

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

- Do not enter Social Security numbers on this form as it may be made public.
Information about Form 990 and its instructions is at www.irs.gov/form990.

2013

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the 2013 calendar year, or tax year beginning 7/01, 2013, and ending 6/30, 2014

B Check if applicable

- ☐ Address change
☐ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

C
AMISTADES INC
680 W PRINCE RD #110
TUCSON, AZ 85705

D Employer Identification Number

20-5274049

E Telephone number

520-882-8777

G Gross receipts \$ 557,693.

F Name and address of principal officer

SAME AS C ABOVE

H(a) Is this a group return for subordinates? Yes ☒ No ☐H(b) Are all subordinates included? Yes ☐ No ☐
If 'No,' attach a list (see instructions)I Tax-exempt status ☒ 501(c)(3) ☐ 501(c) () (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: WWW.AMISTADESINC.ORG

H(c) Group exemption number

K Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other L Year of formation 2006 M State of legal domicile AZ

Part I Summary

| | | | | | |
|-----------------------------|----------|---|--|-----------------------------------|----------------------|
| Activities & Governance | 1 | Briefly describe the organization's mission or most significant activities: <u>AMISTADES, INC. (AMISTADES) IS A LATINO-LED, LATINO-SERVING, 501(C)3 NON-PROFIT COMMUNITY DEVELOPMENT ORGANIZATION SERVING PIMA COUNTY AND SOUTHERN ARIZONA. THE MISSION OF AMISTADES IS TO PROVIDE CULTURALLY COMPETENT PREVENTION, EDUCATION AND SOCIAL SERVICES TO LATINO</u> | | | |
| | 2 | Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets. | | | |
| | 3 | Number of voting members of the governing body (Part VI, line 1a) | 3 | 7 | |
| | 4 | Number of independent voting members of the governing body (Part VI, line 1b) | 4 | 5 | |
| | 5 | Total number of individuals employed in calendar year 2013 (Part V, line 2a) | 5 | 5 | |
| | 6 | Total number of volunteers (estimate if necessary) | 6 | 50 | |
| | 7a | Total unrelated business revenue from Part VIII, column (C), line 12 | 7a | 0. | |
| | 7b | Net unrelated business taxable income from Form 990-T, line 34 | 7b | 0. | |
| Revenue | 8 | Contributions and grants (Part VIII, line 1h) | Prior Year 386,647. | Current Year 557,693. | |
| | 9 | Program service revenue (Part VIII, line 2g) | | | |
| | 10 | Investment income (Part VIII, column (A), lines 3, 4, and 7d) | | | |
| | 11 | Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | | | |
| | 12 | Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) | 386,647. | 557,693. | |
| | Expenses | 13 | Grants and similar amounts paid (Part IX, column (A), lines 1-3) | 1,350. | 1,925. |
| 14 | | Benefits paid to or for members (Part IX, column (A), line 4) | | | |
| 15 | | Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) | 219,611. | 239,827. | |
| 16a | | Professional fundraising fees (Part IX, column (A), line 11e) | | | |
| 16b | | Total fundraising expenses (Part IX, column (D), line 25) | 30,141. | | |
| 17 | | Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) | 158,729. | 148,378. | |
| 18 | | Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) | 379,690. | 390,130. | |
| 19 | | Revenue less expenses. Subtract line 18 from line 12 | 6,957. | 167,563. | |
| Not Assets or Fund Balances | | 20 | Total assets (Part X, line 16) | Beginning of Current Year 63,499. | End of Year 235,538. |
| | | 21 | Total liabilities (Part X, line 26) | 637. | 5,113. |
| | 22 | Net assets or fund balances. Subtract line 21 from line 20 | 62,862. | 230,425. | |

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: Ricardo M Jasso Signature of officer Date 11/14/14
Type or print name and title: PRESIDENT & CEO

Paid Preparer Use Only: Print/Type preparer's name: ALEXANDRA L MILLER CPA Preparer's signature: Alexandra Miller Date: 11/14/14 Check ☐ if self-employed PTIN: P00178486
Firm's name: ALEXANDRA L. MILLER, CPA, P.C. Firm's EIN: 86-0957133
Firm's address: 7403 E TANQUE VERDE RD Phone no: (520) 721-5000
TUCSON, AZ 85715-3477

May the IRS discuss this return with the preparer shown above? (see instructions) Yes ☒ No ☐

BAA For Paperwork Reduction Act Notice, see the separate instructions.

TEEA0113L 11/08/13

Form 990 (2013)

917

1

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☒ **X****1** Briefly describe the organization's mission.

SEE SCHEDULE O

2 Did the organization undertake any significant program services during the year which were not listed on the priorForm 990 or 990-EZ? ☐ Yes ☒ No

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? ☐ Yes ☒ No

If 'Yes,' describe these changes on Schedule O.

4 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 and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.**4a** (Code:) (Expenses \$ 272,976. including grants of \$) (Revenue \$)

SEE SCHEDULE O

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)**4c** (Code:) (Expenses \$ including grants of \$) (Revenue \$)**4d** Other program services. (Describe in Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ▶ 272,976.

Part IV Checklist of Required Schedules

| | 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. | X | |
| 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? | X | |
| 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I. | | 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. | | 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. | | 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. | | 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. | | X |
| 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III. | | 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. | | X |
| 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V. | | X |
| 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. | | |
| a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI. | X | |
| 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. | | X |
| c 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. | | 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 Part X, line 16? If 'Yes,' complete Schedule D, Part IX. | | X |
| e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X. | X | |
| f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X. | | X |
| 12a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII. | | X |
| 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. | | X |
| 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E. | | X |
| 14a Did the organization maintain an office, employees, or agents outside of the United States? | | X |
| b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV. | | X |
| 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV. | | X |
| 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. | | 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 (see instructions). | | X |
| 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II. | | X |
| 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III. | | X |
| 20a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H. | | X |
| b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return? | | |

Part IV Checklist of Required Schedules (continued)

| | Yes | No |
|--|-----|----|
| 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organizations or government on Part IX, column (A), line 1? <i>If 'Yes,' complete Schedule I, Parts I and II.</i> | | X |
| 22 Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If 'Yes,' complete Schedule I, Parts I and III.</i> | | 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? <i>If 'Yes,' complete Schedule J.</i> | | 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? <i>If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,' go to line 25a</i> | | X |
| 24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | | |
| 24c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? | | |
| 24d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? | | |
| 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If 'Yes,' complete Schedule L, Part I</i> | | X |
| 25b 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? <i>If 'Yes,' complete Schedule L, Part I</i> | | X |
| 26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If so, complete Schedule L, Part II</i> | | X |
| 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If 'Yes,' complete Schedule L, Part III</i> | | 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): | | |
| 28a A current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV</i> | | X |
| 28b A family member of a current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV</i> | | X |
| 28c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If 'Yes,' complete Schedule L, Part IV</i> | | X |
| 29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If 'Yes,' complete Schedule M</i> | | X |
| 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i> | | X |
| 31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If 'Yes,' complete Schedule N, Part I</i> | | X |
| 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If 'Yes,' complete Schedule N, Part II</i> | | 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? <i>If 'Yes,' complete Schedule R, Part I</i> | | X |
| 34 Was the organization related to any tax-exempt or taxable entity? <i>If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1.</i> | | X |
| 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? | | X |
| 35b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If 'Yes,' complete Schedule R, Part V, line 2.</i> | | |
| 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If 'Yes,' complete Schedule R, Part V, line 2</i> | | 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? <i>If 'Yes,' complete Schedule R, Part VI.</i> | | 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 | X | |

BAA

Form 990 (2013)

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

| | | Yes | No |
|--|---------------|-----|----|
| 1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable | 1 a 12 | | |
| b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable | 1 b 0 | | |
| c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? | 1 c | | X |
| 2 a 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 | 2 a 5 | | |
| b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? | 2 b | X | |
| Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) | | | |
| 3 a Did the organization have unrelated business gross income of \$1,000 or more during the year? | 3 a | | X |
| b If 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O | 3 b | | |
| 4 a 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)? | 4 a | | X |
| b If 'Yes,' enter the name of the foreign country: ▶ See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. | | | |
| 5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | 5 a | | X |
| b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5 b | | X |
| c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T? | 5 c | | |
| 6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? | 6 a | | X |
| b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? | 6 b | | |
| 7 Organizations that may receive deductible contributions under section 170(c). | | | |
| 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? | 7 a | | X |
| b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? | 7 b | | |
| c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? | 7 c | | X |
| d If 'Yes,' indicate the number of Forms 8282 filed during the year. | 7 d | | |
| e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | 7 e | | X |
| f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 7 f | | X |
| g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? | 7 g | | |
| h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? | 7 h | | |
| 8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? | 8 | | X |
| 9 Sponsoring organizations maintaining donor advised funds. | | | |
| a Did the organization make any taxable distributions under section 4966? | 9 a | | |
| b Did the organization make a distribution to a donor, donor advisor, or related person? | 9 b | | |
| 10 Section 501(c)(7) organizations. Enter: | | | |
| a Initiation fees and capital contributions included on Part VIII, line 12 | 10 a | | |
| b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities | 10 b | | |
| 11 Section 501(c)(12) organizations. Enter: | | | |
| a Gross income from members or shareholders | 11 a | | |
| b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) | 11 b | | |
| 12 a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? | 12 a | | |
| b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year | 12 b | | |
| 13 Section 501(c)(29) qualified nonprofit health insurance issuers. | | | |
| a Is the organization licensed to issue qualified health plans in more than one state? | 13 a | | |
| 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 | 13 b | | |
| c Enter the amount of reserves on hand | 13 c | | |
| 14 a Did the organization receive any payments for indoor tanning services during the tax year? | 14 a | | X |
| b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O | 14 b | | |

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 in Schedule O. See instructions.

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

☒**Section A. Governing Body and Management**

| | Yes | No |
|--|-------------------------------------|-------------------------------------|
| 1 a Enter the number of voting members of the governing body at the end of the tax year 1 a 7 | | |
| 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 in Schedule O. | | |
| b Enter the number of voting members included in line 1a, above, who are independent 1 b 5 | | |
| 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee? SEE SCHEDULE O | <input checked="" type="checkbox"/> | |
| 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? | | <input checked="" type="checkbox"/> |
| 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? | | <input checked="" type="checkbox"/> |
| 5 Did the organization become aware during the year of a significant diversion of the organization's assets? | | <input checked="" type="checkbox"/> |
| 6 Did the organization have members or stockholders? | | <input checked="" type="checkbox"/> |
| 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? | | <input checked="" type="checkbox"/> |
| b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body? | | <input checked="" type="checkbox"/> |
| 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: | | |
| a The governing body? | <input checked="" type="checkbox"/> | |
| b Each committee with authority to act on behalf of the governing body? | | <input checked="" type="checkbox"/> |
| 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O | | <input checked="" type="checkbox"/> |

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

| | Yes | No |
|--|-------------------------------------|-------------------------------------|
| 10 a Did the organization have local chapters, branches, or affiliates? | | <input checked="" type="checkbox"/> |
| b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? | | |
| 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? | <input checked="" type="checkbox"/> | |
| b Describe in Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O | | |
| 12 a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 | <input checked="" type="checkbox"/> | |
| b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | <input checked="" type="checkbox"/> | |
| c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done | <input checked="" type="checkbox"/> | |
| 13 Did the organization have a written whistleblower policy? | <input checked="" type="checkbox"/> | |
| 14 Did the organization have a written document retention and destruction policy? | <input checked="" type="checkbox"/> | |
| 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? | | |
| a The organization's CEO, Executive Director, or top management official SEE SCHEDULE O | <input checked="" type="checkbox"/> | |
| b Other officers of key employees of the organization | | <input checked="" type="checkbox"/> |
| If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.) | | |
| 16 a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? | | <input checked="" type="checkbox"/> |
| b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? | | |

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶ AZ

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.

☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. **SEE SCHEDULE O**

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization:

▶ AMISTADES, INC 680 W. PRINCE ROAD #110 TUCSON AZ 85705 520-882-8777

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck 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****1 a** 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.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees, and former such persons.

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

| (A) Name and Title | (B) Average hours per week (list any hours for related organizations below dotted line) | (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) | | | | | | (D) Reportable compensation from the organization (W-2/1099-MISC) | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|--|--|---|-----------------------|---------|--------------|------------------------------|--------|--|---|---|
| | | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| (1) CARLOS GONZALEZ CHAIRMAN | 0 0 | X | | X | | | | 0. | 0. | 0. |
| (2) F. GRANILLO-MENDIVIL DIRECTOR | 0 0 | X | | | | | | 0. | 0. | 0. |
| (3) FRANCESCA LOMONACO SECRETARY | 0 0 | X | | X | | | | 0. | 0. | 0. |
| (4) RENE SALGADO DIRECTOR | 0 0 | X | | | | | | 0. | 0. | 0. |
| (5) STEVE TORRES TREASURER | 0 0 | X | | X | | | | 0. | 0. | 0. |
| (6) MANUEL MEDINA DIRECTOR | 0 0 | X | | | | | | 0. | 0. | 0. |
| (7) RICARDO M JASSO PRESIDENT & CEO | 40 0 | | | X | | | | 90,754. | 0. | 13,858. |
| (8) C. JASSO-STEVENSON COO | 40 0 | | | X | | | | 45,134. | 0. | 0. |
| (9) _____ | _____ _____ | | | | | | | | | |
| (10) _____ | _____ _____ | | | | | | | | | |
| (11) _____ | _____ _____ | | | | | | | | | |
| (12) _____ | _____ _____ | | | | | | | | | |
| (13) _____ | _____ _____ | | | | | | | | | |
| (14) _____ | _____ _____ | | | | | | | | | |

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

| (A) Name and title | (B) Average hours per week (list any hours for related organizations below dotted line) | (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) | | | | | | (D) Reportable compensation from the organization (W-2/1099-MISC) | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|--|--|---|-----------------------|---------|--------------|------------------------------|----------|--|---|---|
| | | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| (15) ----- | | | | | | | | | | |
| (16) ----- | | | | | | | | | | |
| (17) ----- | | | | | | | | | | |
| (18) ----- | | | | | | | | | | |
| (19) ----- | | | | | | | | | | |
| (20) ----- | | | | | | | | | | |
| (21) ----- | | | | | | | | | | |
| (22) ----- | | | | | | | | | | |
| (23) ----- | | | | | | | | | | |
| (24) ----- | | | | | | | | | | |
| (25) ----- | | | | | | | | | | |
| 1 b Sub-total | | | | | | | 135,888. | 0. | 13,858. | |
| c Total from continuation sheets to Part VII, Section A | | | | | | | 0. | 0. | 0. | |
| d Total (add lines 1b and 1c) | | | | | | | 135,888. | 0. | 13,858. | |

