Form 990
(Rev. January 2020)
Department of the Treasury Internal Revenue Service

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

with numbers on this form as it may be made public

OMB No. 1545-0047 2 19 Open to Public Inspection

	to not enter social security numbers on this form as it may be made public.
	Go to www.irs.gov/Form990 for instructions and the latest information.

AF	or th	e 2019 calendar year, or tax year beginning and	ending	_			
B c	Check if pplicab	e: C Name of organization D Employer identification num					
	Addre						
	Name chang	e Doing business as		74-30872	84		
	Initial returr		Room/suite	E Telephone numbe			
	Final	2 GARDEN STREET		617-913-			
_	termin ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	2,537,586.		
	_returr Appli	CAMBRIDGE, MA 02130		H(a) Is this a group re			
	tion pendi	^{ng} 2 GARDEN STREET, CAMBRIDGE, MA 02138		for subordinates H(b) Are all subordinates in			
		empt status: 🚺 501(c)(3) 501(c) ()◀ (insert no.) 4947(a)(1) d	or 🛄 527	If "No," attach a	list. (see instructions)		
		te:▶ www.tanzanianchildrensfund.org		H(c) Group exemptio			
KF	orm o	f organization: 🔀 Corporation 🔄 Trust 🔄 Association 🔛 Other 🕨	L Year	of formation: 2003	State of legal domicile: MA		
Pa	art I	Summary					
ø	1	Briefly describe the organization's mission or most significant activities:	Tanzan	ian Childre	n's Fund		
anc		provides support for the Rift Valley Chi					
ern		Check this box 🕨 🛄 if the organization discontinued its operations or dispos					
Š		Number of voting members of the governing body (Part VI, line 1a)		13			
Activities & Governance		Number of independent voting members of the governing body (Part VI, line 1b)			11		
es		Total number of individuals employed in calendar year 2019 (Part V, line 2a)		7			
ivit		Total number of volunteers (estimate if necessary)			60		
Act		Total unrelated business revenue from Part VIII, column (C), line 12			0.		
	b	Net unrelated business taxable income from Form 990-T, line 39	·····	7b	0.		
				Prior Year	Current Year		
P	8	Contributions and grants (Part VIII, line 1h)		2,431,960.	2,314,047.		
ent	9	Program service revenue (Part VIII, line 2g)		60,930.	36,134.		
Revenue		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		76,031.	97,420.		
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		6,637.	5,638.		
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		2,575,558.	2,453,239.		
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		1,293,653.	1,381,123.		
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.		
es		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		286,858.	325,956.		
ens	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.		
Expenses		Total fundraising expenses (Part IX, column (D), line 25)		000 450	050 501		
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		223,452.	258,531.		
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,803,963.	1,965,610.		
		Revenue less expenses. Subtract line 18 from line 12		771,595.	487,629.		
Net Assets or Fund Balances			Be	ginning of Current Year	End of Year		
sset 3alai	20	Total assets (Part X, line 16)		4,833,396.	6,069,490.		
atAs	21	Total liabilities (Part X, line 26)		14,349.	7,320.		
N ⁿ	22	Net assets or fund balances. Subtract line 21 from line 20		4,819,047.	6,062,170.		

Part II | Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer R. TODD CRONAN, TREASU Type or print name and title	RER	Date
Paid	Print/Type preparer's name John Monticone	Preparer's signature	Date Check X PTIN if self-employed P01257043
Preparer	Firm's name 🕞 John M. Monticon		Firm's EIN ▶ 04-2666565
Use Only	Firm's address 5 High Street, S	uite 207	
	Medford, MA 0215	5	Phone no. (781)395-0024
May the I	RS discuss this return with the preparer shown abo	ove? (see instructions)	X Yes No
932001 01-2	20-20 LHA For Paperwork Reduction Act Notic	ce, see the separate instructions.	Form 990 (2019)

See Schedule O for Organization Mission Statement Continuation

	990 (2019) THE TANZANIAN CHILDRENS FUND, INC. 74-3087284 Page 2
Pa	rt III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission: The Tanzanian Children's Fund provides support for the Rift Valley
	Children's Village (RVCV) which provides a permanent home for 97
	children in the Karatu District of Tanzania, as well as additional
	community-based programs to improve the lives of children and their
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
4	If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
4a	revenue, if any, for each program service reported. (Code:) (Expenses \$ 1,661,419. including grants of \$ 1,381,123.) (Revenue \$ 39,072.)
	The Tanzanian Children's Fund provides direct support to the Rift Valley Children's Fund (RVCF) in Oldeani, Tanzania, whose primary
	objective is to support marginalized children living at the Rift Valley
	Objective is to support marginalized children living at the Kilt valley
	Children's Village in the Karatu District of Tanzania. To this end, the
	Rift Valley Children's Village serves as a permanent home to 102
	children. RVCF also runs community-based programs designed to raise the
	standard of living for the entire community and create a healthy and
	nurturing environment for all children to grow up in. These programs
	include partnerships with the local primary and secondary schools
	(serving 485 and 415 students, respectively), an economic advancement
	program serving 720 active clients, and a community rural health clinic.
41	
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4-1	Other preserves any liese (Deserving on Schedule O.)
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ► 1,661,419.
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Part IV Checklist of Required Schedules

THE TANZANIAN CHILDRENS FUND, INC.

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
_	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			v
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		x
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete Schedule D, Part III</i>	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	х	
с	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			x
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d 11e		X
e f	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	Tie		- 23
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
124	Schedule D. Parts XI and XII	12a	х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If</i> "Yes," <i>complete Schedule F, Parts II and IV</i>	15	х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		v	
10	1c and 8a? If "Yes," complete Schedule G, Part II	18	X	<u> </u>
19		19		x
202	complete Schedule G, Part III	19 20a	ļ	X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a	<u> </u>	<u> </u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			<u> </u>
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		x

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Part IV	Checklist	of Require	d Schedules (co.	ntinued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			37
	Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
с	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	0.5		x
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<u> </u>
a	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	054		x
26	Schedule L, Part I	25b		- 23
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
		26		x
27	Controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i> Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,	20		
21	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		x
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
с	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b?If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
~ .	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			x
25 0	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	35a		- 23
U	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	005		
	If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 15			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b			
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		v	
	(gambling) winnings to prize winners?	1c	X	
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Part V	Statements	Regardi	ng Other IRS F	ilings and Tax (Complian	ce (continued)
Form 990	(2019)	\mathbf{THE}	TANZANIAN	CHILDRENS	FUND,	INC.

THE TANZANIAN CHILDRENS FUND, INC.

			Yes	No			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,						
	filed for the calendar year ending with or within the year covered by this return 2a 2a						
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х				
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)						
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X			
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b					
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a						
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X			
b	b If "Yes," enter the name of the foreign country ►						
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).						
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X X			
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b 5c		- 72			
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	90					
Ua	any contributions that were not tax deductible as charitable contributions?	6a		х			
h	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	Ua					
5	were not tax deductible?	6b					
7	Organizations that may receive deductible contributions under section 170(c).	0.0					
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	х				
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х				
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required						
	to file Form 8282?	7c		Х			
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d						
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e					
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f					
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g					
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h					
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the						
	sponsoring organization have excess business holdings at any time during the year?	8					
9	Sponsoring organizations maintaining donor advised funds.	-					
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a					
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b					
10	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 10a						
a b	Initiation fees and capital contributions included on Part VIII, line 12 10a Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b						
11 11	Section 501(c)(12) organizations. Enter:						
'' a	Gross income from members or shareholders						
b	Gross income from other sources (Do not net amounts due or paid to other sources against						
-	amounts due or received from them.)						
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a					
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year						
13	Section 501(c)(29) qualified nonprofit health insurance issuers.						
а	Is the organization licensed to issue qualified health plans in more than one state?	13a					
	Note: See the instructions for additional information the organization must report on Schedule O.						
b	Enter the amount of reserves the organization is required to maintain by the states in which the						
	organization is licensed to issue qualified health plans 13b						
	Enter the amount of reserves on hand 13c			37			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X			
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b					
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			v			
	excess parachute payment(s) during the year?	15		Х			
16	If "Yes," see instructions and file Form 4720, Schedule N.	10		Х			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		-			
	If "Yes," complete Form 4720, Schedule O.						

