BROADWAY WAUKESHA, WI 53186	None	EXEMPT	GENERAL CONTRIBUTION	500
CHABAD OF MIZZOU 313 E BRANDON RD COLUMBIA,MO 65203	None	EXEMPT	GENERAL CONTRIBUTION	1,000
Total			▶ 3a	243,628

TY 2015 Accounting Fees Schedule  Name: MOSHE EICHLER FUND INC	91163004267
Name: MOSHE EICHLER FUND INC	
<b>EIN:</b> 20-4006310	
<b>Software ID:</b> 15000324	
Software Version: 2015v3.0	

Software version: 2015V3.0				
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Accounting Fees	1,500	0	0	0

efile GRAPHIC print	- DO NOT PROCESS   As Filed Data -		DLN: 93491163004267		
Schedule B	edule B Schedule of Contributors		OMB No 1545-0047		
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	► Attach to Form 990, 990-EZ,  ► Information about Schedule B (Form 990, 990-EZ, o  www irs gov/form990	, or 990-PF or 990-PF) and its instructions is at	2015		
Name of the organizat		Employer i	identification number		
——————————————————————————————————————	INC	20-40063	310		
Organization type (ch	neck one)				
Filers of:	Section:				
Form 990 or 990-EZ	501(c)( ) (enter number) organization				
	4947(a)(1) nonexempt charitable trust <b>not</b> treat	ted as a private foundation			
	527 political organization				
Form 990-PF	√ 501(c)(3) exempt private foundation				
4947(a)(1) nonexempt charitable trust tre		as a private foundation			
	501(c)(3) taxable private foundation				
General Rule	D1(c)(7), (8), or (10) organization can check boxes for both zation filing Form 990, 990-EZ, or 990-PF that received, during the form any one contributor. Complete Parts I and II. See instr	ng the year, contributions totaling \$5,0	00 or more (in money or		
Special Rules					
under sections received from a	ution described in section 501(c)(3) filing Form 990 or 990-Ez 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Figury one contributor, during the year, total contributions of the contributi	Form 990 or 990-EZ), Part II, line 13, 16	Sa, or 16b, and that		
during the year,	ation described in section 501(c)(7), (8), or (10) filing Form 9, total contributions of more than \$1,000 <i>exclusively</i> for religion of cruelty to children or animals. Complete Parts I, II, and I	gious, charitable, scientific, literary, or			
during the year, this box is chec purpose Do no	tion described in section 501(c)(7), (8), or (10) filing Form 9, contributions exclusively for religious, charitable, etc., purposed, enter here the total contributions that were received dut complete any of the parts unless the <b>General Rule</b> applies able, etc., contributions totaling \$5,000 or more during the year	poses, but no such contributions totale uring the year for an exclusively religi s to this organization because it receiv	ed more than \$1,000 lf ous, charitable, etc,		

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
MOSHE EICHLER FUND INC

Employer identification number 20-4006310

Part	CONTRIDUTORS (see instructions) Use duplicate copies of Part I if a			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of con	
1			Person	[✓
	Moshe Eichler 34 Remsen Ave		Payroll	Г
	Monsey, NY 10952	<u>\$ 253,779</u>	Noncash	Г
	Molisey, N1 10952		(Complete Part II t	for noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of con	
			Person	Г
		s	Payroll	Г
		<u>\$</u>	Noncash	Г
			(Complete Part II to	for noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of con	
	,		Person	Г
			Payroll	Г
		<u>\$</u>	Noncash	Г
			(Complete Part II t	for noncash
			contributions)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of con	
		(c) Total contributions	(d)	
		Total contributions	(d) Type of con	
		(c) Total contributions	(d) Type of con Person	
		Total contributions	(d) Type of con Person Payroll	tribution
		Total contributions	(d) Type of con Person Payroll Noncash (Complete Part II i	tribution
No.	Name, address, and ZIP + 4	S (c)	(d) Type of con Person Payroll Noncash (Complete Part II to contributions)	tribution
No.	Name, address, and ZIP + 4	S (c) Total contributions	(d) Type of con Person Payroll Noncash (Complete Part II is contributions) (d) Type of con	tribution
No.	Name, address, and ZIP + 4	S (c)	(d) Type of con Person Payroll Noncash (Complete Part II to contributions) (d) Type of con Person	tribution
No.	Name, address, and ZIP + 4	S (c) Total contributions	(d) Type of con Person Payroll Noncash (Complete Part II to contributions) (d) Type of con Person Payroll	tribution  for noncash  tribution
No.	Name, address, and ZIP + 4	S (c) Total contributions	(d) Type of con Person Payroll Noncash (Complete Part II is contributions) (d) Type of con Person Payroll Noncash (Complete Part II is	tribution  for noncash  tribution  for noncash
(a) No.	Name, address, and ZIP + 4  (b)  Name, address, and ZIP + 4  (b)	S (c) Total contributions  S (c) Total contributions	(d) Type of con Person Payroll Noncash (Complete Part II to contributions) (d) Type of con Person Payroll Noncash (Complete Part II to contributions) (d)	tribution  for noncash  tribution  for noncash
(a) No.	Name, address, and ZIP + 4  (b)  Name, address, and ZIP + 4  (b)	S (c) Total contributions  S (c) Total contributions	(d) Type of con Person Payroll Noncash (Complete Part III (contributions)  Type of con Person Payroll Noncash (Complete Part III (contributions)  (d) Type of con (d) Type of con	tribution  for noncash  tribution  for noncash
(a) No.	Name, address, and ZIP + 4  (b)  Name, address, and ZIP + 4  (b)	S (c) Total contributions  S (c) Total contributions  (c) Total contributions	(d) Type of con Person Payroll Noncash (Complete Part II tontributions) (d) Type of con Person Payroll Noncash (Complete Part II tontributions) (d) Type of con Person	tribution  for noncash  tribution  for noncash

Name of organization		Employer identification number		
10 SHE EICHLER FUND INC		20-4006310		
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	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
		s		
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
		s		
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
		s		
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
		s		