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **0**

3 Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? *If 'Yes,' complete Schedule J for such individual*

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? *If 'Yes' complete Schedule J for such individual*

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If 'Yes,' complete Schedule J for such person*

| | Yes | No |
|----------|-----|----|
| 3 | | X |
| 4 | | X |
| 5 | | X |

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

| (A) Name and business address | (B) Description of services | (C) Compensation |
|----------------------------------|--------------------------------|---------------------|
| | | |
| | | |
| | | |
| | | |

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **0**

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☐

| | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512-514 | |
|---|--|---|--|---|--|--|
| CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS | 1 a Federated campaigns | 1 a | | | | |
| | b Membership dues | 1 b | | | | |
| | c Fundraising events | 1 c | | | | |
| | d Related organizations | 1 d | | | | |
| | e Government grants (contributions) | 1 e | 419,316. | | | |
| | f All other contributions, gifts, grants, and similar amounts not included above | 1 f | 138,377. | | | |
| | g Noncash contributions included in lines 1a-1f: \$ | | | | | |
| | h Total. Add lines 1a-1f | | 557,693. | | | |
| PROGRAM SERVICE REVENUE | Business Code | | | | | |
| | 2 a | | | | | |
| | b | | | | | |
| | c | | | | | |
| | d | | | | | |
| | e | | | | | |
| | f All other program service revenue | | | | | |
| | g Total. Add lines 2a-2f | | | | | |
| OTHER REVENUE | 3 Investment income (including dividends, interest and other similar amounts) | | | | | |
| | 4 Income from investment of tax-exempt bond proceeds | | | | | |
| | 5 Royalties | | | | | |
| | 6 a Gross rents | (i) Real | | | | |
| | | (ii) Personal | | | | |
| | | b Less: rental expenses | | | | |
| | | c Rental income or (loss) | | | | |
| | d Net rental income or (loss) | | | | | |
| | 7 a Gross amount from sales of assets other than inventory | (i) Securities | | | | |
| | | (ii) Other | | | | |
| | | b Less: cost or other basis and sales expenses | | | | |
| | | c Gain or (loss) | | | | |
| | d Net gain or (loss) | | | | | |
| | 8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 | a | | | | |
| | | b Less: direct expenses | b | | | |
| | | c Net income or (loss) from fundraising events | | | | |
| | 9 a Gross income from gaming activities. See Part IV, line 19 | a | | | | |
| | | b Less: direct expenses | b | | | |
| | | c Net income or (loss) from gaming activities | | | | |
| | 10 a Gross sales of inventory, less returns and allowances | a | | | | |
| b Less: cost of goods sold | | b | | | | |
| c Net income or (loss) from sales of inventory | | | | | | |
| Miscellaneous Revenue | | Business Code | | | | |
| 11 a | | | | | | |
| b | | | | | | |
| c | | | | | | |
| d All other revenue | | | | | | |
| e Total. Add lines 11a-11d | | | | | | |
| 12 Total revenue. See instructions | | 557,693. | 0. | 0. | 0. | |

Part IX Statement of Functional Expenses

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

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

| Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
|---|-----------------------|---------------------------------|--|-----------------------------|
| 1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21 | 1,925. | 1,925. | | |
| 2 Grants and other assistance to individuals in the United States. See Part IV, line 22 | | | | |
| 3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16 | | | | |
| 4 Benefits paid to or for members | | | | |
| 5 Compensation of current officers, directors, trustees, and key employees | 135,888. | 69,711. | 41,989. | 24,188. |
| 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) | 0. | 0. | 0. | 0. |
| 7 Other salaries and wages | 70,014. | 56,711. | 13,303. | |
| 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) | | | | |
| 9 Other employee benefits | 16,516. | 13,378. | 2,312. | 826. |
| 10 Payroll taxes | 17,409. | 11,316. | 5,223. | 870. |
| 11 Fees for services (non-employees): | | | | |
| a Management | | | | |
| b Legal | 100. | | 100. | |
| c Accounting | 14,341. | 1,434. | 12,907. | |
| d Lobbying | | | | |
| e Professional fundraising services. See Part IV, line 17 | | | | |
| f Investment management fees | | | | |
| g Other. (If line 11g amt exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) SCH O | 43,674. | 38,194. | 2,010. | 3,470. |
| 12 Advertising and promotion | 6,014. | 6,014. | | |
| 13 Office expenses | 15,462. | 13,916. | 1,546. | |
| 14 Information technology | 6,505. | 5,204. | 1,301. | |
| 15 Royalties | | | | |
| 16 Occupancy | 20,429. | 16,343. | 4,086. | |
| 17 Travel | 15,740. | 14,166. | 787. | 787. |
| 18 Payments of travel or entertainment expenses for any federal, state, or local public officials | | | | |
| 19 Conferences, conventions, and meetings | 9,630. | 9,630. | | |
| 20 Interest | | | | |
| 21 Payments to affiliates | | | | |
| 22 Depreciation, depletion, and amortization | 3,217. | 2,574. | 643. | |
| 23 Insurance | 3,819. | 3,819. | | |
| 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) | | | | |
| a PROGRAM EXPENSES | 4,277. | 4,277. | | |
| b PROGRAM MATERIALS | 3,155. | 3,155. | | |
| c PRINTING AND PUBLICATIONS | 2,015. | 1,209. | 806. | |
| d | | | | |
| e All other expenses | | | | |
| 25 Total functional expenses. Add lines 1 through 24e. | 390,130. | 272,976. | 87,013. | 30,141. |
| 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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720) | | | | |

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part X ☐

| | | (A) Beginning of year | | (B) End of year |
|--|---|--------------------------|-------------|--------------------|
| ASSETS | 1 Cash — non-interest-bearing | 29,533. | 1 | 201,134. |
| | 2 Savings and temporary cash investments. | | 2 | |
| | 3 Pledges and grants receivable, net | 15,032. | 3 | 18,137. |
| | 4 Accounts receivable, net | | 4 | |
| | 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L | | 5 | |
| | 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L | | 6 | |
| | 7 Notes and loans receivable, net | | 7 | |
| | 8 Inventories for sale or use | | 8 | |
| | 9 Prepaid expenses and deferred charges | | 9 | |
| | 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D | 10a 19,561. | | |
| | b Less: accumulated depreciation | 10b 9,794. | 10c 12,434. | 9,767. |
| | 11 Investments — publicly traded securities | | 11 | |
| | 12 Investments — other securities. See Part IV, line 11. | | 12 | |
| | 13 Investments — program-related. See Part IV, line 11. | | 13 | |
| | 14 Intangible assets | | 14 | |
| | 15 Other assets. See Part IV, line 11 | 6,500. | 15 | 6,500. |
| 16 Total assets. Add lines 1 through 15 (must equal line 34). | 63,499. | 16 | 235,538. | |
| LIABILITIES | 17 Accounts payable and accrued expenses | 637. | 17 | 5,112. |
| | 18 Grants payable | | 18 | |
| | 19 Deferred revenue | | 19 | |
| | 20 Tax-exempt bond liabilities | | 20 | |
| | 21 Escrow or custodial account liability. Complete Part IV of Schedule D. | | 21 | |
| | 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L | | 22 | |
| | 23 Secured mortgages and notes payable to unrelated third parties. | | 23 | |
| | 24 Unsecured notes and loans payable to unrelated third parties | | 24 | |
| | 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D | | 25 | 1. |
| | 26 Total liabilities. Add lines 17 through 25 | 637. | 26 | 5,113. |
| NET ASSETS OR FUND BALANCES | Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34. | | | |
| | 27 Unrestricted net assets. | 62,862. | 27 | 898. |
| | 28 Temporarily restricted net assets | | 28 | 229,527. |
| | 29 Permanently restricted net assets | | 29 | |
| | Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34. | | | |
| | 30 Capital stock or trust principal, or current funds | | 30 | |
| | 31 Paid-in or capital surplus, or land, building, or equipment fund | | 31 | |
| | 32 Retained earnings, endowment, accumulated income, or other funds | | 32 | |
| | 33 Total net assets or fund balances | 62,862. | 33 | 230,425. |
| 34 Total liabilities and net assets/fund balances | 63,499. | 34 | 235,538. | |

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Form 990 (2013)

Part XI Reconciliation of Net AssetsCheck 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 | 557,693. |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | 390,130. |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | 167,563. |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | 62,862. |
| 5 | Net unrealized gains (losses) on investments | 5 | |
| 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 in Schedule O) | 9 | 0. |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) | 10 | 230,425. |

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐1 Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other _____

If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.

2a Were the organization's financial statements compiled or reviewed by an independent accountant? ..

If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:

☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis

b Were the organization's financial statements audited by an independent accountant? ..

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:

☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis

c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? ..

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? ..

b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits ..

| | Yes | No |
|----|-----|----|
| | | |
| 2a | X | |
| | | |
| 2b | | X |
| | | |
| 2c | | X |
| | | |
| 3a | | X |
| | | |
| 3b | | |

BAA

Form 990 (2013)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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.

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization

AMISTADES INC

Employer identification number

20-5274049

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 ☐ A church, convention of churches or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 ☐ A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 ☒ An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions – subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
- a ☐ Type I b ☐ Type II c ☐ Type III – Functionally integrated d ☐ Type III – Non-functionally integrated
- e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**.
- f ☐ If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box.
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

- (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
- (ii) A family member of a person described in (i) above?
- (iii) A 35% controlled entity of a person described in (i) or (ii) above?

| | Yes | No |
|------------|-----|----|
| 11 g (i) | | |
| 11 g (ii) | | |
| 11 g (iii) | | |

h Provide the following information about the supported organization(s).

| (i) Name of supported organization | (ii) EIN | (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions)) | (iv) Is the organization in column (i) listed in your governing document? | | (v) Did you notify the organization in column (i) of your support? | | (vi) Is the organization in column (i) organized in the U.S.? | | (vii) Amount of monetary support |
|------------------------------------|----------|---|---|----|--|----|---|----|----------------------------------|
| | | | Yes | No | Yes | No | Yes | No | |
| (A) | | | | | | | | | |
| (B) | | | | | | | | | |
| (C) | | | | | | | | | |
| (D) | | | | | | | | | |
| (E) | | | | | | | | | |
| Total | | | | | | | | | |

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2013

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.)

Section A. Public Support

| Calendar year (or fiscal year beginning in) ▶ | (a) 2009 | (b) 2010 | (c) 2011 | (d) 2012 | (e) 2013 | (f) Total |
|--|----------|----------|----------|----------|----------|-----------|
| 1 Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants'.) | | | | | | |
| 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. | | | | | | |
| 3 The value of services or facilities furnished by a governmental unit to the organization without charge . . . | | | | | | |
| 4 Total. Add lines 1 through 3 | | | | | | |
| 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f). | | | | | | |
| 6 Public support. Subtract line 5 from line 4 | | | | | | |

Section B. Total Support

| Calendar year (or fiscal year beginning in) ▶ | (a) 2009 | (b) 2010 | (c) 2011 | (d) 2012 | (e) 2013 | (f) Total |
|--|----------|----------|----------|----------|----------|--------------------------|
| 7 Amounts from line 4 | | | | | | |
| 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | | | | | | |
| 9 Net income from unrelated business activities, whether or not the business is regularly carried on | | | | | | |
| 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) | | | | | | |
| 11 Total support. Add lines 7 through 10 | | | | | | |
| 12 Gross receipts from related activities, etc (see instructions) | | | | | 12 | |
| 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here | | | | | | <input type="checkbox"/> |

Section C. Computation of Public Support Percentage

| | | |
|---|----|---|
| 14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) | 14 | % |
| 15 Public support percentage from 2012 Schedule A, Part II, line 14 | 15 | % |
| 16a 33-1/3% support test – 2013. If the organization did not check the box on line 13, and the line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/> | | |
| b 33-1/3% support test – 2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/> | | |
| 17a 10%-facts-and-circumstances test – 2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization <input type="checkbox"/> | | |
| b 10%-facts-and-circumstances test – 2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization <input type="checkbox"/> | | |
| 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/> | | |

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

(Complete only if you checked the box on line 9 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.)

Section A. Public Support

| Calendar year (or fiscal yr beginning in) ▶ | (a) 2009 | (b) 2010 | (c) 2011 | (d) 2012 | (e) 2013 | (f) Total |
|--|----------|----------|----------|----------|----------|------------|
| 1 Gifts, grants, contributions and membership fees received. (Do not include any 'unusual grants'.) | 134,932. | 360,447. | 253,510. | 243,499. | 478,949. | 1,471,337. |
| 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose | 19,568. | 68,969. | 136,778. | 143,148. | 78,744. | 447,207. |
| 3 Gross receipts from activities that are not an unrelated trade or business under section 513. | | | | | | 0. |
| 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | 0. |
| 5 The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | 0. |
| 6 Total. Add lines 1 through 5. | 154,500. | 429,416. | 390,288. | 386,647. | 557,693. | 1,918,544. |
| 7a Amounts included on lines 1, 2, and 3 received from disqualified persons. | 0. | 0. | 0. | 0. | 0. | 0. |
| b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year. | 0. | 0. | 0. | 0. | 0. | 0. |
| c Add lines 7a and 7b. | 0. | 0. | 0. | 0. | 0. | 0. |
| 8 Public support (Subtract line 7c from line 6.) | | | | | | 1,918,544. |

Section B. Total Support

| Calendar year (or fiscal yr beginning in) ▶ | (a) 2009 | (b) 2010 | (c) 2011 | (d) 2012 | (e) 2013 | (f) Total |
|--|----------|----------|----------|----------|----------|------------|
| 9 Amounts from line 6 | 154,500. | 429,416. | 390,288. | 386,647. | 557,693. | 1,918,544. |
| 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. | | | | | | 0. |
| b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 | | | | | | 0. |
| c Add lines 10a and 10b. | 0. | 0. | 0. | 0. | 0. | 0. |
| 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on | | | | | | 0. |
| 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) | | | | | | 0. |
| 13 Total Support. (Add lines 9, 10c, 11 and 12.) | 154,500. | 429,416. | 390,288. | 386,647. | 557,693. | 1,918,544. |
| 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/> | | | | | | |

Section C. Computation of Public Support Percentage

| | | |
|---|----|----------|
| 15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f)) | 15 | 100.00 % |
| 16 Public support percentage from 2012 Schedule A, Part III, line 15. | 16 | 100.00 % |

Section D. Computation of Investment Income Percentage

| | | |
|--|----|--------|
| 17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f)) | 17 | 0.00 % |
| 18 Investment income percentage from 2012 Schedule A, Part III, line 17 | 18 | 0.00 % |

- 19a **33-1/3% support tests – 2013.** If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization. ▶ ☒
- b **33-1/3% support tests – 2012.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization. ▶ ☐
- 20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions. ▶ ☐

Part IV

Part IV **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information.
(See instructions).