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Form	990	(2019))
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THE TANZANIAN CHILDRENS FUND, INC.

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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

600				<u></u>		X
Sec	tion A. Governing Body and Management				Yes	N
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	1	3	Tes	
	If there are material differences in voting rights among members of the governing body, or if the governing			-		
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.					
b	Enter the number of voting members included on line 1a, above, who are independent	1b	1	1		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship			-		
2	officer, director, trustee, or key employee?			2		2
3	Did the organization delegate control over management duties customarily performed by or under the					\vdash
-	of officers, directors, trustees, or key employees to a management company or other person?			3		2
4	Did the organization make any significant changes to its governing documents since the prior Form					12
5	Did the organization become aware during the year of a significant diversion of the organization's a					
6	Did the organization have members or stockholders?					12
	Did the organization have members, stockholders, or other persons who had the power to elect or					
	more members of the governing body?	•••		7a		2
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			74		
	persons other than the governing body?			7b		2
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the y			15		
	The governing body?	-	-	8a	x	
	Each committee with authority to act on behalf of the governing body?				X	+
9				00		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9		
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal					1
		neven			Yes	
10-2	Did the organization have local chapters, branches, or affiliates?			10a	163	
				10a		+
D	If "Yes," did the organization have written policies and procedures governing the activities of such			10b		
	and branches to ensure their operations are consistent with the organization's exempt purposes?				X	
	Has the organization provided a complete copy of this Form 990 to all members of its governing bo	bay bei	ore ming the form?	11a	- 23	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			12a	x	
	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>				X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris Did the organization regularly and consistently monitor and enforce compliance with the policy? If			12b		\vdash
с				10-	x	
10	in Schedule O how this was done			12c	X	
13	Did the organization have a written whistleblower policy?				X	
14	Did the organization have a written document retention and destruction policy?			14		
15	Did the process for determining compensation of the following persons include a review and appro		ndependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision				v	
	The organization's CEO, Executive Director, or top management official				X	-
b	Other officers or key employees of the organization			15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrang	ement	with a			
	taxable entity during the year?			16a		
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate					
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the org	janizati	on's			
	exempt status with respect to such arrangements?			16b		
sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed \blacktriangleright MA , CT , ME , NY ,					
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990,	and 99	0-T (Section 501(c)	(3)s only	/) avai	lab
	for public inspection. Indicate how you made these available. Check all that apply.					
	X Own website Another's website I Upon request Other (expla		,			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents,	conflic	of interest policy, a	and fina	ncial	
	statements available to the public during the tax year.					
20	State the name, address, and telephone number of the person who possesses the organization's b	oooks a	nd records 🕨			
	R. TODD CRONAN - 617-913-3763					
	2 GARDENS STREET, CAMBRIDGE, MA 02138					
32006	3 01-20-20			Form	1 990	(20
	6 020 807196 Tanzania7284 2019.04020 THE TANZANIAN	CHI	LDRENS FUN			
-			= -			

THE TANZANIAN CHILDRENS FUND, INC.

Part VII	Compensation of Officers,	Directors,	Trustees,	Key Employees,	Highest	Compensated
	Employees, and Independe	ent Contrac	ctors			

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.

Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average hours per	box	Position do not check more than o ox, unless person is both officer and a director/trust		h an	Reportable compensation	Reportable compensation	Estimated amount of		
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) INDIA HOWELL FOUNDER & DIRECTOR OF FUNDRAISING	70.00	x		x				55,000.	0.	0.
(2) R. TODD CRONAN	2.00							,		
TREASURER		x		x				0.	0.	0.
(3) SALLIE BEAR	2.00									
DIRECTOR		x						0.	0.	0.
(4) JAMES SCHUBAUER	2.00									
DIRECTOR		x						0.	Ο.	0.
(5) MARGARET BACON	2.00									
DEVELOPMENT CHAIR		X		X				0.	0.	0.
(6) POOH GEPHART	2.00									
DIRECTOR		Х						0.	0.	0.
(7) PETER LEON MMASSY	2.00									
TANZANIAN MANAGING DIR.		Х		Х				0.	0.	0.
(8) JODY DRAKE	2.00								_	
DIRECTOR		Х						0.	0.	0.
(9) LINDA HAYES	2.00									
DIRECTOR		х						0.	0.	0.
(10) ELEANOR DOAR	2.00									•
BOARD CHAIR		X		X				0.	0.	0.
(11) WILLIAM GRAY	2.00	.,						0	0	0
ALUMNI TRUSTEE	2 00	X						0.	0.	0.
(12) KIRSTEN HEINEMANN	2.00	x		x				0.	0.	0.
SECRETARY (13) DAVID MEANEY	2.00			<u>^</u>				0.	0.	0.
DIRECTOR	2.00	x						0.	0.	0.
DIRECTOR		^						0.	0.	0.
		1								
		-								
		1								
					-					<u> </u>
		1								
										·
		1								
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Form 990 (2019)

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	990 (2	2019) THE	TANZ/	ANIAN CI	HII	JDI	REI	\mathbf{NS}	FU	JNI	D, INC.	74-30	<u> </u>	284	Pa	age 8
Par	t VII	Section A. Officers, Direc	ctors, Trus	tees, Key Em	ploy	vees	, an	d Hi	ghe	st C	Compensated Employe	es (continued)				
		(A) Name and title		(B) Average hours per week	box	not c , unle	ss pe	ition more rson i	than is bot pr/trus	h an	(D) Reportable compensation from	(E) Reportable compensatio from related	le Estin ion amou		(F) timate ount o other	
				(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organization: (W-2/1099-MIS		fro orga anc	pensat om the anizati d relate nizatio	e ion ed
					$\left \right $											
					-											
1b	Subt	otal			<u> </u>	<u> </u>			<u> </u>		55,000.		0.			0.
	Total	from continuation sheets (add lines 1b and 1c)									0. 55,000.		0.			0.
2		number of individuals (inclu pensation from the organiza	-	ot limited to th	nose	liste	ed al	bove	e) wł	no re	eceived more than \$100),000 of reportabl	,e		Yes	0 No
3		ne organization list any forn a? If "Yes," complete Sched	,											3		x
4	For a	ny individual listed on line 1 elated organizations greate	a, is the su	im of reportab	le co	omp	ensa	atior	n and	d otl	her compensation from	the organization		4		х
5	rende	ny person listed on line 1a r ered to the organization? If	"Yes," com	-				-			-			5		Х
<u> </u>	Comp	Independent Contractors	highest co										ipens	ation fi	rom	
	the of		(A) d business					VILLI	<u>or w</u>		(B) Description of s		c	(C omper		<u></u> า
2		number of independent co			not li	mite	d to		se lis D	sted	d above) who received n	nore than				
	φιυυ	,000 of compensation from	ule organiz						<u> </u>					Form		2010

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			2019) THE TANZANIAN	CHILDREN	NS FUND, 1	INC.	74-3087	284 Page 9
Pa	rt V	/	Statement of Revenue					
			Check if Schedule O contains a response or	r note to any line		(D)	(0)	
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
nts its	1	а	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts			Membership dues 1b					
Am C		с	Fundraising events	83,559.				
Gift lar		d	Related organizations 1d					
ns, Simi			Government grants (contributions) 1e					
er S		f	All other contributions, gifts, grants, and					
Oth				30,488.				
hon		-		76,386.	7 214 047			
<u>0 a</u>		h	Total. Add lines 1a-1f	Business Code	2,314,047.	• 		
đ	0	а		561000	36,134.	36,134.		
Program Service Revenue	_	a b		501000	50,154	50,1540		
Ser		c						
am		d						
ogr		e						
Å		f	All other program service revenue					
		g	Total. Add lines 2a-2f	►	36,134.	•		
	3		Investment income (including dividends, interest		0 - 4 0 4			
			other similar amounts)		97,104.	•		97,104.
	4		Income from investment of tax-exempt bond pro					
	5		Royalties	(ii) Personal				
	6	_		(II) Fersonal				
			Gross rents					
			Rental income or (loss) 6c					
			Net rental income or (loss)					
			Gross amount from sales of (i) Securities	(ii) Other				
			assets other than inventory 7a 76 , 702 .					
		b	Less: cost or other basis					
nue			and sales expenses 7b 76,386.					
evenue			Gain or (loss)					21.6
Ŗ			Net gain or (loss)	>	316.	,		316.
Other Re	8	а	Gross income from fundraising events (not including \$ 83,559. of					
			contributions reported on line 1c). See	9,280.				
		h	Part IV, line 18	6,580.				
			Net income or (loss) from fundraising events		2,700.			2,700.
			Gross income from gaming activities. See	F	_,			_,
	-		Part IV, line 19					
		b	Less: direct expenses 9b					
		с	Net income or (loss) from gaming activities					
	10	а	Gross sales of inventory, less returns	4 94 9				
			and allowances 10a	4,319.				
			Less: cost of goods sold10b	1,381.	2 0 2 0	2 0 2 0		
		С	Net income or (loss) from sales of inventory		2,938.	2,938.		
snc	11	2		Business Code				
Jue		a b				1		
iella evel		c				1		
Miscellaneous Revenue			All other revenue					
2			Total. Add lines 11a-11d					
	12		Total revenue. See instructions	> 2	2,453,239.	. 39,072.	0.	-
93200	9 01	-20	-20					Form 990 (2019)

Part IX Statement of Functional Expenses

THE TANZANIAN CHILDRENS FUND, INC.

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

D -	Check if Schedule O contains a respon	(A)	(B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	1,381,123.	1,381,123.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	55,000.	27,500.		27,500
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	241,301.	91,714.	63,642.	85,945
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	9,058.	3,644.	1,946.	3,468
10	Payroll taxes	20,597.	8,287.	4,424.	7,886
11	Fees for services (nonemployees):				
а	Management				
	Legal	0 285		0.005	
	Accounting	8,375.		8,375.	
	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g		0 651	2 1 5 0	C E 0 1	
	column (A) amount, list line 11g expenses on Sch 0.)	9,651. 6,497.	3,150.	6,501.	6 407
12	Advertising and promotion	17,912.	5,342.	9,805.	6,497 2,765
13	Office expenses	3,934.	5,542.	3,376.	2,705
14	Information technology	5,954.	. J.C.	5,570.	
15	Royalties				
16 17		59,846.	25,529.	2,795.	31,522
17 10	Travel	55,040.	25,525.	2,755.	51,522
18	Payments of travel or entertainment expenses				
10	for any federal, state, or local public officials Conferences, conventions, and meetings				
19 20	· · · · ·				
20 21	Interest Payments to affiliates				
21	Depreciation, depletion, and amortization				
22	Insurance	28,197.	25,760.	2,437.	
23 24	Other expenses. Itemize expenses not covered	.,		,	
	above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
2	Sub-Contractors	75,282.	75,282.		
h	Bank and credit card fe	15,508.		13,728.	1,780
c	Supplies, including shi	14,474.	7,578.	6,561.	335
d	Printing	11,613.		55.	11,558
	All other expenses	7,242.	5,952.	1,290.	
25 25	Total functional expenses. Add lines 1 through 24e	1,965,610.	1,661,419.	124,935.	179,256
26	Joint costs. Complete this line only if the organization				-
-	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

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Form 990 (2019)

Part X Balance Sheet

\mathbf{THE}	TANZANIAN	CHILDRENS	FUND,	INC.
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		Check if Schedule O contains a response or not	e to ar	ny line in this Part X			
		· ·		,	(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			1,307,723.	1	1,184,673.
	2	Savings and temporary cash investments			95,983.	2	95,251.
	3	Pledges and grants receivable, net		3			
	4	Accounts receivable, net				4	
	5	Loans and other receivables from any current or					
		trustee, key employee, creator or founder, subst					
		controlled entity or family member of any of thes	se pers	sons		5	
	6	Loans and other receivables from other disqualit	fied pe				
		under section 4958(f)(1)), and persons described	d in se	ction 4958(c)(3)(B)		6	
ts	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
A	9					9	
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	4,007. 4,007.			
	b	Less: accumulated depreciation	10b	4,007.		10c	0.
	11	Investments - publicly traded securities	1,204,002.	11	900,536.		
	12	Investments - other securities. See Part IV, line 1	2,225,463.	12	3,885,430.		
	13	Investments - program-related. See Part IV, line	11			13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11	225.	15	3,600.		
	16	Total assets. Add lines 1 through 15 (must equa	al line (33)	4,833,396.	16	6,069,490.
	17	Accounts payable and accrued expenses			14,349.	17	7,320.
	18	Grants payable		18			
	19	Deferred revenue		19			
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete F	Part IV	of Schedule D		21	
ies	22	Loans and other payables to any current or form	ner offi	cer, director,			
Liabilities		trustee, key employee, creator or founder, subst					
-iat		controlled entity or family member of any of thes				22	
-	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, pay					
		parties, and other liabilities not included on lines		<i>,</i> ,			
	~	of Schedule D			14,349.	25	7,320.
	26	Total liabilities. Add lines 17 through 25			14,549.	26	7,520.
es		Organizations that follow FASB ASC 958, che	ск пе				
anc	07	and complete lines 27, 28, 32, and 33. Net assets without donor restrictions			4,752,836.	27	5,993,287.
3al	27 20				66,211.	27	68,883.
Πpr	28	Net assets with donor restrictions Organizations that do not follow FASB ASC 9			00,211.	20	
Fur			56, CH				
o	29	and complete lines 29 through 33. Capital stock or trust principal, or current funds				29	
ets	29 30	Paid-in or capital surplus, or land, building, or eq				29 30	
Ass	30 31	Retained earnings, endowment, accumulated in				30	
Net Assets or Fund Balances	32	Total net assets or fund balances			4,819,047.	32	6,062,170.
2	33	Total liabilities and net assets/fund balances			4,833,396.	33	6,069,490.
					, , , , , , , , , , , , , , , , , , , ,		

Form **990** (2019)

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	990 (2019) THE TANZANIAN CHILDRENS FUND, INC.	74-30	87284	Pag	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,453		
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,965		
3	Revenue less expenses. Subtract line 2 from line 1	3			29.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	4,819		
5	Net unrealized gains (losses) on investments	5	755	, 4	94.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	6,062	2,1	70.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		.		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis			37	
b	Were the organization's financial statements audited by an independent accountant?		2 b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separa	te basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the			v	
	review, or compilation of its financial statements and selection of an independent accountant?		2 c	X	
_	If the organization changed either its oversight process or selection process during the tax year, explain on Sc				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	0			v
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits				(0010)