This image shows a full page of white paper with horizontal dashed lines. The lines are evenly spaced and run across the entire width of the page, providing a guide for handwriting practice. There are no margins, text, or other markings on the paper.

**SCHEDULE D
(Form 990)**

Department of the Treasury
Internal Revenue Service
Name of the organization

Supplemental Financial Statements

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

► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2013

**Open to Public
Inspection**

Employer identification number

AMISTADES INC

20-5274049

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 6.

| | (a) Donor advised funds | (b) Funds and other accounts |
|--|-------------------------|------------------------------|
| 1 Total number at end of year | | |
| 2 Aggregate contributions to (during year) | | |
| 3 Aggregate grants from (during year) | | |
| 4 Aggregate value at end of year | | |

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

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 impermissible private benefit? ☐ Yes ☐ No

Part II Conservation Easements.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

| | |
|--|--|
| <input type="checkbox"/> Preservation of land for public use (e.g., recreation or education) | <input type="checkbox"/> Preservation of an historically important land area |
| <input type="checkbox"/> Protection of natural habitat | <input type="checkbox"/> Preservation of a certified historic structure |
| <input type="checkbox"/> 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 day of the tax year.

| | Held at the End of the Tax Year |
|--|---------------------------------|
| a Total number of conservation easements | 2 a |
| b Total acreage restricted by conservation easements | 2 b |
| c Number of conservation easements on a certified historic structure included in (a) | 2 c |
| d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register | 2 d |

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►

4 Number of states where property subject to conservation easement is located ►

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ►

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ► \$

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and 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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 8.

1 a If the organization elected, as permitted under SFAS 116 (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 SFAS 116 (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:

(i) Revenues included in Form 990, Part VIII, line 1 ► \$

(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 SFAS 116 (ASC 958) relating to these items:

a Revenues included in Form 990, Part VIII, line 1 ► \$

b Assets included in Form 990, Part X ► \$

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a ☒ Public exhibition
 b ☐ Scholarly research
 c ☐ Preservation for future generations
 d ☐ Loan or exchange programs
 e ☐ Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered 'Yes' to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1 a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If 'Yes,' explain the arrangement in Part XIII and complete the following table:

| | Amount |
|-----------------------------------|--------|
| 1 c Beginning balance | |
| 1 d Additions during the year | |
| 1 e Distributions during the year | |
| 1 f Ending balance | |

2 a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If 'Yes,' explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII ☐

Part V Endowment Funds. Complete if the organization answered 'Yes' to Form 990, Part IV, line 10.

| | (a) Current year | (b) Prior year | (c) Two years back | (d) Three years back | (e) Four years back |
|--|------------------|----------------|--------------------|----------------------|---------------------|
| 1 a Beginning of year balance | | | | | |
| b Contributions | | | | | |
| c Net investment earnings, gains, and losses | | | | | |
| d Grants or scholarships | | | | | |
| e Other expenditures for facilities and programs | | | | | |
| f Administrative expenses | | | | | |
| g End of year balance | | | | | |

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment ☐ %
 b Permanent endowment ☐ %
 c Temporarily restricted endowment ☐ %

The percentages in lines 2a, 2b, and 2c should equal 100%

3 a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations
 (ii) related organizations

b If 'Yes' to 3a(ii), are the related organizations listed as required on Schedule R?

| | Yes | No |
|--------|-----|----|
| 3a(i) | | |
| 3a(ii) | | |
| 3b | | |

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

| Description of property | (a) Cost or other basis (investment) | (b) Cost or other basis (other) | (c) Accumulated depreciation | (d) Book value |
|--|--------------------------------------|---------------------------------|------------------------------|----------------|
| 1 a Land | | | | |
| b Buildings | | | | |
| c Leasehold improvements | | | | |
| d Equipment | | 3,456. | 2,019. | 1,437. |
| e Other | | 16,105. | 7,775. | 8,330. |
| Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) | | | | 9,767. |

BAA

Schedule D (Form 990) 2013

Part VII Investments – Other Securities.

N/A

Complete if the organization answered 'Yes' to Form 990, Part IV, line 11b. 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 |
|--|----------------|---|
| (1) Financial derivatives | | |
| (2) Closely-held equity interests | | |
| (3) Other _____ | | |
| (A) _____ | | |
| (B) _____ | | |
| (C) _____ | | |
| (D) _____ | | |
| (E) _____ | | |
| (F) _____ | | |
| (G) _____ | | |
| (H) _____ | | |
| (I) _____ | | |
| Total. (Column (b) must equal Form 990, Part X, column (B) line 12.) ▶ | | |

Part VIII Investments – Program Related.

N/A

Complete if the organization answered 'Yes' to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

| (a) Description of investment type | (b) Book value | (c) Method of valuation: Cost or end-of-year market value |
|--|----------------|---|
| (1) _____ | | |
| (2) _____ | | |
| (3) _____ | | |
| (4) _____ | | |
| (5) _____ | | |
| (6) _____ | | |
| (7) _____ | | |
| (8) _____ | | |
| (9) _____ | | |
| (10) _____ | | |
| Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) ▶ | | |

Part IX Other Assets.

N/A

Complete if the organization answered 'Yes' to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

| (a) Description | (b) Book value |
|---|----------------|
| (1) _____ | |
| (2) _____ | |
| (3) _____ | |
| (4) _____ | |
| (5) _____ | |
| (6) _____ | |
| (7) _____ | |
| (8) _____ | |
| (9) _____ | |
| (10) _____ | |
| Total. (Column (b) must equal Form 990, Part X, column (B), line 15.) ▶ | |

Part X Other Liabilities.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25

| (a) Description of liability | (b) Book value |
|--|----------------|
| (1) Federal income taxes | |
| (2) ROUNDING | 1. |
| (3) _____ | |
| (4) _____ | |
| (5) _____ | |
| (6) _____ | |
| (7) _____ | |
| (8) _____ | |
| (9) _____ | |
| (10) _____ | |
| (11) _____ | |
| Total. (Column (b) must equal Form 990, Part X, column (B) line 25.) ▶ | |

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII ☐

Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

Part XIII Supplemental Information.

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.

[illegible]

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZ

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

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is
at www.irs.gov/form990.

OMB No. 1545-0047

2013

Open to Public
Inspection

Employer identification number

AMISTADES INC

20-5274049

FORM 990, PART III, LINE 4A-PROGRAM SERVICE ACCOMPLISHMENTS

FEDERAL GRANTS

DRUG FREE COMMUNITIES SUPPORT PROGRAM

SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION

CENTER FOR SUBSTANCE ABUSE PREVENTION

AMISTADES MANAGES THE AMISTADES SUBSTANCE ABUSE COALITION, A COMMUNITY-DRIVEN GROUP THAT PROVIDES SUBSTANCE ABUSE PREVENTION IN THE FLOWING WELLS AREA. THE COALITION, IN COLLABORATION WITH A CROSS-SECTOR OF COMMUNITY PARTNERS, ADDRESSES THE PROBLEM OF UNDERAGE DRINKING AND MARIJUANA, TOBACCO, AND PRESCRIPTION DRUG USE AMONG LATINO YOUTH. A VISION TO CREATE HEALTHY, PRODUCTIVE, SAFE, AND DRUG-FREE COMMUNITIES IS THE DRIVING FORCE BEHIND THE COALITION IMPLEMENTATION OF A SUSTAINABLE PREVENTION INFRASTRUCTURE FOR THEIR COMMUNITY. THE COALITION HAS DISSEMINATED OVER 15,400 PIECES OF PREVENTION MATERIAL ON UNDERAGE DRINKING, SOCIAL HOST ORDINANCES, MARIJUANA, AND PRESCRIPTION DRUGS, SYNTHETIC DRUGS, AND OTHER PREVENTION MATERIALS.

STRATEGIES & ACTIVITIES

DISSEMINATION OF CURRENT DATA

THE AMISTADES SUBSTANCE ABUSE COALITION (ASAC) REGULARLY PROVIDED EDUCATIONAL ARTICLES ABOUT THE RISKS AND HARMS OF UNDERAGE DRINKING, MARIJUANA AND PRESCRIPTION DRUGS AT EVERY COALITION MEETING TO PROVIDE UP TO DATE AND SCIENTIFIC INFORMATION. EVERY MONTH, MEMBERS WERE PROVIDED WITH RELEVANT LOCAL, STATE, AND NATIONAL DRUG PREVENTION & AWARENESS ISSUES. THERE WERE 20 ENGLISH AND SPANISH ARTICLES

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DISSEMINATED AT EACH MEETING. PARENTS WERE TRAINED IN THE MARIJUANA 360 CURRICULUM AND BECAME BETTER EQUIPPED TO PROVIDE OTHER PARENTS WITH ADVICE AND KNOWLEDGE ABOUT TALKING TO THEIR KIDS ABOUT THE CONSEQUENCES AND IMPACTS OF USING MARIJUANA. COALITION MEMBERS WERE SUCCESSFUL IN BUILDING CAPACITY IN THE THREE AFOREMENTIONED AREAS AND PROVIDING THE FLOWING WELLS COMMUNITY WITH SOCIAL HOST AWARENESS ARTICLES, BROCHURES, AND PAMPHLETS.

SOCIAL HOST PARENT PLEDGES

THE COALITION COLLECTED OVER 2,000 PARENT PLEDGES (AN OATH STATING PARENTS WILL NOT SERVE ALCOHOL TO THEIR YOUTH IN THEIR HOME) THROUGH SEVERAL OUTLETS, SUCH AS, INFORMATION DISSEMINATION TO ELEMENTARY SCHOOLS, COMMUNITY AND SCHOOL FESTIVALS, AND NEIGHBORHOOD CANVASSING. THE COALITION PARTNERED WITH CENTENNIAL ELEMENTARY SCHOOL, TO PROVIDE NEEDY FAMILIES WITH TURKEYS FOR THANKSGIVING. OVER 25 TURKEYS WERE DONATED BY ASAC MEMBERS TO FAMILIES WHO ENTERED A SOCIAL HOST PARENT PLEDGE RAFFLE. ALL THE FAMILIES NEEDED TO ENTER THE RAFFLE WAS TO SUBMIT A PARENT PLEDGE STATING THAT THEY WOULD HAVE A CONVERSATION WITH THEIR FAMILIES ABOUT THE RISKS OF UNDERAGE DRINKING AND A PROMISE TO NOT SERVE ALCOHOL TO MINORS IN THEIR HOMES. OVER 50 PARENTS ENTERED AND 26 TOOK A TURKEY HOME FOR THANKSGIVING DINNER.

FAMILIAS EN CAMINO PARENT ADVOCACY GROUP

THE PARENT COMPONENT OF THE COALITION, FAMILIAS EN CAMINO, BUILT CAPACITY IN THEIR ADVOCACY OF UNDERAGE DRINKING PREVENTION. PARENTS RECEIVED ONGOING TRAININGS BEGINNING ON SOCIAL HOST LAWS, LIQUOR LICENSE VENDING, AND HOW TO CONDUCT AN ENVIRONMENTAL SCAN TO REDUCE ALCOHOL OUTLET DENSITY. PARENT VOLUNTEERS FROM FAMILIAS EN CAMINO SCANNED THE NEIGHBORHOOD FOR ALCOHOL OUTLETS THAT HAD EXCESSIVE

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ADVERTISEMENT IN THEIR BUSINESSES, INCLUDING BARS, GROCERIES STORES, CONVENIENCE

STORES, AND RESTAURANTS. PARENTS TOOK PHOTOS OF THE INSIDE AND OUTSIDE

ADVERTISEMENTS (INCLUDING A BILLBOARD SURVEY) TO ENSURE THAT THESE BUSINESSES WERE

IN COMPLIANCE WITH COUNTY AND CITY SIGNAGE ORDINANCE. PARENTS REPORTED ANY LIQUOR

LICENSE VENDOR WITH EXCESSIVE SIGNAGE TO BOTH CITY AND COUNTY INVESTIGATORS, IN HOPE

THAT THE CODE ENFORCERS WOULD FORCE THE BUSINESSES TO TAKE DOWN THEIR SIGNAGE WITH

THE OVERALL PURPOSE OF REDUCING ACCESS TO ALCOHOL TO YOUTH.

LEADERSHIP AND ADVOCACY COUNCIL

THE AMISTADES YOUTH COALITION AT FLOWING WELLS HIGH SCHOOL SERVES AS THE LEADERSHIP

AND ADVOCACY COUNCIL. THE COUNCIL HAS MET 35 TIMES THROUGHOUT THE ACADEMIC YEAR,

FOCUSING ON A PUBLIC AWARENESS INITIATIVE AIMED TO REDUCE THE USE AND ABUSE OF

UNDERAGE DRINKING AMONGST HIGH SCHOOL STUDENTS. THE YOUTH PARTICIPATED IN PLANNING

EVENTS SUCH AS THE NIDA NATIONAL DRUG FACT WEEK. DURING DRUG FACT WEEK STUDENTS

PREPARED A DRUG FACT JEOPARDY-LIKE GAME, WHERE STUDENTS IN HEALTH CLASSES HAD TO

ANSWER QUESTIONS REGARDING UNDERAGE DRINKING, MARIJUANA AND PRESCRIPTION DRUGS FACTS

AND STATISTICS. THE LEADERSHIP AND ADVOCACY COUNCIL PARTICIPATED IN THE CITYWIDE

STICK SHOCK CAMPAIGN. THE STUDENTS WENT TO THREE LIQUOR LICENSE ESTABLISHMENTS AND

POSTED STICKERS SAYING "DO NOT SELL ALCOHOL TO MINORS" IN ENGLISH AND SPANISH IN ORDER

TO INCREASE AWARENESS ABOUT PURCHASING ALCOHOL FOR MINORS. THE STUDENTS POSTED OVER

200 STICKERS AT SUPER H LIQUOR STORE ON RUTHRAUFF, EL HERRADERO ON PRINCE, AND FP

FOOD STORE ON FAIRVIEW AND MIRACLE MILE WITH THE OVERALL GOAL THAT ADULTS THINK

TWICE BEFORE PURCHASING ALCOHOL FOR A MINOR. THE COUNCIL ALSO WORKED TO REDUCE THE

USE AND ABUSE OF MARIJUANA AND AMONG HIGH SCHOOL STUDENTS. THE STUDENTS ADOPTED THE

CLARITY CAMPAIGN USED BY STUDENTS AGAINST DRUNK DRIVING (SADD) GROUPS IN THE STATE.