Form **990** (2019)

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SCHEDULE A	
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Department of the Treasury

Internal Revenue Service

(Form	990	or	990-EZ
	220		

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047
2019
Open to Public

Inspection Employer identification number

Name of the organization	
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		THE	TANZANIAN	CHILDRENS	FUND, I	NC.		7	4-3087284	
Pa	art I	Reason for Public (Charity Status (A	All organizations mus	t complete th	nis part.) S	ee instruction	S.		
The	organ	ization is not a private found	lation because it is: (For lines 1 through 1	2, check only	/ one box.)	1			
1		A church, convention of ch	urches, or associatio	on of churches descr	ibed in sectio	on 170(b)(1)(A)(i).			
2		A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).)								
3		A hospital or a cooperative	hospital service orga	anization described i	n section 17	0(b)(1)(A)(i	ii).			
4		A medical research organiz	ation operated in co	njunction with a hos	oital describe	d in sectio	on 170(b)(1)(A)(iii). Enter	the hospital's name,	
		city, and state:								
5		An organization operated for	or the benefit of a co	llege or university ov	ned or opera	ted by a g	overnmental i	unit describ	bed in	
		section 170(b)(1)(A)(iv). (C	Complete Part II.)							
6		A federal, state, or local gov	vernment or governn	nental unit described	l in section 1	70(b)(1)(A))(v).			
7	X	An organization that norma						he general	public described in	
		section 170(b)(1)(A)(vi). (C			Ū.			•		
8		A community trust describe		(1)(A)(vi). (Complete	Part II.)					
9		An agricultural research org				ed in conji	unction with a	land-grant	college	
		or university or a non-land-g								
		university:	, , ,	,	,			0		
10		An organization that norma	Ilv receives: (1) more	than 33 1/3% of its	support from	contributi	ons. members	ship fees. a	and aross receipts from	
		activities related to its exen								
		income and unrelated busir		-					-	
		See section 509(a)(2). (Cor		,	1	1	,	5	,	
11		An organization organized a	•	ively to test for publi	c safety. See	section 50	09(a)(4).			
12		An organization organized a		•	-			arry out the	e purposes of one or	
		more publicly supported or	•		•		-	2	• •	
		lines 12a through 12d that	-		-					
a		Type I. A supporting orga	• •			-		-	aivina	
		the supported organization								
		organization. You must c								
b		Type II. A supporting org	-		nection with i	ts support	ed organizatio	on(s), by ha	iving	
		control or management o								
		organization(s). You mus			•					
c	:	Type III functionally inte	grated. A supporting	g organization opera	ted in connec	tion with,	and functiona	lly integrate	ed with,	
		its supported organization						, ,		
c		Type III non-functionally		-				rted organi	zation(s)	
		that is not functionally int	egrated. The organiz	zation generally must	satisfy a dist	tribution re	quirement an	d an attent	iveness	
		requirement (see instruct	ions). You must con	nplete Part IV, Secti	ons A and D	, and Part	v.			
e		Check this box if the orga	anization received a v	written determination	n from the IRS	S that it is a	а Туре I, Туре	II, Type III		
		functionally integrated, or	r Type III non-functio	nally integrated supp	orting organi	ization.				
f	Ente	er the number of supported o	organizations							
g	Prov	vide the following informatior								
	(i) Name of supported	(ii) EIN	(iii) Type of organization (described on lines 1-		anization listed iing document?	(v) Amount of	-	(vi) Amount of other	
		organization		above (see instruction		No	support (see ir	nstructions)	support (see instructions)	
Tot										
LHA	For F	Paperwork Reduction Act N	lotice, see the Instr	uctions for Form 99	0 or 990-EZ	9 32021 09-	-25-19 Sche	dule A (For	m 990 or 990-EZ) 2019	

Schedule A (Form 990 or 990-EZ) 2019 THE TANZANIAN CHILDRENS FUND, INC.

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	1,983,854.	2,077,870.	1,884,778.	2,431,960.	2,323,327.	10,701,789.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge \dots						
4	Total. Add lines 1 through 3	1,983,854.	2,077,870.	1,884,778.	2,431,960.	2,323,327.	10,701,789.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						263,075.
	Public support. Subtract line 5 from line 4.						10,438,714.
-	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4	1,983,854.	2,077,870.	1,884,778.	2,431,960.	2,323,327.	10,701,789.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,	54 260	00 400	FF 400			
	and income from similar sources \dots	54,369.	23,480.	57,409.	73,088.	97,104.	305,450.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
	Total support. Add lines 7 through 10						11,007,239.
	Gross receipts from related activities,	•	,			12	14,988.
13	First five years. If the Form 990 is for	-	s first, second, third	i, fourth, or fifth ta	ix year as a sectio	n 501(c)(3)	
Sec	organization, check this box and stor ction C. Computation of Publ		rcentage				
				aluman (f))		44	94.83 %
	Public support percentage for 2019 (14 15	93.55 %
	Public support percentage from 2018 33 1/3% support test - 2019. If the o						-
102	stop here. The organization qualifies						
F	33 1/3% support test - 2018. If the c						
, L	and stop here. The organization qual						
17-	10% -facts-and-circumstances tes						
170	and if the organization meets the "fac						
	meets the "facts-and-circumstances"			· · · ·	•	•	
F	10% -facts-and-circumstances tes						
L.	more, and if the organization meets the						
	organization meets the "facts-and-circ				• •		´ ▶□
18	Private foundation. If the organization						s b
				,,,			or 990-FZ) 2019

Schedule A (Form 990 or 990-EZ) 2019

Schedule A (Form 990 or 990-EZ) 2019 THE TANZANIAN CHILDRENS FUND, INC. Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
t	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support						
	ndar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
k	Unrelated business taxable income (less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is fo	r the organization':	s first, second, thi	rd, fourth, or fifth	tax year as a section	on 501(c)(3) or	ganization,
	check this box and stop here						>
Se	ction C. Computation of Publ	ic Support Pe	rcentage				
15	Public support percentage for 2019 (line 8, column (f), c	divided by line 13,	column (f))		15	%
16	Public support percentage from 2018	3 Schedule A, Part	III, line 15			16	%
See	ction D. Computation of Inve	stment Incom	e Percentage)			
17	Investment income percentage for 20)19 (line 10c, colur	nn (f), divided by	line 13, column (f))	17	%
18	Investment income percentage from	2018 Schedule A,	Part III, line 17			18	%
1 9a	33 1/3% support tests - 2019. If the	organization did r				33 1/3%, and	line 17 is not
	more than 33 1/3%, check this box a	nd stop here. The	organization qual	lifies as a publicly	supported organization	ation	
b	33 1/3% support tests - 2018. If the	organization did r	not check a box o	n line 14 or line 19	a, and line 16 is m	ore than 33 1/	3%, and
	line 18 is not more than 33 1/3%, che	eck this box and st	op here. The orga	anization qualifies	as a publicly supp	orted organiza	ition ►
20	Private foundation. If the organization	on did not check a	box on line 14, 19	9a, or 19b, check	this box and see in	structions	>
9320	23 09-25-19				Sch	edule A (Form	n 990 or 990-EZ) 2019
				15			

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

Yes

No

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

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Schedule A (Form 990 or 990-EZ) 2019

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Schedule A (Form 990 or 990-EZ) 2019 THE TANZANIAN CHILDRENS FUND, INC. Part IV Supporting Organizations (continued)

			×	
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
-	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
•	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
000			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		103	
•	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	-		
2				
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).			
~		2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
<u></u>	supported organizations played in this regard.	3		
	tion E. Type III Functionally Integrated Supporting Organizations	<u> </u>		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions)			
a	The organization satisfied the Activities Test. <i>Complete</i> line 2 <i>below.</i>			
b	The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>	tweation	-)	
c	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see ins	tructions	ŕ	N
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
_	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
_	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		
93202	5 09-25-19 Schedule A (Form 9	90 or 99	90-EZ)	2019
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Schedule A (Form 990 or 990 EZ) 2019 THE TANZANIAN CHILDRENS FUND, INC. Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Net short-term capital gain 1 Recoveries of prior-year distributions 2 Other gross income (see instructions) 3 Add lines 1 through 3. 4 Depreciation and depletion 5 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) 6 Other expenses (see instructions) 7 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 tion B - Minimum Asset Amount 4 1 1 Average monthly value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): 1 1 Average monthly cash balances 1b 1 1 Fair market value of other non-exempt-use assets 1c 1 Acquisition indebtedness applicable to non-exempt-use assets 2 2 Subtract line 2 from line 1d. 3 3 3 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions). 4 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 Mutiply line 5 by .035. 6 Recoveries of prior-year distributions	(A) Prior Year	(B) Current Year (optional)
Other gross income (see instructions) 3 Add lines 1 through 3. 4 Depreciation and depletion 5 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) 6 Other expenses (see instructions) 7 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 tion B - Minimum Asset Amount 8 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): 1a Average monthly value of securities 1a Average monthly cash balances 1b Fair market value of other non-exempt-use assets 1c I Total (add lines 1a, 1b, and 1c) 1d P Discount claimed for blockage or other factors (explain in detail in Part VI): 3 Acquisition indebtedness applicable to non-exempt-use assets 2 Subtract line 2 from line 1d. 3 Cash deemed held for exempt use. Enter 1·1/2% of line 3 (for greater amount, see instructions). 4 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 Multiply line 5 by .035. 6 Recoveries of prior-year distributions <th>(A) Prior Year</th> <th></th>	(A) Prior Year	
Add lines 1 through 3. 4 Depreciation and depletion 5 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) 6 Other expenses (see instructions) 7 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 tion B - Minimum Asset Amount 8 Average monthly value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): 1a Average monthly cash balances 1b e Fair market value of other non-exempt-use assets 1c I Total (add lines 1a, 1b, and 1c) 1d Discount claimed for blockage or other factors (explain in detail in Part VI): 3 Acquisition indebtedness applicable to non-exempt-use assets 2 Subtract line 2 from line 1d. 3 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions). 4 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 Multiply line 5 by .035. 6 Recoveries of prior-year distributions 7	(A) Prior Year	
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see instructions).4Net value of non-exempt-use assets (subtract line 4 from line 3)5Multiply line 5 by .035.6Recoveries of prior-year distributions7		
Net value of non-exempt-use assets (subtract line 4 from line 3) 5 Multiply line 5 by .035. 6 Recoveries of prior-year distributions 7		
Multiply line 5 by .035. 6 Recoveries of prior-year distributions 7		
Recoveries of prior-year distributions 7		
Minimum Asset Amount (add line 7 to line 6) 8		
tion C - Distributable Amount		Current Year
Adjusted net income for prior year (from Section A, line 8, Column A) 1		
Enter 85% of line 1. 2		
Minimum asset amount for prior year (from Section B, line 8, Column A) 3		
Enter greater of line 2 or line 3. 4		
Income tax imposed in prior year 5		
Distributable Amount. Subtract line 5 from line 4, unless subject to		
emergency temporary reduction (see instructions). 6		

instructions).

Schedule A (Form 990 or 990-EZ) 2019

932026 09-25-19

Schedule A (Form 990 or 990-EZ) 2019 THE TANZANIAN CHILDRENS FUND, INC.

Fai	I ype III Non-Functionally Integrated 509	(a)(3) Supporting Org	anizations (continued)	
Secti	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe			
2	Amounts paid to perform activity that directly furthers exemp			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizatior	าร	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	he organization is responsive	e	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2019			
а	From 2014			
b	From 2015			
c	From 2016			
d	From 2017			
e	From 2018			
f	Total of lines 3a through e			
	Applied to underdistributions of prior years			
h	Applied to 2019 distributable amount			
i	Carryover from 2014 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from Section D,			
	line 7: \$			
	Applied to underdistributions of prior years			
	Applied to 2019 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2019. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2020. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
	Excess from 2015			
	Excess from 2016			
	Excess from 2017			
	Excess from 2018			
е	Excess from 2019			

Schedule A (Form 990 or 990-EZ) 2019

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19

		90-EZ) 2019								3087284	
Part VI	Supplement Part IV, Section	on A, lines 1, 2	, 3b, 3c, 4b, 4	4c, 5a, 6, 9a,	9b, 9c, 11a, 1	1b, and 1	lc; Part IV	Section B, li	nes 1 and 2	Part IV, Section	on C,
	line 1; Part IV, Section D, line (See instruction	Section D, line es 5, 6, and 8;	es 2 and 3; P	art IV, Sectio	n E, lines 1c, :	2a, 2b, 3a,	and 3b; P	art V, line 1; I	Part V, Secti	on B, line 1e; F	Part V
		JIIS.)									
32028 09-25-1	9							Sch	edule A (Fo	rm 990 or 990)-EZ)
						20		N CHIL			

SCHEDULE D

(Form 990)

932051 10-02-19

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990.

► Attach to Form 990. ►Go to www.irs.gov/Form990 for instructions and the latest information.



Employer identification number

Department of the Treasury Internal Revenue Service
Name of the organization

74-3087284 THE TANZANIAN CHILDRENS FUND, INC. Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 Aggregate value of contributions to (during year) 2 Aggregate value of grants from (during year) 3 Aggregate value at end of year 4 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds 5 are the organization's property, subject to the organization's exclusive legal control? No Yes 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring No impermissible private benefit? Yes Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last Held at the End of the Tax Year day of the tax year. a Total number of conservation easements 2a b Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure d listed in the National Register 2d 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🕨 Number of states where property subject to conservation easement is located 4 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 5 __ Yes No violations, and enforcement of the conservation easements it holds? 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶\$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) 8 Yes No and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and 9 balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (ii) Assets included in Form 990, Part X 📃 🕨 💲 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1 ▶ \$ Assets included in Form 990, Part X LHA For Paperwork Reduction Act Notice. see the Instructions for Form 990. Schedule D (Form 990) 2019