YOUTH ENHANCED THE CURRICULUM TO BETTER FIT THE NEEDS OF THEIR PEERS. THE LEADERSHIP

Name of the organization

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AND ADVOCACY COUNCIL WORKED IN PARTNERSHIP WITH THE AMISTADES SUBSTANCE ABUSE COALITION TO IDENTIFY AND IMPLEMENT A MARIJUANA EVIDENCED-BEST PRACTICE (CLARITY CAMPAIGN) IN THE COMMUNITY. THEY ALSO WORKED IN COLLABORATION WITH LAW ENFORCEMENT TO ESTABLISH A DATA BASE (MARIJUANA IMPAIRED DRIVING INCIDENTS AND DRUGGED DRIVERS) IN THE TARGET AREA. DATA WAS GATHERED FROM ARIZONA DEPARTMENT OF HEALTH SERVICES, PIMA COUNTY JUVENILE COURT CENTER, AND PIMA COUNTY COUNCIL ON GOVERNMENT. THE LEADERSHIP AND ADVOCACY COUNCIL WILL BE IN CHARGE OF CREATING AND ADOPTING A LOGO AND SLOGAN TO DISTRIBUTE FLIERS AT BUS BENCHES, BILLBOARDS, BUTTONS, BUMPER STICKERS, POSTERS, T-SHIRTS, AND CAPS. USING SOCIAL MEDIA ACCOUNTS, THE COUNCIL WILL ABLE TO SPREAD THE MESSAGE OF THE DANGERS OF MARIJUANA TO THEIR FELLOW PEERS, FAMILIES AND NETWORKS.

TAKE CONTROL LIVE FREE MEDIA ARTS PROGRAM

THE COALITION HAS ALSO IMPLEMENTED THE TAKE CONTROL. LIVE FREE. MEDIA ARTS PROGRAM IN FLOWING WELLS HIGH SCHOOL. THE PROGRAM IS A SCHOOL-BASED TECHNOLOGY INITIATIVE WITH PROVEN SUCCESS. THE GOAL OF THE PROJECT IS TO INCREASE TECHNOLOGY EDUCATION THROUGH A PUBLIC AWARENESS CAMPAIGN EDUCATING STUDENTS AND FAMILIES ABOUT THE RISKS OF SUBSTANCE ABUSE. STUDENTS IN TECHNOLOGY CLASSES COMPETE AGAINST EACH OTHER IN GROUPS TO CREATE, FILM, AND EDIT THEIR OWN PUBLIC SERVICE ANNOUNCEMENTS ON UNDERAGE DRINKING, MARIJUANA AND PRESCRIPTION DRUGS. OVER 80 STUDENTS COMPETED TO CREATE PUBLIC SERVICE ANNOUNCEMENTS ON SUBSTANCE ABUSE. THE PROGRAM EXPANDED TO TWO HIGH SCHOOLS, FLOWING WELLS HIGH SCHOOL AND SUNNYSIDE HIGH SCHOOL WITH 100 STUDENTS COMPETING. THERE WERE 12 OTHER PRESENTATIONS TO STUDENTS AT BOTH SCHOOLS ON MARIJUANA, PRESCRIPTION DRUGS, AND SYNTHETIC DRUGS. WINNERS OF THE CATEGORY, NOW HAVE THEIR PSA'S RUNNING ON LOCAL TELEVISION VIA COMCAST, COX AND AZTECA, REACHING OVER THOUSANDS OF FAMILIES AND YOUTH IN PIMA COUNTY. THE SUCCESS OF THIS PROGRAM

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LED TO A PARTNERSHIP WITH THE DRUG ENFORCEMENT ADMINISTRATION (DEA). AMISTADES
COMBINED FORCES WITH THE DEA TO CREATE OPPORTUNITIES FOR COLLECTIVE IMPACT THROUGH
TECHNOLOGY AND PREVENTION EDUCATION VIA THE TAKE CONTROL LIVE FREE MEDIA ARTS
PROJECT. THE PROJECT IS CO-PRODUCED USING THE VOICE OF THE STUDENTS AND IS KICKED
OFF DURING NATIONAL RED RIBBON WEEK. AGENTS PROVIDED STUDENTS WITH INSIGHT ON THE
SOCIAL, HEALTH AND LEGAL CONSEQUENCES OF ENGAGING IN DRUG USE. THE SPECIAL AGENTS
SHARED FIRST-HAND, IN THE FIELD EXPERIENCES WITH STUDENTS IN CLASSROOM SETTINGS.
STUDENTS WERE ABLE TO INTERACT BY ASKING QUESTIONS AND ENGAGING IN ACTIVITIES WITH
AGENTS. STUDENTS ALSO BENEFITED FROM THE CAREER OPPORTUNITIES INFORMATION THAT THE
DEA SHARED.

ADVANTAGE ACADEMY WORKSHOP SERIES/NATIONAL RED RIBBON WEEK

AMISTADES PARTNERED WITH THE FLOWING WELLS JUNIOR HIGH SCHOOL TO PROVIDE THEIR
ADVANTAGE ACADEMY A SERIES OF 12 PREVENTION WORKSHOPS. THE SERIES OF PREVENTION
WORKSHOPS WAS KICKED OFF DURING NATIONAL RED RIBBON WEEK WITH THE DISTRIBUTION OF
DEA RED RIBBON MATERIALS TO STUDENTS. WORKSHOP TOPICS INCLUDED GOAL SETTING,
PERSONAL CHARACTER BUILDING, TIME MANAGEMENT SKILLS, STUDY SKILLS, DANGERS AND MYTHS
OF ALCOHOL ABUSE, MARIJUANA ABUSE, AND THE HARMS OF MISUSING PRESCRIPTION DRUGS.
COALITION MEMBERS PRESENTED TO STUDENTS ON JUVENILE RIGHTS, SUBSTANCE ABUSE
PREVENTION, AND CAREER OPPORTUNITIES. DURING EVERY WORKSHOP, MATERIALS ON MARIJUANA
AND OTHER SUBSTANCE WERE PASSED OUT TO STUDENTS, AS PART OF THE AWARENESS CAMPAIGN.
STUDENTS FINISHED THEIR ACADEMIC YEAR WITH EXTENSIVE KNOWLEDGE OF UNDERAGE DRINKING
CONSEQUENCES AND A BASIC UNDERSTANDING AND PRACTICE OF REFUSAL SKILLS.

UNDERAGE DRINKING DIVERSION TOWN HALLS

Name of the organization

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AMISTADES PRESENTED A SAMHSA UNDERAGE DRINKING DIVERSION TOWN HALL TO 400 FLOWING
WELLS HIGH SCHOOL STUDENTS. THE US NATIONAL GUARD AND TEEN CHALLENGE SPRING BOARD
STUDENTS PRESENTED THE MEDICAL AND SOCIAL CONSEQUENCES OF UNDERAGE DRINKING TO
STUDENTS. STUDENTS ATTENDING PIMA PARTNERSHIP HIGH SCHOOL PARTICIPATED IN A SECOND
SAMHSA TOWN HALL FOCUSED ON UNDERAGE DRINKING. OVER 70 STUDENTS, AGES 14 TO 18, WERE
PROVIDED WITH PRESENTATIONS FROM YOUTH GOING THROUGH ALCOHOL ADDICTION RECOVERY,
UNDERAGE DRINKING STATISTICS, AND THE LEGAL, SOCIAL, AND HEALTH CONSEQUENCES OF
BECOMING INVOLVED WITH ALCOHOL BEFORE THE AGE OF 21.

PROGRAM SERVICE ACCOMPLISHMENTS-CONTINUED

FEDERAL GRANTS, CONTINUED

YOUTH OUTREACH - TUCSON URBAN LEAGUE

AMISTADES IN-CONJUNCTION WITH THE TUCSON URBAN LEAGUE GAVE AN UNDERAGE DRINKING
THEMED PRESENTATION TO 40 YOUTH AT THE TUCSON URBAN LEAGUE SUMMER YOUTH CAMP.
STUDENTS AGES 14-17 LEARNED ABOUT VARIOUS TOPICS, SUCH AS THE RISKS OF UNDERAGE
DRINKING, DATA AND STATISTICS, AS WELL AS CULTURAL BACKGROUND AND PRIDE. AMISTADES
HOSTED A BOOTH AT THE ANNUAL JUNETEENTH TUCSON CELEBRATION, WHERE HUNDREDS OF
HANDOUTS WITH INFORMATION REGARDING UNDERAGE DRINKING WERE PASSED OUT TO OTHER
STAKEHOLDERS AND PARTICIPANTS IN ATTENDANCE.

4TH OF JULY SAFETY PLEDGE

A SAFETY PLEDGE INITIATIVE ASKING ADULTS NOT TO DRINK AND DRIVE DURING 4TH OF JULY
WEEKEND WAS IMPLEMENTED OVER THE SUMMER MONTHS. OVERALL, THERE WERE 100 PLEDGES
COLLECTED AND OVER 200 FAMILIES AND CHILDREN IN ATTEND VARIOUS COMMUNITY ACTIVITIES.

Name of the organization

AMISTADES INC

Employer identification number

20-5274049

ENVIRONMENTAL SCANS

THE AMISTADES SUBSTANCE ABUSE COALITION CONDUCTED SEVERAL ENVIRONMENTAL SCANS TO

COMBAT THE AMOUNT OF ALCOHOL ADVERTISEMENTS POLLUTING THE FLOWING WELLS COMMUNITY.

BANNERS, POSTERS, AND SIGNS PROMOTING BEER, LIQUOR, AND WINE AND OTHER KINDS OF

ALCOHOL WERE POSTED ON WALLS, DUMPSTERS, AND LIGHT POSTS OF SEVERAL DIFFERENT LIQUOR

LICENSED ESTABLISHMENTS, VIOLATING CHAPTER 3 OF CITY CODE. THESE ALCOHOL

ADVERTISEMENTS ARE REACHING THE YOUTH IN OUR COMMUNITY AND ARE CREATING A SOCIAL

NORM AFFIRMING THAT ALCOHOL IS WELCOME IN OUR NEIGHBORHOODS. THE FAMILIAS EN CAMINO

PARENT ADVOCACY GROUP CONDUCTED SEVERAL ENVIRONMENTAL SCANS, DOCUMENTING THE AMOUNT

OF ALCOHOL ADVERTISEMENTS INSIDE AND OUT OF LIQUOR LICENSED ESTABLISHMENTS TO

CAPTURE THE HIGH VOLUME OF SIGNS. A PRELIMINARY SCAN WAS DONE WITH A FOLLOW UP

CONDUCTED, RESULTING IN AN ABUNDANCE OF ADVERTISEMENTS GEARED TOWARDS LATINO YOUTH.

COALITION MEMBERS AND STAFF CONDUCTED A THIRD ENVIRONMENTAL SCAN TO REPORT ANY

ESTABLISHMENT THAT WAS NOT IN COMPLIANCE WITH CITY OR COUNTY SIGNAGE ORDINANCES.

THE COALITION IDENTIFIED FIVE ESTABLISHMENTS ON PRINCE ROAD, WITHIN CITY LIMITS. THE

FIVE ESTABLISHMENTS WERE REPORTED ONLINE AND GIVEN CASE NUMBERS. ONE OF THE REPORTED

ADDRESSES WAS NOT VALID AND WAS NOT FOLLOWED UP WITH ON THE VIOLATION. THE OTHER

LOCATIONS HAD CASES IN WHICH ENFORCERS HAD CONFRONTED STOREOWNERS ABOUT THE BANNERS

AND THEIR PLACEMENTS. LATER IN THE YEAR, THE SAME LOCATIONS CONTINUED TO PLACE THEIR

BANNERS OUTSIDE THEIR STORES, CONGESTING THE REST OF THEIR PROPERTIES WITH ALCOHOL

ADVERTISEMENTS. AGAIN, A SECOND SCAN WAS COMPLETED AND RESULTED IN THE SAME FIVE

ADDRESSES NOT IN COMPLIANCE. THE ESTABLISHMENTS WERE THEN REPORTED TO CITY CODE

ENFORCERS.

SECOND CHANCE DIVERSION

Name of the organization

AMISTADES INC

Employer identification number

20-5274049

THIS PROGRAM IS A RESULT OF A PUBLIC AWARENESS CAMPAIGN TO SERVE STUDENTS THAT ARE IDENTIFIED AS AT-RISK. THROUGHOUT THE ACADEMIC YEAR, AMISTADES SERVED STUDENTS ON LONG-TERM SUSPENSION, REFERRED FROM FLOWING WELLS HIGH SCHOOL. ALL STUDENTS WERE REFERRED DUE TO MULTIPLE MARIJUANA ISSUES SUCH AS, POSSESSION, POSSESSION OF PARAPHERNALIA, INTENT TO SELL OR INTOXICATION. THE SECOND CHANCE DIVERSION PROGRAM COVERS TOPICS SUCH AS REFUSAL SKILLS, CREATING GOALS, IDENTIFYING NEGATIVE AND POSITIVE INFLUENCES, SELF-REFLECTION, SELF-ASSESSMENTS, AND THE RISKS, DANGERS, AND CONSEQUENCES OF BECOMING INVOLVED WITH SUBSTANCES. ALL TOPICS COVERED WERE IMPLEMENTED TO PROVIDE STUDENTS WITH THE NECESSARY SKILLS TO MAKE BETTER CHOICES ONCE THEY RE-ENTER SCHOOL. ON SEVERAL OCCASIONS, THE NATIONAL GUARD ASSISTED WITH PRESENTATIONS AND PARTICIPATED BY PROVIDING STUDENTS WITH REAL-LIFE CONSEQUENCES OF BECOMING INVOLVED WITH SUBSTANCE ABUSE. THROUGHOUT THE TWO-HOUR LONG PROGRAM, STUDENTS TAKE MULTIPLE SELF-ASSESSMENTS ON PROBLEM-ORIENTED BEHAVIORS AND PAST 30-DAY USE OF SUBSTANCES. TESTS ARE THEN EVALUATED AND ANSWERS ARE SHARED WITH BOTH PARENTS AND THE SCHOOL'S VICE PRINCIPAL. STUDENTS MAY BE REFERRED FOR EXTRA HELP FROM SCHOOL COUNSELORS ON SCHOOL AND FAMILY/HOME ISSUES. MOST STUDENTS RETURN TO SCHOOL AND DO NOT EXPERIENCE FURTHER ISSUES.