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		ZANIAN CHII						74-30			age 2
Pai	t III Organizations Maintaining C									nued)	
3	Using the organization's acquisition, accessi	on, and other record	s, check a	ny of the	following that	at make si	ignifican	t use of its			
	collection items (check all that apply):										
а	Public exhibition	d			hange progra						
b	Scholarly research	e	└── Otł	ner							
С	Preservation for future generations										
4	Provide a description of the organization's co		,		•			ose in Par	t XIII.		
5	During the year, did the organization solicit o							_	-		-
	to be sold to raise funds rather than to be ma								Yes		No
Pai	t IV Escrow and Custodial Arran		te if the or	ganizatio	n answered	"Yes" on	Form 99	0, Part IV,	line 9, oi	r	
	reported an amount on Form 990, Pa										
1 a	Is the organization an agent, trustee, custod								٦.,	v	No
	on Form 990, Part X?							L	Yes		_ No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	lowing tab	le:				r			
									Amoun	t	
	Beginning balance										
	Additions during the year										
	Distributions during the year										
f	Ending balance						. 1 f				_
	Did the organization include an amount on F						• • • • • • •	····· ∟	Yes		No
	If "Yes," explain the arrangement in Part XIII.										
Pa	t V Endowment Funds. Complete i				i				() [heeli
		(a) Current year	(b) Prio	,	(c) Two year			years back	(e) Four	-	
	Beginning of year balance	3,577,512.		95,664.		1,156.		667,310.	1		,596.
b	Contributions	758,719.		13,458.		8,461.		712,652.			,214.
	Net investment earnings, gains, and losses 852,069192,159. 379,492. 225,02129,739								,739.		
	Grants or scholarships										
е	Other expenditures for facilities	050 105		00 451	10					F 2 4	BC 1
	and programs	258,197.	2	39,451.	19.	3,445.		233,827.		53L	,761.
	Administrative expenses	4 020 102	2 5		2 20			201 150		668	21.0
-	End of year balance	4,930,103.		77,512.		5,664.	2,	371,156.	L	,667	,310.
2	Provide the estimated percentage of the cur			column (a	a)) held as:						
	Board designated or quasi-endowment	97.00	_%								
b	Permanent endowment	%									
С	Term endowment ► 3.00										
	The percentages on lines 2a, 2b, and 2c sho	•									
3a	Are there endowment funds not in the posse	ession of the organiza	ition that a	re held a	nd administe	ered for th	ne organi	ization	1		
	by:									Yes	No
	(i) Unrelated organizations								3a(i)		X
	(ii) Related organizations								3a(ii)		X
	If "Yes" on line 3a(ii), are the related organiza								3b		
	Describe in Part XIII the intended uses of the		wment fur	ds.							
Fai	t VI Land, Buildings, and Equipm						line 10				
	Complete if the organization answere								(-1) D		
	Description of property	(a) Cost or ot basis (investm			or other (other)	• •	cumulat preciatior		(d) Boo	k valu	е
	Land			04313		uep	- eciatioi	'			
	Land										
b	Buildings										
	Leasehold improvements										
d	Equipment				4,007.		1 0	07			
-	Other						4,0				0.
Tota	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part J	x, column	(B), line 1	UC.)				_ /=		-
								Schedule	D (Forn	n 990)) 2019

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Schedu	ule D (Form 990) 2019	THE TANZAN	IAN	CHILDRENS	FUND,	INC.	74	-3087284	Page 3
	VII Investments -	Other Securities.							0
	Complete if the org	anization answered "Yes	s" on Fo	orm 990, Part IV, line	11b. See F	orm 990, Part X	, line 12.		
(a) De	escription of security or categ			(b) Book value				l-of-year market	value
(1) Fin	ancial derivatives							-	
	sely held equity interests								
(3) Oth									
(O) (A)	ISHARES RUSS	ELL 1000		387,206.	End	-of-Year	Market	Value	
(B)	VANGUARD DIV			383,652.		-of-Year			
(C)	ISHARES CORE			1,262,252.		-of-Year			
(D)	ISHARES TR R	US MID CAP							
(E)	ETF			675,972.	End	-of-Year	Market	Value	
(F)	ISHARES RUSS	ELL 2000 EFT	+	345,753.		-of-Year			
(G)	ISHARES TRUS			•					
(<u>U</u>)	TREASURY	-		430,551.	End	-of-Year	Market	Value	
	Col. (b) must equal Form 990). Part X. col. (B) line 12.)	•	3,885,430.					
	VIII Investments -								
		anization answered "Yes	s" on Fo	orm 990, Part IV line	11c. See F	orm 990 Part X	line 13		
	(a) Description of			(b) Book value				l-of-year market	value
(1)								-	
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
	Col. (b) must equal Form 990). Part X. col. (B) line 13.) 🕨	•						
Part			•						
	Complete if the org	anization answered "Yes	s" on Fo	orm 990, Part IV, line	11d. See F	orm 990, Part X	, line 15.		
		(a	a) Descr	iption				(b) Book va	alue
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
Total. (Column (b) must equal Fo	orm 990, Part X, col. (B) li	ine 15.)				►		
Part	X Other Liabilitie	es.							
	Complete if the org	anization answered "Yes	s" on Fo	orm 990, Part IV, line	11e or 11f	. See Form 990,	Part X, line 25	•	
1.	(a) De	escription of liability						(b) Book va	alue
(1)	Federal income taxes								
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
` <i>`</i> /	Column (b) must equal Fo	orm 990, Part X, col. (B) li	ine 25.)						
-	bility for uncertain tax pos							hat reports the	
	anization's liability for und				-			-	II X
	,							edule D (Form 9	

Schedule	D (Form 990) 2019 THE TANZANIAN CHILDRENS	FUND,	INC.	74-	3087284	Page 4
Part XI	Reconciliation of Revenue per Audited Financial State	ements W	ith Revenue per F			
	Complete if the organization answered "Yes" on Form 990, Part IV, line	12a.				
1 Tota	al revenue, gains, and other support per audited financial statements			1	3,216,	694.
2 Amo	ounts included on line 1 but not on Form 990, Part VIII, line 12:					
a Net	unrealized gains (losses) on investments	2a	755,494.			
b Don	ated services and use of facilities	2b				
c Rec	overies of prior year grants	2c				
	er (Describe in Part XIII.)		7,961.			
e Add	lines 2a through 2d			2e	763,	
3 Sub	tract line 2e from line 1			3	2,453,	239.
	ounts included on Form 990, Part VIII, line 12, but not on line 1:					
a Inve	stment expenses not included on Form 990, Part VIII, line 7b	4a				
b Othe	er (Describe in Part XIII.)	4b				
c Add	lines 4a and 4b			4c		0.
	al revenue. Add lines 3 and 4c. (<i>This must equal Form</i> 990, <i>Part I, line</i> 12.)			5	2,453,	239.
Part XI	Reconciliation of Expenses per Audited Financial State	tements V	Vith Expenses per	Retu	ırn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line					
1 Tota	al expenses and losses per audited financial statements			1	1,973,	571.
	ounts included on line 1 but not on Form 990, Part IX, line 25:					
a Don	ated services and use of facilities	2a				
b Prior	r year adjustments	2b				
c Othe	er losses	2c				
d Othe	er (Describe in Part XIII.)	2d	7,961.		_	
	lines 2a through 2d			2e	7,	961.
3 Sub	tract line 2e from line 1			3	1,965,	610.
4 Amo	ounts included on Form 990, Part IX, line 25, but not on line 1:					
a Inve	stment expenses not included on Form 990, Part VIII, line 7b	4a				
b Othe	er (Describe in Part XIII.)	4b				
				4-		-
	lines 4a and 4b			4c		0.
5 Tota	Ines 4a and 4b al expenses. Add lines 3 and 4c. (<i>This must equal Form 990, Part I, line 18.</i> II Supplemental Information.			4c 5	1,965,	•••

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Part V, line 4:

The board designated fund has the following intended use:
Rainy Day Operating and/or Capital Costs: \$ 1,712,471 - to help with
operating and/or capital costs of TCF and the Rift Valley Children's
Village, and to provide a back-up source of funds in the case of
unanticipated funding needs.
Long Term Investment Fund: \$3,053,498 to help with operating and/or
capital costs of the Tanzanian Children's Fund and the Rift Valley
Children's Village, including costs of Oldeani Secondary School and other
secondary education costs.
The Lorinda de Roulet Scholarship Fund for Girls: \$95,251 fund established
by the Board of Directors to fund post-secondary scholarships.
932054 10-02-19 Schedule D (Form 990) 2019 29

Schedule D (Form 990) 2019		N CHILDRENS FUND,	INC. 7	4-3087284 Page 5
Part XIII Supplemental Info	rmation (continued)			
Boniface Children H	Fund: \$19,997	Set up as a sepa	rate account	for all
monies donated by a	an individual	donor for specifi	c sponsorshi	ps.