DRUG FREE COMMUNITIES MENTORING SUPPORT PROGRAM

SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION

CENTER FOR SUBSTANCE ABUSE PREVENTION

AMISTADES OFFERS CAPACITY BUILDING SERVICES IN THE AREA OF DRUG PREVENTION TO ORGANIZATIONS THAT SUPPORT THE AFRICAN AMERICAN COMMUNITY. CAPACITY BUILDING

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SERVICES HELP ORGANIZATIONS IN THE DEVELOPMENT OF A COALITION-BASED PREVENTION

INFRASTRUCTURE SIMILAR TO THE ONE THAT AMISTADES HAS PUT IN PLACE FOR THE LATINO

POPULATION IT SERVES. THROUGH THESE EFFORTS, AND UNDER THE MENTORSHIP OF THE

AMISTADES SUBSTANCE ABUSE COALITION, THE TUCSON URBAN LEAGUE CREATED THE SOUTH PARK

COMMUNITIES DRUG FREE COALITION TO PROVIDE PREVENTION SERVICES TO THE 85713 AREA AS

WELL AS OTHER PARTS OF PIMA COUNTY. THIS PARTNERSHIP BETWEEN AMISTADES AND THE

TUCSON URBAN LEAGUE IS A RESULT OF A CALL TO ACTION MADE TO THE AFRICAN AMERICAN

COMMUNITY BY AMISTADES DURING THEIR ANNUAL JUNETEENTH YOUTH PREVENTION CONFERENCE

THAT EXAMINES THE IMPACT OF UNDERAGE DRINKING IN THE AFRICAN AMERICAN COMMUNITY.

ENTERING YEAR TWO, THE SOUTH PARK DRUG FREE COMMUNITIES COALITION (SPDFCC) BUILT ON

A FOUNDATION FOR SUCCESS LAID IN THE FIRST YEAR OF EXISTENCE THROUGH A STRONG

RELATIONSHIP WITH ITS MENTOR COALITION. THE AMISTADES SUBSTANCE ABUSE COALITION

(ASAC) WAS WELL EQUIPPED TO EMPOWER PREVENTION EFFORTS IN SOUTH PARK, THROUGH SEVEN

YEARS OF EXPERIENCE WORKING WITH YOUTH AND FAMILIES UNDER A DFC SUPPORT PROGRAM

GRANT IN TUCSON'S HIGH-RISK FLOWING WELLS NEIGHBORHOOD. GUIDING THE SOUTH PARK

COALITION WERE ITS CLEAR VISION AND MISSION, AS WELL AS TRAINING IN EFFECTIVE

COALITION LEADERSHIP AND THE STRATEGIC PREVENTION FRAMEWORK.

STRATEGIES & ACTIVITIES

CROSS SECTOR PARTICIPATION

THE COALITION HELD EFFECTIVE MONTHLY COALITION MEETINGS AT THE TUCSON URBAN LEAGUE,

LOCATED IN THE HEART OF SOUTH PARK. THE PROJECT COORDINATOR OF THE MENTOR COALITION

OR ANOTHER REPRESENTATIVE FROM AMISTADES PARTICIPATED AT EVERY MEETING. 12

WELL-PUBLICIZED COALITION MEETINGS WERE HELD. THE MEETINGS WERE ACTION-ORIENTED WITH

AGENDAS, MINUTES, AND OTHER DOCUMENTATION. IN THE COURSE OF THESE MEETINGS, SPDFCC

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WELCOMED 61 ATTENDEES, REPRESENTING CRITICAL STAKEHOLDERS. CIA FORMS WERE SIGNED REPRESENTING ALL TWELVE SECTORS. PROJECT COORDINATORS OF BOTH THE MENTOR AND MENTEE COALITIONS PRESENTED REGULAR MONTHLY REPORTS TO THEIR MEMBERS ON THE PROGRESS OF THE MENTORING GRANT. DURING MEETINGS, THE MENTEE COALITION REGULARLY RECEIVED INFORMATION TO BUILD THEIR CAPACITY FROM ONDCP, SAMHSA AND CADCA.

CAPACITY BUILDING

OTHER KEY MENTORING ACTIVITIES REFLECTED AMISTADES' COMMITMENT TO INCREASING THE READINESS OF THE SPDFCC TO ADDRESS UNDERAGE DRINKING, MARIJUANA USE AND SYNTHETIC DRUG USE. THESE SUBSTANCE ABUSE PROBLEMS WERE PRIORITIZED, BASED ON BOTH QUALITATIVE AND QUANTITATIVE RESEARCH. TO MEET THE REQUIREMENTS FOR GRADUATION FROM CADCA'S NATIONAL ACADEMY, THE MENTOR AND MENTEE PROJECT COORDINATORS SUBMITTED A COMMUNITY ASSESSMENT PLAN, UNDERAGE DRINKING LOGIC MODEL, STRATEGIC AND ACTION PLAN, EVALUATION PLAN AND SUSTAINABILITY PLAN, WHICH WERE APPROVED WITHOUT CHANGES. CONSEQUENTLY, NATIONAL ACADEMY GRADUATION CERTIFICATES WERE RECEIVED, A PROUD ACHIEVEMENT. AMISTADES WAS REPRESENTED AT CADCA'S MID-YEAR FORUM BY ITS VETCORPS REPRESENTATIVE. AMISTADES PROVIDED TECHNICAL ASSISTANCE IN THE CREATION OF THE 46-PAGE SOUTH PARK COMMUNITY PREVENTION PLAN. THE ORIGINAL PLAN WAS THEN REVISED TO PROVIDE AN EFFECTIVE "ROADMAP" FOR PREVENTION EFFORTS. AMISTADES ALSO PROVIDED TECHNICAL ASSISTANCE IN THE ANALYSIS OF THE EVALUATION TOOL KNOWN AS THE COMMUNITY MOBILIZATION SCORECARD (ADMINISTERED TWICE AT A FIVE MONTH INTERVAL). THE RESULTS WERE USED TO IMPROVE COALITION EFFECTIVENESS. AMISTADES ENABLED FURTHER TRAINING TO OCCUR BY SENDING THE CHAIR OF SPDFCC TO CADCA'S MID-YEAR CONFERENCE. ADDITIONAL CAPACITY-BUILDING ACTIVITIES IN THE PAST AWARD YEAR INCLUDE: CULTURAL COMPETENCY TRAINING AT THE DIVERSE-VOICES-IN-PREVENTION CONFERENCE IN TUCSON AND SUPPORT OF THE 44TH ANNUAL JUNETEENTH CELEBRATION; PARTICIPATION ON A POLICY COMMITTEE DEDICATED TO

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REVISING AND ENFORCING TUCSON'S SOCIAL HOST ORDINANCE. MEMBERS OF THE COMMITTEE MET EVERY 3RD TUESDAY OF THE MONTH WITH REPRESENTATIVES OF THE TUCSON POLICE DEPARTMENT AND OTHERS COMMITTED TO PREVENTING UNDERAGE DRINKING, AND WORKSHOPS ON COALITION EFFECTIVENESS, POSITIVE NORM CAMPAIGNS, AND THE SCIENCE OF BRAIN DEVELOPMENT WERE ATTENDED AT THE MID-YEAR CONFERENCE OF ARIZONANS FOR PREVENTION.

TECHNICAL ASSISTANCE

TO HELP SPDFCC BECOME ELIGIBLE TO APPLY FOR A DFC SUPPORT PROGRAM, AMISTADES OFFERED TECHNICAL ASSISTANCE IN THE APPLICATION PROCESS BY MEETING REGULARLY WITH CHIEF GRANT WRITER DEBORAH EMBRY, CEO OF THE TUCSON URBAN LEAGUE. GUIDANCE WAS PROVIDED IN GATHERING DATA, SECURING LETTERS OF COMMITMENT AND MEMORANDUMS OF UNDERSTANDING, DEVELOPING THE COMMUNITY OVERVIEW AND PROJECT NARRATIVE. THERE WAS ADDITIONAL MENTORING TO SUPPORT THE ESTABLISHMENT OF BUDGETS AND IDENTIFICATION OF IN-KIND DOLLARS. THE TUCSON URBAN LEAGUE WILL SUBMIT THE DFC SUPPORT GRANT APPLICATION IN MARCH 2015. A MEMORANDUM OF UNDERSTANDING WAS SIGNED BETWEEN THE TUCSON URBAN LEAGUE, THE SPDFCC, AND THE AMISTADES SUBSTANCE ABUSE COALITION.

PROGRAM SERVICE ACCOMPLISHMENTS-CONTINUED

KEY ACCOMPLISHMENTS

AMONG THE KEY ACCOMPLISHMENTS OF THE MENTEE COALITION WERE THE CONTRIBUTIONS OF NEW SECTOR MEMBERS REPRESENTING SOUTH PARK SCHOOLS AND CHURCHES, AS WELL AS THE INVOLVEMENT OF KEY COMMUNITY ORGANIZATIONS, IDENTIFIED AS RESOURCES IN SPDFCC'S COMMUNITY PREVENTION PLAN. HOLLADAY MAGNET AND BORTON MAGNET ELEMENTARIES IN SOUTH PARK WORKED TO BRING PREVENTION MESSAGES TO STUDENTS THROUGH STAFF MEMBERS ON THE COALITION. SPDFCC PROVIDED INFORMATION ABOUT THE CONSEQUENCES OF UNDERAGE DRINKING AND SUBSTANCE ABUSE DURING NATIONAL DRUG FACTS WEEK. THE COALITION PUT MORE THAN

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4,000 PIECES OF LITERATURE IN THE HANDS OF AT RISK YOUTH AND ADULTS BY PARTNERING WITH 21 DIFFERENT SOUTH PARK AGENCIES. DRUG FACTS WEEK INCLUDED PUBLIC ADDRESS ANNOUNCEMENTS AT HOLLADAY MAGNET ELEMENTARY. THE QUINCIE DOUGLAS PUBLIC LIBRARY IN THE TARGET AREA CREATED A DRUG FACTS DISPLAY. OTHER PARTICIPATING PARTNERS INCLUDED THE QUINCIE DOUGLAS SENIOR CENTER AND THE TUCSON BOYS AND GIRLS CLUB.

TRAINING

IN ORDER TO ENHANCE PREVENTION SKILLS IN THE COMMUNITY, SPDFCC HELD TWO WELL-ATTENDED TRAINING EVENTS. COALITION AND COMMUNITY MEMBERS LEARNED ABOUT THE DANGERS OF MARIJUANA USE. SHARING CURRENT RESEARCH, PARTICIPANTS LEARNED HOW MARIJUANA HARMS ADOLESCENTS AND PREVENTS REALIZATION OF THEIR DREAMS. THE COALITION SPONSORED A PROFESSIONAL TRAINING TO INCREASE THE ABILITY OF PARENTS, GRANDPARENTS AND OTHER FAMILY MEMBERS TO COMMUNICATE EFFECTIVELY ABOUT UNDERAGE DRINKING. THE LEAD SPEAKER WAS THE DIRECTOR OF PREVENTION AT PROVIDENCE.

STICKER SHOCK CAMPAIGNS

IN THIS AWARD PERIOD, THE COALITION DECREASED RETAIL ACCESS TO ALCOHOL BY SOUTH PARK YOUTH THROUGH TWO STICKER SHOCK CAMPAIGNS. THE CAMPAIGNS, GEARED TO ADDRESS HEAVY DRINKING AT THE NEW YEAR AND CINCO DE MAYO, WERE YOUTH-LED AND IMPLEMENTED WITH PLANNING AND SUPERVISION FROM COALITION MEMBERS. YOUTH GAINED SKILLS IN INTERACTIONS WITH BUSINESSES AND PRESENTED PARTICIPATING LIQUOR OUTLETS WITH CERTIFICATES OF APPRECIATION. THESE YOUTH ALSO JOINED OTHER TEENS ACROSS THE CITY IN A STICKER DESIGN CONTEST. MORE THAN 300 STICKERS IN ENGLISH AND SPANISH WERE APPLIED ON THE DAYS OF THE CAMPAIGNS. AS A CONSEQUENCE, CUSTOMERS AT HENRY'S MARKET, JIM'S MARKET, SONORA MARKET, AND THE VALERO STORE WERE PRESENTED WITH A GRAPHICALLY

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EFFECTIVE MESSAGE THAT SOUTH PARK YOUTH WANT TO PREVENT UNDERAGE DRINKING. IN

SUBSEQUENT REPORTS AT COALITION MEETINGS, YOUTH EXPRESSED INTEREST IN FUTURE

CAMPAIGNS TO REACH ADDITIONAL LIQUOR OUTLETS. FINALLY, PARTICIPATING YOUTH GAINED

PROTECTIVE FACTORS THROUGH THE POSITIVE RELATIONSHIPS WITH OTHER PREVENTION-MINDED

TEENS. A PIZZA PARTY WITH DANCING CELEBRATED THE SUCCESS OF THE CAMPAIGN.

COMMUNITY RETREATS

THE COALITION HELD A SUCCESSFUL STRATEGIC PREVENTION FRAMEWORK RETREAT AT THE TUCSON

URBAN LEAGUE. THE RETREAT THEME REFLECTED THE POPULAR TV SHOW "SURVIVOR" TO EMPHASIZE

THE IMPORTANCE OF HAVING THE BEST TOOLS AS COALITION MEMBERS. AMONG THE 18 ATTENDING

WERE 5 NEW STAKEHOLDERS FROM THE NEIGHBORHOOD, AND SEVERAL JOINED SPDFCC'S LEADERSHIP

COMMITTEE. MOVING FORWARD, SPDFCC WILL APPLY ALL IT GAINED THROUGH THE MENTORING

EXPERIENCE TO "TELL ITS STORY" AND FULFILL ITS MISSION TO REDUCE AND PREVENT SUBSTANCE

ABUSE AND UNDERAGE DRINKING IN SOUTH PARK.

SOBER TRUTH ON PREVENTION - STOP UNDERAGE DRINKING ACT

SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION

CENTER FOR SUBSTANCE ABUSE PREVENTION

AMISTADES COMPLETED THE 4TH YEAR OF THE SOBER TRUTH ON PREVENTION (STOP) UNDERAGE

DRINKING ACT GRANT THAT WAS AWARDED IN 2009. AMISTADES DEDICATED ITS TIME TO

REDUCING AND PREVENTING UNDERAGE DRINKING IN ITS TARGET AREA OF FLOWING WELLS AND

PIMA COUNTY AND DILIGENTLY ADDRESSED RISK FACTORS ASSOCIATED WITH THE INCREASE OF

UNDERAGE DRINKING. THIS WAS ACCOMPLISHED BY PROMOTING PROTECTIVE FACTORS WITH

STRATEGIES THAT INCLUDED CHANGING PARENTAL ATTITUDES TOWARDS THE RISK OF UNDERAGE

DRINKING AND IMPACTING YOUTH THROUGH EDUCATION AND AWARENESS.