Oldeani Capital Fund: \$10,000 - Restricted contributions from donor to

help with the capital cost of the Oldeani Secondary School.

Oldeani Operating Fund \$ 33,337: For the purchases of books and teaching materials.

Health Care Programs \$ 5,550

Part X, Line 2:

The Organization has evaluated the tax positions taken on returns for open years and those expected to be taken on returns for the year ended December 31, 2019. It is Management's belief that such tax positions are more likely than not to be sustained upon examination by tax authorities. Accordingly, no liability for uncertain tax positions has been reflected in these financial statements. Returns for tax years beginning with those filed for the year ended December 31, 2016 are open to examination.

Part XI, Line 2d - Other Adjustments:	
Cost of Fundraising events net of gross revenue	6,580.
Cost of Microfinance Products disclosed net of gross	
revenue	1,381.
Total to Schedule D, Part XI, Line 2d	7,961.
Part XII, Line 2d - Other Adjustments:	
Cost of Fundraising events net of gross revenues	6,580.
Cost of Microfinance Products disclosed net of gross	
932055 10-02-19	Schedule D (Form 990) 2019

12101020 807196 Tanzania7284 2019.04020 THE TANZANIAN CHILDRENS FUN TANZANI1

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Schedule D (Form Part XIII Sup	990) 2019	Т	HE TZ	ANZAN	IAN	CHILDR	ENS	FUND,	INC.	74-3087284 Page 5
	plemental in	forma	ation (co	ontinued)						
revenue										1,381.
Total to s	Schedule	D,	Part	XII,	Lin	e 2d				7,961.
		-								
										Schedule D (Form 990) 2019
932055 10-02-19						3	31			

Part XIII Supplemental Information (continued)

Part VII Investments - Other Securities. See Form 990, Part X, line 12.		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
ISHARES MSCI EAFE	400,044.	FMV
<u> </u>		
932421 04-01-19		Schedule D (Form 990)

Schedule D (Form 990)

12101020 807196 Tanzania7284 2019.04020 THE TANZANIAN CHILDRENS FUN TANZANI1

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Department of the Treasury			Attach to Form 990.			Open to Public
Internal Revenue Service	Go to 🕨	www.irs.gov/Fo	orm990 for instructions and the lates	t information.		Inspection
Name of the organization					Employer ic	lentification number
THE TANZANIAN	CHILDRENS	FUND, I	INC.		74-308	7284
			tside the United States. Compl	ete if the orgar	nization answe	red "Yes" on
Form 990, Parl						
			ds to substantiate the amount of its gr			v ,
the grantees' eligibility	/ for the grants or a	assistance, and	the selection criteria used to award th	e grants or ass	istance?	X Yes No
2 For grantmakers. De United States.	scribe in Part V the	e organization's	procedures for monitoring the use of it	s grants and o	ther assistanc	e outside the
			an be duplicated if additional space is			
(a) Region	(b) Number of offices in the region	(C) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, pro- gram services, investments, grants to recipients located in the region)	is a pro describe	vity listed in (d gram service, e specific type e(s) in the regio	expenditures for and investments
Sub-Saharan African				Support for Valley Chil Village, Ka	ldren's	
- Angola	0	0	Program Services	Tanzania		1,381,123.
3 a Subtotal		0				1,381,123
b Total from continuation sheets to Part I		0				0.
c Totals (add lines 3a	·					
and 3b)	. 0	0				1,381,123.

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

OMB No. 1545-0047

2019

Schedule F (Form 990) 2019

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

932071 10-12-19

SCHEDULE F (Form 990)

7284

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)		(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan	Support for the Rift Valley Children's Village, in Karatu,					
		Africa - Angola,	Tanzania	1 381 123	Wire transfer	0.		
		ingora,		1,001,120.				
2 Enter total number of	recipient organizatio	ns listed above that are	recognized as charities by the	I foreian country	recognized as tax-e	xempt	l	I
			tion 501(c)(3) equivalency lette					1
3 Enter total number of	other organizations	or entities						0

Schedule F (Form 990) 2019

74-3087284

Page 3

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)

Schedule F (Form 990) 2019

Schedule F (Form 990) 2019	THE	TANZANIAN	CHILDRENS	FUND,	INC.	74
Part IV Foreign Form	S					

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign	_	
	Corporation (see Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization		
	may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign		
	Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign		
	Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes,"		
	the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to		
	Certain Foreign Corporations (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a		
	qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621,		
	Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes,"		
	the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain		
	Foreign Partnerships (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If		
-	"Yes," the organization may be required to separately file Form 5713, International Boycott Report (see		
	Instructions for Form 5713; don't file with Form 990)	Yes	XNo

Schedule F (Form 990) 2019

Schedule F (Form 990) 2019 THE TANZANIAN CHILDRENS FUND, INC. 74-3087284 Page Part V Supplemental Information
Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.
Part I, Line 2:
Schedule F, Part I, Line 2: All monies granted to charitable
organizations will be monitored through accepted accounting practices.
No charitable organization will receive additional funding until a full
and detailed reporting of previous grants has been received, reviewed and
approved by the Foundation's Board of Directors to ensure that monies
granted are used for the purposes that they are intended. In addition,
the president and another member of the Board of Directors will conduct a
field investigation to ensure that the funds donated by the Foundation to
foreign charitable organizations are being used properly. The Executive
Director, who is a board member of the organization, is also a member of
the board of directors of Rift Valley Children's Fund.
;ListTotal 0
932075 10-12-19 Schedule F (Form 990) 20 37

SCHEDULE G	Suppleme	ntal Information Regarding	Fund	drais	ing or Gaming	Acti	vities	OMB No. 1545-0047
(Form 990 or 990-EZ)		e organization answered "Yes" on organization entered more than \$1				or 19,	or if the	2019
Department of the Treasury		Attach to Form 990						Open to Public
Internal Revenue Service		to www.irs.gov/Form990 for instr	uction	s and	the latest informat	ion.		Inspection
Name of the organization		ZANIAN CHILDRENS F	UND	, I	NC.		Employer ide $74 - 3087$	entification number 284
	complete this par	 Complete if the organization answe t. 	ered "Y	′es" oi	n Form 990, Part IV,	line 1	7. Form 990-E2	Z filers are not
1 Indicate whether th	e organization rais	sed funds through any of the followir						
a Mail solicitat	ions email solicitations			•	overnment grants nment grants			
c Phone solici		g Special						
d In-person so			<i>(</i> ; ,		ee 1			
		or oral agreement with any individual art VII) or entity in connection with p					, or 🗌 Yes	s 🗌 No
		viduals or entities (fundraisers) pursu			•			
compensated at le	east \$5,000 by the	organization.						
(i) Name and addres or entity (fund		(ii) Activity	(iii) fundr have c or con contribu	ustody trol of	(iv) Gross receipts from activity	to (o	Amount paid or retained by) fundraiser ted in col. (i)	(vi) Amount paid to (or retained by) organization
			Yes	No				
		I	I					
		n is registered or licensed to solicit o			s or has been notified	d it is	exempt from r	
or licensing.			John	Jution	s of has been notified	u it is		egistration
HA For Paperwork P	eduction Act Not	ice, see the Instructions for Form	990 or	990-1	F7. 4	Scher	dule G (Form 9	990 or 990-EZ) 2019

932081 09-11-19

74-3087284 Page 2 Schedule G (Form 990 or 990-EZ) 2019 THE TANZANIAN CHILDRENS FUND, INC.

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		of fundraising event contributions and gr			-	ots greater than \$5,000
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
			Huntington	San Emanaiana G	0	(add col. (a) through
			New York	Francisco, C	9	col. (c))
3			(event type)	(event type)	(total number)	
באבו ומע	1	Gross receipts	26,110.	17,449.	49,280.	92,839
	2	Less: Contributions	26,110.	17,449.	40,000.	83,559
	~				9,280.	9,280
┥	3	Gross income (line 1 minus line 2)			5,200.	5,200
	4	Cash prizes				
3	5	Noncash prizes				
	6	Rent/facility costs				
	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses		18.	6,475.	
	10	Direct expense summary. Add lines 4 throug				6,580
		Net income summary. Subtract line 10 from I				2,700
a	rt I		answered "Yes" on Forn	n 990, Part IV, line 19, or	reported more than	
Т		\$15,000 on Form 990-EZ, line 6a.		(L) Dull tabe/instant		
			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (ad col. (a) through col. (a)
				biligo/progrossive biligo		
	1	Gross revenue				
		Cash prizes				
	3	Noncash prizes				
Ì		• • • • • • • • • • • • • • • • • • • •				
	4	Rent/facility costs				
	5	Other direct expenses				
Τ			Yes %	Yes%	Yes %	
	6	Volunteer labor	No No	└── No	No	
	7	Direct expense summary. Add lines 2 throug	h 5 in column (d)			
	0	Net gaming income summary. Subtract line 7	from line 1 column (d)		•	
4	0	The gaining income summary. Subtract line r				
	Ent	er the state(s) in which the organization condu	ucts gaming activities:			
		he organization licensed to conduct gaming a				Yes N
		No," explain:				
		ere any of the organization's gaming licenses re				Yes N
b	lf "`	Yes," explain:				
208	82 09	9-11-19			Schedule G (For	rm 990 or 990-EZ) 20
				2.0		
				39		

Sch	edule G (Form 990 or 990-EZ) 2019 THE TANZANIAN CHILDRENS FUND, INC. 74-	3087284	Page 3
11	Does the organization conduct gaming activities with nonmembers?	Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed		
	to administer charitable gaming?	Yes	No No
	Indicate the percentage of gaming activity conducted in:		
	The organization's facility		%
	An outside facility	13b	%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	Name ►		
	Address ►		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	🗌 No
h	If "Vec," enter the encurt of gaming revenue received by the exceptation \mathbf{N} (
D	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$		
~	If "Yes," enter name and address of the third party:		
Ŭ			
	Name		
	Address ►		
40			
16	Gaming manager information:		
	Name		
	Gaming manager compensation ▶ \$		
	Description of services provided		
	Director/officer Employee Independent contractor		
17	Mandatory distributions:		
	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
a	retain the state gaming license?	Yes	No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the		
	organization's own exempt activities during the tax year > \$		
Ра	rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and P	art III, lines 9,	9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.		
_			
9320	33 09-11-19 Schedule G (For 40	m 990 or 990)-EZ) 2019
			_

Schedule G	(Form 990 or 990-EZ)	THE	TANZANIAN	CHILDRENS	FUND,	INC.	74-3087284	Page
Part IV	(Form 990 or 990-EZ) Supplemental Info	ormation	(continued)					
							Schedule G (Form 990 or	900_E
32084 04-01-1	9							000-L
				41				
		-						

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public

19

Department of the Treasury Internal Revenue Service

Name of the organization

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990.

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

Inspection Employer identification number 74 - 3087284

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THE TANZANIAN CHILDRENS FUND, I	INC.
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Par	τI		s of Property							
				(a)	(b)	(c)	(d)			
				Check if	Number of contributions or	Noncash contribution amounts reported on	Method of de		•	_
				applicable		Form 990, Part VIII, line 1g	noncash contribu	tion ar	nount	5
1	Art	- Works of	art							
2			treasures							
3			l interests							
4			blications							
5			nousehold goods							
6			r vehicles							
7			nes							
8			operty							
9			Iblicly traded	X	16	76,386.	Market valu	e		
10			osely held stock							
11			artnership, LLC, or							
			······································							
12			scellaneous							
13			servation contribution -							
			ures							
14			ervation contribution - Other							
15			Residential							
16			Commercial							
17			Other							
18										
19			У							
20			dical supplies							
21										
22			acts							
23			cimens							
24			artifacts							
25		er 🕨	()							
26	Oth	er 🕨	()							
27	Oth	er 🕨	()							
28	Oth	er 🕨	()							
29			rms 8283 received by the organi	zation durin	g the tax year for c	contributions				
	for v	which the	organization completed Form 82	83, Part IV, I	Donee Acknowled	gement 29				
									Yes	No
30a	Dur	ing the yea	ar, did the organization receive b	y contributio	on any property rep	oorted in Part I, lines 1 throug	gh 28, that it			
			at least three years from the date							
	exe	mpt purpo	ses for the entire holding period	?		·		30a		Х
b	lf "Y	/es," desci	ribe the arrangement in Part II.							
31			nization have a gift acceptance	policy that re	equires the review	of any nonstandard contribu	itions?	31		Х
		-	nization hire or use third parties	•	-	•				
		tributions?			-			32a		Х
b	lf "Y	res," desci	ribe in Part II.							
33	lf th	ie organiza	tion didn't report an amount in c	olumn (c) fo	r a type of propert	y for which column (a) is che	cked,			
	des	cribe in Pa	ırt II.							

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2019

932141 09-27-19

<u>Schedu</u> le M	(Form 990) 20	19 THE	TANZANIA	N CHILDRENS	<u>FUND</u> ,	INC.	74-3	087284	Page 2
Part II	Suppleme	ntal Infor	mation. Provide nn (b), the number	the information required of contributions, the	ired by Part	I, lines 30b, 32	b, and 33, and whet , or a combination of	her the organiz both. Also con	ation
	10						0-1	edule M (Form	
932142 09-27-	13				10		SCh	eaue w (FOrm	1 990) ZU K
L01020	807196	Tanzan	ia7284 2	019.04020	43 THE TAI	NZANIAN	CHILDRENS	FUN TAN	ZANI1

SCHEDULE O (Form 990 or 990-EZ)



74-3087284

Form 990, Part I, Line 1, Description of Organization Mission:

provides a permanent home for 97 children in the Karatu District of

THE TANZANIAN CHILDRENS FUND, INC.

Tanzania, as well as additional community-based programs to improve the

lives of children and their families.

Form 990, Part III, Line 1, Description of Organization Mission:

families.

Form 990, Part VI, Section B, line 11b:

A copy of the form 990 is given to the governing body for review prior to

submittal of the return to the Internal Revenue Service

Form 990, Part VI, Section B, Line 12c:

The organization requires each new key employee, officer or director to

review a copy of the "Policy on Conflicts of Interest and Disclosure of

Certain Interests" and to acknowledge in writing that he or she has done

so. Additionally, each key employee, officer or director, annually

complete a disclusure form identifying any relationships, positions or

circumstances in which the employee is involved that he or she believes

could contribute to a conflict of interest arising.

Form 990, Part VI, Section B, Line 15:

The Board of Directors establishes the compensation for the Officers or key employees that is within the range of organizations similar in size and scope to the Tanzanian Children's Fund.

LHAFor Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.Schedule O (Form 990 or 990-EZ) (2019)93221109-06-19

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This p	rocess	has	not	chang	red s	ince the	e pri	or year	r.				
32212 09-06-1	9									Sched	ule Q (Fo	rm 990 (or 990-EZ) (
							45						TANZAN

inspection upon request

Form 990, Part VI, Section C, Line 19:

Schedule O (Form 990 or 990-EZ) (2019)

Name of the organization

All organization's related documents are made available for public