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STRATEGIES & ACTIVITIESPADRES

PARENTS AGAINST DRUGS BY REPORTING, ENFORCEMENT, AND SURVEILLANCE (PADRES), A PARENT ACTION COMMITTEE, MONITORED 15 HIGH RISK ALCOHOL BUSINESS OUTLETS ENGAGING IN NEGATIVE ALCOHOL ADVERTISING (SUCH AS RETAIL STORE SIGNAGE, NEON SIGNS, BANNERS, AND POSTERS) IN THE FLOWING WELLS COMMUNITY. THE PARENTS WERE TRAINED TO IDENTIFY LIQUOR LICENSE ESTABLISHMENTS NOT ABIDING WITH COUNTY AND CITY SIGNAGE ORDINANCE BY HAVING AN EXPLICIT AMOUNT OF OUTSIDE ALCOHOL ADVERTISEMENTS. THEY THEN PRODUCED PHOTO DOCUMENTATION OF OUTDOOR ALCOHOL ADVERTISEMENTS FOR 19 ESTABLISHMENTS IN THE TARGET AREA. THEY PROVIDED EACH VENDOR WITH A MERCHANT PACKET CONSISTING OF THE SIGNAGE ORDINANCE AND THE SOCIAL HOST ORDINANCE IN ORDER TO MONITOR NEGATIVE ALCOHOL ADVERTISING.

SOCIAL HOST ENFORCEMENT

AMISTADES ENHANCED SOCIAL HOST ENFORCEMENT AWARENESS AND EDUCATION CAMPAIGNS BY USING CULTURALLY COMPETENT OUTREACH METHODS TO REACH 2,000 ADULTS IN THE FLOWING WELLS AREA. INFORMATION DISSEMINATION INCLUDED SOCIAL HOST AWARENESS BROCHURES, ARTICLES, AND RELATED MATERIALS (4,954) AND ADULT ALCOHOL RELATED INFORMATION (1,000). INFORMATION WAS DISTRIBUTED AT LOCAL CHURCHES, SCHOOL AND COMMUNITY EVENTS, PARENTING PROGRAMS, LOCAL NON-PROFITS AND MENTAL AND BEHAVIORAL HEALTH ORGANIZATIONS.

MAYAHUEL UNDERAGE DRINKING DIVERSION

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THIS ALCOHOL DIVERSION PROGRAM USED A CULTURALLY COMPETENT CURRICULUM THAT TARGETED 150 LATINO, AFRICAN AMERICAN, AND NATIVE AMERICAN YOUTH BETWEEN THE AGES OF 14-17 IN THE FLOWING WELLS COMMUNITY. A TOTAL OF 750 HIGH SCHOOL STUDENTS PARTICIPATED IN THE MAYAHUEL UNDERAGE DRINKING DIVERSION CLASSES AT VARIOUS SITES INCLUDING HA:SAN HIGH SCHOOL, WILDCAT SCHOOL AND PASCUA YAQUI HIGH SCHOOL. THE CURRICULUM COVERED LEGAL, MEDICAL, SOCIAL, AND CULTURAL ASPECTS OF UNDERAGE DRINKING. THE STUDENTS SHOWED AN INCREASE OF KNOWLEDGE ABOUT THE INFORMATION PRESENTED TO THEM IN THIS EDUCATIONAL PROGRAM. INFORMATION INCLUDED: SOCIAL HOST ORDINANCE; ALCOHOL NORMS AND DIFFERENT ETHNIC GROUPS OF THE SOUTHWEST; UNDERAGE DRINKING; THE IMPACT OF DRINKING ON FAMILIES AND CULTURES IN THE SOUTHWEST; THE PROBLEMS OF VIOLATING LAWS WITH UNDERAGE DRINKING, AND THE HEALTH PROBLEMS WITH UNDERAGE DRINKING. THE PROGRAM WAS EFFECTIVE IN ITS IMMEDIATE IMPACT ON THE KNOWLEDGE AND ATTITUDES OF THE PARTICIPANTS. THERE WAS HIGH STUDENT SATISFACTION WITH THE PROGRAM BASED ON QUALITATIVE INFORMATION STUDENTS PROVIDED.

UNDERAGE DRINKING WORKSHOPS

UNDERAGE DRINKING WORKSHOPS USING A MULTI-CULTURAL APPROACH WERE PROVIDED TARGETING INDIVIDUALS AND PROVIDERS WHO WORK WITH LATINO, AFRICAN AMERICAN, AND NATIVE AMERICAN YOUTH IN THE FLOWING WELLS COMMUNITY. AMISTADES PRESENTED VARIOUS WORKSHOPS ON SUBSTANCE ABUSE PREVENTION WORK WITH UNDERPRIVILEGED FAMILIES OF COLOR TO THE ANNUAL DIVERSE VOICES IN PREVENTION CULTURAL COMPETENCY CONFERENCE. THERE WERE OVER 100 MEMBERS IN ATTENDANCE AND COMMENTS FROM POST SURVEYS REPORTED THAT MEMBERS OVERALL KNOWLEDGE OF UNDERAGE DRINKING PREVENTION AND FAMILIES OF COLOR INCREASED.

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COLLECTIVE IMPACT

THE ORGANIZATION ENGAGED IN A SUBSTANTIAL AMOUNT OF COLLABORATION ACROSS THE COMMUNITY. THE DECREASE IN UNDERAGE DRINKING WOULD NOT HAVE BEEN MADE POSSIBLE WITHOUT THE PARTNERSHIPS MADE. AMISTADES HAS COLLABORATED WITH VARIOUS LEVELS OF GOVERNMENT INCLUDING FEDERAL, STATE, LOCAL AND TRIBAL. THE ORGANIZATION DIRECTLY AND INDIRECTLY PARTNERED WITH APPROXIMATELY 85 ORGANIZATIONS, INSTITUTIONS, AND COMMUNITY GROUPS. THESE GROUPS REPRESENTED A VARIETY OF SECTORS IN THE COMMUNITY (SCHOOLS, BUSINESSES FAITH-BASED CENTERS, MEDIA OUTLETS, UNIVERSITY, AND OTHER SUBSTANCE ABUSE PREVENTION ORGANIZATIONS). AMISTADES WILL CONTINUE TO WORK WITH THESE ENTITIES IN THE FUTURE TO CONTINUE THE STRATEGIES OF FORMING A SAFE, SOBER, AND HEALTHY TUCSON COMMUNITY.

POSITIVE OUTCOMES

THE PERCENTAGE OF YOUTH WHO ENGAGED IN THE CONSUMPTION OF ALCOHOL IN THE LAST 30 DAYS DROPPED DRAMATICALLY FROM 36.1 % IN 2008 TO 30.7% IN 2012 (5.4%) FOR PIMA COUNTY. THE PERCENTAGE OF YOUTH WHO HAVE CONSUMED ALCOHOL IN THEIR LIFETIME DROPPED FROM 63.1% IN 2008 TO 55.6% IN 2012 (7.5%) FOR PIMA COUNTY. IN THE FLOWING WELLS COMMUNITY, THE NUMBERS RELATED TO YOUTH DRINKING HAVE DROPPED SIGNIFICANTLY. THE PERCENTAGE OF YOUTH WHO HAVE CONSUMED ALCOHOL IN THE LAST 30 DAYS WENT FROM 42.1% IN 2008 TO 30.7% IN 2012 (11.4% DECREASE). DATA SHOWS A DECREASE IN THE LIFETIME YOUTH USE OF ALCOHOL. THE PERCENTAGE OF YOUTH WHO HAVE CONSUMED ALCOHOL IN THEIR LIFETIME WAS AT 69.8% IN 2008 AS COMPARED TO 2012 AT 65.6% (4.2% DROP). ALL DATA WAS COLLECTED THROUGH THE ARIZONA YOUTH SURVEY FOR 2008, 2010, AND 2012. AMISTADES INSTITUTIONALIZED THE STRATEGIES THAT DECREASED UNDERAGE DRINKING AND PROMOTED POSITIVE PROTECTIVE FACTORS AND WILL COMPARE THE NUMBERS IN 2014.

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PROGRAM SERVICE ACCOMPLISHMENTS-CONTINUED

NATIONAL FOUNDATION GRANTS

AMERICAN MEDICAL ASSOCIATION FOUNDATION - HEALTHY LIVING GRANTS

TOGETHER WE CAN BECAUSE WE CARE

AMISTADES SUBSTANCE ABUSE COALITION HAS BEEN AT THE FOREFRONT OF THE COALITION'S PUBLIC AWARENESS CAMPAIGN. THE COALITION BEGAN BY PARTNERING WITH LOCAL LAW ENFORCEMENT, SUCH AS THE TUCSON POLICE DEPARTMENT AND PIMA COUNTY SHERIFF'S DEPARTMENT TO PROVIDE THE COMMUNITY WITH EVENTS THAT HELP DISPOSE OF UNWANTED AND EXPIRED PRESCRIPTION MEDICATION. THE COALITION DISSEMINATED PRESCRIPTION DRUG INFORMATION, ENHANCED SCHOOL BASED PREVENTION PROGRAMS, PROVIDED EDUCATIONAL TRAININGS & TOWN HALLS TO BOTH STUDENTS AND PARENTS, AND FACILITATED THE SECOND CHANCE DIVERSION PROGRAM FOR YOUTH UNDER LONG-TERM SUSPENSION FOR PRESCRIPTION DRUG USE AT SCHOOL.

STRATEGIES & ACTIVITIES

YOUTH COUNCIL

DURING MONTHLY AMISTADES SUBSTANCE ABUSE COALITION MEETINGS, ARTICLES ON EMERGING ISSUES REGARDING PRESCRIPTION DRUGS WERE DISSEMINATED TO ALL COALITION MEMBERS. MONTHLY SECOND CHANCE DIVERSION CLASSES WERE HELD FOR STUDENTS THAT HAD BEEN SUSPENDED AT SCHOOL FOR SUBSTANCE ABUSE ON CAMPUS. STUDENTS RECEIVED INFORMATIONAL PRESENTATIONS REGARDING THE RISKS OF ABUSING PRESCRIPTION DRUGS. TO FURTHER REACH YOUTH IN THE COMMUNITY, THE AMISTADES SUBSTANCE ABUSE COALITION CREATED THE LEADERS IN ACTION YOUTH COUNCIL AT FLOWING WELLS HIGH SCHOOL. SINCE ITS INCEPTION, ONE THE

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MAIN GOALS FOR THE COUNCIL WAS TO CONDUCT A PUBLIC AWARENESS CAMPAIGN TO REACH

FELLOW PEERS IN THEIR COMMUNITY ON THE RISKS AND HARMS OF CONSUMING PRESCRIPTION

DRUGS NOT PRESCRIBED BY A MEDICAL DOCTOR. YOUTH WERE TRAINED BY COALITION STAFF ON

THE RISKS, HARMS AND CONSEQUENCES OF MISUSING PRESCRIPTION MEDICATION. THE YOUTH

REFERRED TO THE KING PHARMACEUTICALS TOOLKIT TO IDENTIFY RESOURCES THAT WOULD ASSIST

THEM IN THE EFFORTS TO IMPLEMENT THE TOGETHER WE CAN BECAUSE WE CARE PROJECT.

TRAIN THE TRAINER

THE COALITION PARTNERED WITH OTHER SUBSTANCE ABUSE PREVENTION COALITIONS TO HOST A

PRESCRIPTION DRUG TRAIN THE TRAINER WORKSHOP FOR COMMUNITY MEMBERS. THE GOAL WAS TO

TRAIN PARTICIPANTS TO TRAIN PARENTS AND YOUTH USING THE PRESCRIPTION DRUG 360 MODEL

PROVIDED BY PREVENTION WORKS AZ.

PARENT ADVOCACY

THE FAMILIAS EN CAMINO PARENT ADVOCACY GROUP (SUBCOMMITTEE OF THE AMISTADES

SUBSTANCE ABUSE COALITION) ASSISTED IN IMPLEMENTING ACTIVITIES FROM THE TOGETHER WE

CAN BECAUSE WE CARE ACTION PLAN. PARENTS WERE TRAINED BY THE AZ NATIONAL GUARD AND

GAINED FURTHER KNOWLEDGE ABOUT SAFER WAYS TO LOCK UP THEIR MEDICINE CABINETS AND

OTHER WAYS TO DISPOSE OF THEIR MEDICATION WITH THE END GOAL OF KEEPING MEDICATION

OUT OF THEIR CHILDREN'S REACH.

DISPOSE A MED

THE COALITION HOSTED A DISPOSE A MED IN COLLABORATION WITH THE PIMA COUNTY SHERIFF'S

DEPARTMENT, AND ALTHOUGH NOT FUNDED THROUGH THE PROJECT, IT SERVED AS AN AVENUE TO

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DISSEMINATE INFORMATION TO THE PUBLIC. AT ALL QUARTERLY DISPOSE A MED EVENTS, OVER
500 PIECES OF INFORMATION WAS PASSED OUT TO THE COMMUNITY WHO DROPPED OFF THEIR
PRESCRIPTION DRUGS.

NATIONAL DRUG FACT WEEK

STUDENTS WERE TRAINED BY THE UNIVERSITY OF ARIZONA POISON CONTROL CENTER. THEY WERE
PREPPED TO TRAIN THEIR FELLOW PEERS IN HEALTH CLASSES DURING NIDA NATIONAL DRUG FACT
WEEK. DURING THIS WEEK, STUDENTS PREPARED AND PRESENTED A DRUG FACT JEOPARDY-LIKE
GAME TO THEIR PEERS IN HEALTH CLASSES. NEARLY 100 OF THEIR PEERS WERE ENGAGED IN
LEARNING.

FESTIVAL UNDER THE STARS

PRESCRIPTION DRUG INFORMATION WAS PROMOTED AT THE FLOWING WELLS HIGH SCHOOL ANNUAL
FESTIVAL UNDER THE STARS, A FAMILY-FRIENDLY OUTSIDE CARNIVAL HOSTED FOR FAMILIES IN
THE FLOWING WELLS UNIFIED SCHOOL DISTRICT. THIS LED TO ADDITIONAL INFORMATIONAL
PRESENTATIONS WITH TARGETED PRESCRIPTION DRUG MESSAGES AT LOCAL COMMUNITY CENTERS
AND YMCA'S.

RAZALOGIA FAMILY ENGAGEMENT PROJECT

W.K. KELLOGG FOUNDATION

AMISTADES, INC. WAS AWARDED A \$500,000 GRANT FOR FAMILY SUPPORT SERVICES FOR LATINOS
AND NATIVE AMERICANS IN PIMA COUNTY. THIS WAS THE ONLY GRANT AWARD MADE BY THE
FOUNDATION IN THE STATE OF ARIZONA. PROPOSED PROJECT PARTNERS ARE THE PASCUA YAQUI

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TRIBE AND THE UNITED WAY OF TUCSON AND SOUTHERN ARIZONA.

THROUGH THE PROJECT, RAZALOGIA APPROACH: TRANSFORMING COMMUNITIES BY ENGAGING LATINO AND PASCUA YAQUI FAMILIES IN HOLISTIC LEARNING, AMISTADES ASPIRES TO STRENGTHEN EARLY LEARNING OUTCOMES OF VULNERABLE LATINO AND PASCUA YAQUI CHILDREN BY DEVELOPING LEADERSHIP AND BUILDING CAPACITY OF FAMILIES, SCHOOLS AND COMMUNITIES TO WORK TOGETHER TO PROMOTE SUCCESS. THE RAZALOGIA APPROACH TO FAMILY ENGAGEMENT DRAWS FROM THE STRENGTHS OF THE FAMILY TO EMPOWER THEM AND CREATE LASTING COMMUNITY CHANGE. THE PROJECT'S FRAMEWORK SERVES AS A MULTI-LINGUAL, MULTI-CULTURAL MODEL THAT CAN BE REPLICATED IN THE FAMILY ENGAGEMENT FIELD BY OTHER ORGANIZATIONS SERVING MARGINALIZED FAMILIES OF COLOR. RAZALOGIA DEFINES SUCCESS BASED ON THE FAMILIES' KNOWLEDGE OF RAISING CHILDREN TO BE HEALTHY, SCHOOL READY & KNOWLEDGEABLE OF THE IMPORTANCE OF ACTIVELY IMPROVING THEIR COMMUNITY.

TRANSFORMATION IS THE APPLICATION OF THE KNOWLEDGE TO ADVANCE OR CHANGE THE STATUS QUO OF SOCIETY AND A METHOD BY WHICH TO BREAK THE SILENCE OF FAMILIES OF COLOR. LATINO FAMILIES AND NATIVE AMERICAN FAMILIES WITH CHILDREN AGES 0-3 ARE REPRESENTING THE TARGET COMMUNITY. A MULTI-GENERATION APPROACH TO LEARNING IS USED WITH SPECIFIC FOCUS AREAS THAT INCLUDE EARLY CHILDHOOD EDUCATION, HOME VISITATION, PARENT EDUCATION, FAMILY LEADERSHIP, AND A MEN'S COUNCIL, WITH THE IMPORTANCE OF LANGUAGE & CULTURE PERMEATING THROUGHOUT THE FRAMEWORK.

THE RAZALOGIA FAMILY ACTIVISM APPROACH AND ITS CONCEPTS OF POWER, CONNECTION, CHANGE AND TRANSFORMATION MARRIED WITH CONOCIMIENTO, CONFIANZA, UNIDAD AND PODER IS USED TO GUIDE THE PROJECT. THIS TRANSFORMATIVE FAMILY ENGAGEMENT FRAMEWORK ADDRESSES OBSTACLES FACED BY LOW-INCOME FAMILIES AND IS USED IN OTHER COMMUNITIES OF COLOR IN THE REGION AND NATION. ONE OF THE STRENGTHS OF THE PROJECT IS THE CONNECTION AND

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MUTUAL UNDERSTANDING THAT IS DEVELOPED BETWEEN TWO VERY DISTINCT COMMUNITIES WITH A
SHARED HISTORY.

CONTRACTS

TOBACCO YOUTH COALITION DEVELOPMENT

AMISTADES PROVIDES TRAINING AND TECHNICAL ASSISTANCE SERVICES IN THE AREA OF TOBACCO
YOUTH COALITION DEVELOPMENT AS A MEMBER OF A TECHNICAL ASSISTANCE TEAM THAT INCLUDES
PIMA PREVENTION PARTNERSHIP AND ARIZONA YOUTH PARTNERSHIP. AMISTADES SERVES SOUTHERN
ARIZONA, ARIZONA YOUTH PARTNERSHIP SERVES NORTHERN ARIZONA, AND THE PARTNERSHIP
SERVES CENTRAL ARIZONA AND IS THE LEAD ADMINISTRATIVE AGENCY. AMISTADES IS
RESPONSIBLE FOR PROVIDING TECHNICAL ASSISTANCE TO 6 COUNTIES, INCLUDING: COCHISE,
GRAHAM, GREENLEE, SANTA CRUZ, YAVAPAI AND YUMA. THE PURPOSE OF THE INITIATIVE IS
HELPING ORGANIZATIONS CREATE THEIR OWN TOBACCO YOUTH COALITION AND ENHANCING
EXISTING COALITIONS. THE INITIATIVE WILL ULTIMATELY LAUNCH A TOBACCO POLICY CHANGE
PROJECT DONE THROUGH LOCAL ORGANIZATIONS IN CONJUNCTION WITH LOCAL VENDORS AND
COMMUNITIES. THESE SERVICES ARE MADE POSSIBLE THROUGH FUNDING FROM THE ARIZONA
DEPARTMENT OF HEALTH SERVICES BUREAU OF TOBACCO AND CHRONIC DISEASES DEPARTMENT.

STRATEGIES & ACTIVITIES

STUDENTS TAKING A NEW DIRECTION

TWENTY-EIGHT STAND (STUDENTS TAKING A NEW DIRECTION) YOUTH COALITIONS FUNDED BY THE
ARIZONA DEPARTMENT OF HEALTH SERVICES WERE OFFERED TRAINING AND TECHNICAL
ASSISTANCE. STAND COALITIONS ARE LOCATED IN 14 OF THE 15 ARIZONA COUNTIES AND

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WITHIN THREE TRIBAL NATIONS. THE TECHNICAL ASSISTANCE TEAM PROVIDED TRAINING AND SUPPORT TO EACH OF THE STAND COALITIONS ACROSS THE STATE TO HELP THEM SUCCEED WITH IMPROVING LOCAL POLICIES FOCUSED ON THE CENTER FOR DISEASE CONTROL'S (CDC) BEST PRACTICES FOR COMPREHENSIVE TOBACCO CONTROL PROGRAMS. THESE INCLUDE: (A) PREVENTING TOBACCO USE INITIATION AMONG YOUTH AND YOUNG ADULTS; (B) PROMOTING QUITTING AMONG ADULTS AND YOUTH; (C) ELIMINATING EXPOSURE TO SECONDHAND SMOKE, AND (D) IDENTIFYING AND ELIMINATING TOBACCO-RELATED DISPARITIES AMONG POPULATION GROUPS.

GREAT AMERICAN SMOKEOUT

THE TECHNICAL ASSISTANCE TEAM PREPARED COALITIONS FOR THREE MAJOR NATIONWIDE EVENTS.

THE FIRST WAS THE GREAT AMERICAN SMOKEOUT: THE GREAT AMERICAN SMOKEOUT (GASO) IS AN EVENT HELD ON EVERY THIRD THURSDAY OF NOVEMBER. THE PURPOSE OF GASO IS TO ENCOURAGE SMOKERS TO USE THE DATE TO MAKE A PLAN TO QUIT. ACTIVITIES SURROUND THEMES LIKE, "DECIDE TODAY FOR LIKE-LONG STRONG LUNGS" WHICH EMPHASIZES THE IMPORTANCE OF CHOOSING TO LIVE TOBACCO-FREE TO AVOID HEALTH CONSEQUENCES. STUDENTS CONDUCTED A STOREFRONT TAKEOVER TO DISSEMINATE FACTS OF THE RISKS OF TOBACCO AND ENCOURAGE THE PUBLIC TO PURCHASE ANOTHER ITEM OF THE SAME COST, RATHER THAN A PACK OF CIGARETTES.

KICK BUTTS DAY

THE SECOND EVENT IS KICK BUTTS DAY. KICK BUTTS DAY IS A NATIONAL DAY OF ACTIVISM THAT EMPOWERS YOUTH TO STAND OUT, SPEAK UP AND SEIZE CONTROL AGAINST BIG TOBACCO. ON KICK BUTTS DAY, YOUTH ORGANIZED EVENTS THAT RAISED AWARENESS OF THE PROBLEM OF TOBACCO USE IN THEIR COMMUNITY AND NEIGHBORHOODS, ENCOURAGED THEIR PEERS TO REJECT THE TOBACCO COMPANIES' MARKETING, AND URGED ELECTED OFFICIALS TO TAKE PREVENTATIVE

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ACTION TO PROTECT THE YOUTH FROM THE HARMFUL EFFECTS OF TOBACCO. STUDENTS COLLECTED PLEDGES ASKING OTHERS TO STOP SMOKING OR TO PLEDGE NOT TO BEGIN SMOKING AND POST TO A CONSTRUCTED PLEDGE WALL. PLEDGE WALLS WERE BROUGHT TO THE STATE CAPITOL TO BRING AWARENESS TO ELECTED OFFICIALS IN ORDER TO PROMOTE POLICY CHANGE. 100 STUDENTS ATTENDED.

WORLD NO TOBACCO DAY

THE THIRD EVENT IS WORLD NO TOBACCO DAY. WORLD NO TOBACCO DAY (WNTD) IS HELD BY THE WORLD HEALTH ORGANIZATION, AROUND THE WORLD EVERY YEAR. IT IS INTENDED TO ENCOURAGE A 24-HOUR PERIOD OF ABSTINENCE FROM ALL FORMS OF TOBACCO CONSUMPTION ACROSS THE GLOBE. THE DAY IS FURTHER INTENDED TO DRAW GLOBAL ATTENTION TO THE WIDESPREAD PREVALENCE OF TOBACCO USE AND TO NEGATIVE HEALTH EFFECTS.

PROGRAM SERVICE ACCOMPLISHMENTS-CONTINUED

COUNTY GRANTS

ELLIE TOWNE FLOWING WELLS TEEN PROGRAM

PIMA COUNTY COMMUNITY DEVELOPMENT BLOCK GRANT

AMISTADES AND THE ELLIE TOWNE FLOWING WELLS COMMUNITY CENTER HAVE EXPERIENCED GREAT SUCCESS IN THE IMPLEMENTATION OF THE YOUTH EMPOWERMENT PROGRAM. STAFF ENGAGED IN A WEALTH OF YOUTH DEVELOPMENT TRAININGS THAT ALLOWED THE TEAM TO INCREASE THEIR CAPACITY TO WORK WITH YOUTH AS PARTNERS TO CREATE A YOUTH-FRIENDLY ENVIRONMENT. STAFF LEARNED TO VIEW YOUTH AS RESOURCES IN ORDER TO BEST CREATE A COMPREHENSIVE PROGRAM THAT PROVIDES PRO-SOCIAL INVOLVEMENT AND EMPOWERMENT CONSTRUCTED BY ADULTS AND YOUTH. THERE HAVE BEEN CONSISTENT TECHNICAL ASSISTANCE MEETINGS, IN WHICH STAFF FROM AMISTADES AND ELLIE TOWNE HAVE MET TO PLAN AND IMPLEMENT OUTREACH CAMPAIGN

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RELATED ACTIVITIES ON A REGULAR BASIS. ACTIVITIES PLANNED INCLUDED YOUTH DEVELOPMENT TRAININGS, TEEN NIGHT, AND WEEKLY STUDENT CLUB MEETINGS. THE YOUTH DEVELOPMENT TEAM (AMISTADES AND ELLIE TOWNE STAFF) CREATED RAPPORT AND PARTNERSHIP WITH THE FLOWING WELLS UNIFIED SCHOOL DISTRICT IN ORDER TO RECRUIT STUDENTS AND PROVIDE AFTER-SCHOOL ACTIVITIES THAT WERE NOT IN PLACE FOR THE JUNIOR AND HIGH SCHOOL. ADMINISTRATION, SPECIFICALLY THE SUPERINTENDENT, DEMONSTRATED SUPPORT BY ALLOWING RECRUITMENT TABLES DURING LUNCH, PROVIDING RECRUITMENT IDEAS, SUPPORTING DISTRIBUTION OF FLIERS AT THEIR SCHOOLS, AND EXHIBITING AND OPENNESS TO FUTURE TRANSPORTATION TO AND FROM THE SCHOOLS. INCREASED VISIBILITY OF THE CENTER WAS MADE POSSIBLE THROUGH DIFFERENT RECRUITMENT EVENTS, SUCH AS HALLOWEEN AT LOCAL YOUTH CENTERED VENUES, WHERE STAFF HOSTED A TABLE WITH INTERACTIVE GAMES FOR FAMILIES. AS A RESULT, AMISTADES WAS INVITED TO RETURN DURING THE SPRING TO HOST TABLES AT OTHER EVENTS, SUCH AS EASTER.

THE LEADERSHIP AND ADVOCACY COUNCIL, A YOUTH CLUB CREATED BY AMISTADES AND FLOWING WELLS HIGH SCHOOL, WAS ESTABLISHED AT THE CENTER. THE COUNCIL BEGAN THEIR WORK AT FLOWING WELLS HIGH SCHOOL AND MET REGULARLY. THEY SERVED AS AN ADVISORY GROUP FOR THE RECRUITMENT OF NEW YOUTH TO THE ELLIE TOWNE FLOWING WELLS COMMUNITY CENTER. THROUGH THE COUNCIL, THE YOUTH DEVELOPMENT TEAM CONDUCTED FOCUS GROUPS THAT ACTED AS CATALYSTS FOR PILOTING A PUBLIC AWARENESS SURVEY. THE GROUPS MADE ASSESSMENTS OF THE YOUTH ACTIVITIES AVAILABLE TO THE COMMUNITY, USING THE PUBLIC AWARENESS SURVEY. RESULTS WERE GATHERED AND WERE UTILIZED FOR THE CREATION OF A KICK-OFF EVENT THAT CREATED VISIBILITY FOR THE CENTER. TOGETHER YOUTH AND STAFF ORGANIZED THE TEEN NIGHT KICK-OFF EVENT WHERE YOUTH ENGAGED IN ACTIVITIES OFFERED BY THE CENTER. THE EVENT'S PURPOSE WAS TO DISPLAY THE SERVICES OFFERED ON A WEEKDAY BASIS, AS WELL AS TO PROVIDE A SAFE AND FUN EVENT THAT WOULD PREVENT YOUTH FROM RISKY BEHAVIOR. THE TEEN NIGHT KICK-OFF WAS HOSTED ACTIVITIES SUCH AS TOURNAMENTS FOR PING-PONG, POOL, XBOX AND WII. THERE WAS A LIVE DJ PRESENT AND STUDENTS HELD A DANCE COMPETITION. THE

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FLOWING WELLS NEIGHBORHOOD ASSOCIATION PROVIDED FOOD TO INCENTIVIZE ATTENDANCE, AS WELL AS, PRIZES FOR WINNERS OF ALL THE CONTESTS. THERE WERE 45 YOUTH IN ATTENDANCE AND OVERALL FEEDBACK GATHERED FROM STUDENTS AND STAFF WAS SATISFACTORY. AS A RESULT, STUDENTS EXPRESSED THEIR SUPPORT AND WILLINGNESS TO PARTICIPATE IN ACTIVITIES AT THE CENTER. A 2ND TEEN NIGHT EVENT AT THE CENTER TOOK PLACE LATER IN THE YEAR AND ATTRACTED MORE YOUTH. THIS EVENT GENERATED A POSITIVE BUZZ ABOUT THE CENTER AND THE ACTIVITIES IT OFFERS.

THE YOUTH DEVELOPMENT TEAM (AMISTADES STAFF AND ETFWCC STAFF) HOSTED INFORMATIONAL TABLES/BOOTHES AT FLOWING WELLS HIGH SCHOOL TO CREATE VISIBILITY AND AWARENESS OF THE CENTER AND ITS PROGRAMS. THE CENTER HOSTED THESE INFORMATIONAL TABLES AT THE SCHOOL DURING LUNCH HOURS AND RECRUITED YOUTH TO ATTEND THE TEEN PROGRAM ON A WEEKLY BASIS. THE LEADERSHIP AND ADVOCACY COUNCIL ASSISTED IN THE RECRUITMENT OF STUDENTS. SUMMER PROMOTION WAS SUCCESSFUL AS PROMOTIONAL ITEMS WERE GIVEN OUT TO ENCOURAGE REGULAR CENTER ATTENDANCE. PROMOTIONAL ITEMS INCLUDED SUNGLASSES AND WATER BOTTLES.

AMISTADES AND THE LEADERSHIP AND ADVOCACY COUNCIL PARTICIPATED IN A WEEK LONG LEADERSHIP TRAINING HOSTED AT THE UNIVERSITY OF ARIZONA BY CHILD & FAMILY RESOURCES, INC. YOUTH GAINED KNOWLEDGE AND SKILL SETS THAT WOULD INCREASE THEIR ABILITY TO RECRUIT NEW YOUTH TO THE TEEN CENTER. DURING THE WEEK, YOUTH WERE TRAINED IN BECOMING LEADERS IN THEIR COMMUNITY, BECOMING ADVOCATES AMONGST PEERS, AND TARGETED THEIR MESSAGING AND MARKETING EFFORTS. THE YOUTH DISCUSSED STRATEGIES TO INCREASE PARTICIPATION AT THE CENTER AND CREATING AN UPDATED BRAND FOR THE TEEN PROGRAM. THE NAME WAS CHANGED TO DAYS TO REMEMBER YOUTH CENTER AT ELLIE TOWNE FLOWING WELLS COMMUNITY CENTER. THE COUNCIL PLANNED TO HOST A WEEKLY CENTER EVENT FOR YOUTH AGES 14 TO 18 CENTERED ON PREVENTION, COMMUNITY SERVICES, AND EDUCATIONAL WORKSHOPS. THE COUNCIL PROVIDED GUIDANCE ON RECRUITMENT OF YOUTH/STUDENTS TO THE CENTER BY HOSTING BIWEEKLY MEETINGS AND A WELCOME BACK BBQ FOR STUDENTS FROM THE FLOWING WELLS HIGH

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SCHOOL.

SPECIAL PROJECTS

PODER DE FAMILIAS, PODER DE LA COMUNIDAD

FAMILY POWER TO COMMUNITY POWER

THE ENGAGEMENT OF LATINOS IN THE INSTITUTIONS OF THE BROADER COMMUNITY, SCHOOLS, GOVERNMENT, CIVIC ORGANIZATION, ESPECIALLY THOSE WITH HIGH CONCENTRATION OF RECENT IMMIGRANTS, IS A CHALLENGE FOR BOTH MEMBERS OF THOSE COMMUNITIES AND FOR THE INSTITUTIONS ANXIOUS TO GET THEM INVOLVED IN THE WORK THAT THESE INSTITUTIONS REPRESENT. LITTLE SUBSTANTIVE ATTENTION HAS BEEN GIVEN TO THESE COMMUNITIES AND KNOWLEDGE AND UNDERSTANDING OR REASONS FOR THEIR LACK OF ENGAGEMENT ARE ANTIDOTAL AT BEST. AMISTADES HAS TAKEN ON THIS CHALLENGE AND UTILIZES A COMBINATION OF KNOWLEDGE OF STRENGTH INHERENT IN THIS COMMUNITY AND FAMILIARITY WITH THE DYNAMICS AND CULTURAL VALUES OF THE RESIDENTS. THESE STRENGTHS HAVE BEEN DESCRIBED AS STRONG FAMILY STRUCTURES THAT PROVIDE PROTECTIVE FACTORS AGAINST STRESSES THEY ENCOUNTER; A PREFERENCE FOR ENGAGEMENT OUTSIDE THE FAMILY AT A PERSONAL RELATIONSHIP LEVEL DESCRIBES AS PERSONALISMO OR COMPADRAZGO. THESE CHARACTERISTICS HAVE OFTEN BEEN DESCRIBED AS ELEMENTS OF CULTURES THAT VALUE RELATIONSHIP AND ARE REFERRED TO AS "RELATIONAL CULTURES" THAT HAVE A STRONGER EMPHASIS ON A PERSONAL RELATIONSHIP WITH PERSONS FROM THOSE INSTITUTIONS AS OPPOSE TO RELYING ON SECONDARY INSTITUTIONAL RELATIONSHIPS. THESE PRIMARY RELATIONSHIPS, AS THE GATEWAY TO PARTICIPATION WITH LOCAL INSTITUTIONS, ARE OFTEN MISUNDERSTOOD BY THE LEADERSHIP AND GENERAL MEMBERS OF THESE INSTITUTIONS BECAUSE OF THEIR LACK OF FAMILIARITY WITH THE IMPORTANCE OF THE DYNAMICS THAT GIVE EXPRESSION TO THESE CULTURAL VALUES.

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AMISTADES HOSTED THE PODER DE FAMILIAS, PODER DE LA COMUNIDAD (FAMILY POWER TO COMMUNITY POWER). THE PLATICA (COMMUNITY TALK) SERVED AS A CONDUIT FOR CHANGE IN THE LATINO COMMUNITY BY EMPOWERING FAMILIES. FAMILIES WERE GIVEN A VOICE AND AN OPPORTUNITY TO BECOME INVOLVED IN A MOVEMENT THAT BROUGHT ABOUT SOCIAL AND ECONOMIC CHANGE. AMISTADES BELIEVES AND SUPPORTS THE CONCEPT THAT THERE IS A NEED TO LISTEN TO THE VOICES OF THE FAMILIES, HEAR SOLUTIONS THAT THEY HAVE, AND THEN HELP THEM REALIZE THEM. AMISTADES EXPANDED THE LATINO FAMILY DIALOGUE AND BROUGHT IT TO THE FOREFRONT OF THE COMMUNITY.

FAMILIES AND COMMUNITY STAKEHOLDERS REPRESENTING PIMA COUNTY ATTENDED. THE MAJORITIES OF PARENTS WERE SPANISH SPEAKING AND HAVE IMMIGRATED TO THE US FROM MEXICO. OVER 40 FAMILIES WERE RECRUITED FROM FLOWING WELLS AND SOUTH TUCSON. COMMUNITY ORGANIZATIONS SUCH AS FLOWING WELLS UNIFIED SCHOOL DISTRICT, HEAD STARTS, PIO DECIMO CENTER, BARRIO KRUEGER NEIGHBORHOOD ASSOCIATION AND MISSION VIEW ELEMENTARY, ASSISTED IN RECRUITING FAMILIES.

PARENTS COMMUNICATED THEIR VIEWS AND CONCERNS BILINGUALLY WITH FACILITATORS AND RECORDERS THAT TRANSCRIBED AND TRANSLATED IN BOTH ENGLISH AND SPANISH. THE HALF-DAY EVENT PROVIDED A BEGINNING AND OPENING DIALOGUE FOR PARENTS OF LATINO FAMILIES. TOPICS SUCH AS POVERTY, EDUCATION, IMMIGRATION, AND VOTER REGISTRATION WERE DISCUSSED. STRATEGIES FOR MAKING COMMUNITY CHANGE THROUGH LEADERSHIP, EDUCATION, ADVOCACY, COLLABORATION AND USING THE FAMILIA (FAMILY) APPROACH WERE SHARED. OTHER GROUPS STRIVING TO CREATE A COMMUNITY DIALOGUE AND INITIATE MEASURABLE OUTCOMES AND CHANGES CAN USE THE PLATICA MODEL. AMISTADES BECAME THE CONDUIT FOR MOVING THE FAMILIES FROM DEALING WITH ISSUES JUST WITHIN THEIR FAMILIES TO ENGAGING THE INSTITUTIONS THAT IMPINGE UPON THEIR LIVES AND PROVIDE OPPORTUNITIES OR THREATS TO THEIR VALUES AND THEIR EXISTENCE. LA PLATICA ALSO DEMONSTRATED A METHOD FOR

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ENGAGING LATINO COMMUNITY MEMBERS BY USING PROCESSES AND ELEMENTS THAT ARE EMBEDDED
IN THAT CULTURE. IT PROVIDED INSIGHTS INTO AN EVOLVING METHODOLOGY FOR COMMUNITY
ENGAGEMENT.

AMERICORPS VISTA PROJECTS

VETCORPS PROJECT

COMMUNITY ANTI-DRUG COALITIONS OF AMERICA

COMMUNITY ANTI-DRUG COALITIONS OF AMERICA (CADCA), IN PARTNERSHIP WITH THE NATIONAL
GUARD BUREAU (NGB), CONDUCTS VETCORPS - A NATIONAL AMERICORPS VISTA PROGRAM - TO
SUPPORT MILITARY SERVICE MEMBERS AND THEIR FAMILIES. LOCAL COALITIONS HOST VETCORPS
MEMBERS AND WORK WITH NATIONAL GUARD UNITS TO ENSURE THEY RECEIVE SERVICES AND
NEEDED ASSISTANCE AS A RESULT OF SERVICE TO THEIR COUNTRY. VETCORPS AIMS TO IMPROVE
THE SOCIAL, MENTAL AND PHYSICAL HEALTH AND OVERALL QUALITY OF LIFE FOR SERVICE
MEMBERS AND THEIR FAMILIES. BY WORKING TOGETHER, WE HAVE THE CAPACITY TO CREATE A
NETWORK OF SUPPORT FOR THOSE THAT HAVE AND ARE SERVING OUR COUNTRY.

PROGRAM SERVICE ACCOMPLISHMENTS-CONTINUED

AMISTADES LAUNCHED A MULTI FACETED COMMUNITY PROJECT ANCHORED IN THE STRATEGIC
PREVENTION FRAMEWORK, AN EVIDENCE-BASED BEST PRACTICE. THIS FRAMEWORK INCLUDES FIVE
KEY PHASES AND IS GUIDED BY CULTURAL COMPETENCE AND SUSTAINABILITY. KEY PHASES
INCLUDE ASSESSMENT, CAPACITY BUILDING, PLANNING, IMPLEMENTATION AND EVALUATION.
OVERARCHING GOALS OF THE PROJECT INVOLVE INCREASING THE NUMBER OF VETERANS AND
MILITARY FAMILIES RECEIVING COMMUNITY SERVICES AND ASSISTANCE AS WELL AS INCREASING
THE CAPACITY OF COMMUNITY INSTITUTIONS TO ASSIST THIS DEMOGRAPHIC IN IMPROVING THEIR
QUALITY OF LIFE AND PREVENT CRIMINAL ACTIVITY BY ACCESSING SOCIAL AND
PHYSICAL/MENTAL HEALTH SERVICES. AMISTADES SUCCESSFULLY FACILITATED A COMMUNITY

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ASSESSMENT OF VETERANS AND MILITARY FAMILIES IN PIMA COUNTY AND BUILT CAPACITY, RESULTING IN A STRONG FOUNDATION FOR PLANNING, IMPLEMENTATION AND EVALUATION. THE ASSESSMENT FOUND LOCAL RISK FACTORS TO BE EASILY AVAILABLE ALCOHOL AND DRUGS, INABILITY TO GET MEANINGFUL EMPLOYMENT AND CONSEQUENT FINANCIAL STRESSES, LACK OF COMMUNITY AND VETERAN SERVING INSTITUTIONS, CRIME, DEPRESSION, PTSD, SUICIDE, AND PHYSICAL AND MENTAL HEALTH PROBLEMS. PROTECTIVE FACTORS IDENTIFIED WERE DRUG REHAB PROGRAMS ON MILITARY INSTALLATIONS AND SEVERAL AGENCIES AVAILABLE TO SERVE VETERANS SUCH AS THE SOUTHERN ARIZONA VA HEALTHCARE SYSTEM (HOMELESS PROGRAM, MENTAL HEALTH CLINIC, SUBSTANCE ABUSE CLINIC AND SEVERE MENTAL HEALTH CLINIC), KINO VETERANS WORKFORCE CENTER, VETERAN JOB CLUB OF TUCSON, HOPE, INC., AND RALLY POINT.

CAPACITY BUILDING INVOLVED DEVELOPING COMMUNITY RELATIONSHIPS WITH THE AFOREMENTIONED COMMUNITY INSTITUTIONS, AS WELL AS OTHERS, AND CREATING A FORUM FOR INFORMATION, RESOURCE SHARING, AND IMPLEMENTING LOCAL DRUG AND PRIME PREVENTION INITIATIVES AIMED AT MILITARY FAMILIES. PREVENTION INITIATIVES IN PIMA COUNTY FOR MILITARY FAMILIES ENCOMPASSED: (1) LOCAL SCAN OF LIQUOR STORES OFFERING PREDATORY DISCOUNTS ON ALCOHOLIC BEVERAGES TO VETERANS; (2) MORE THAN 5,000 SUBSTANCE ABUSE AND CRIME PREVENTION MATERIALS DISSEMINATED TO VETERANS AND MILITARY FAMILIES DURING NATIONAL DRUG FACTS WEEK VIA 23 COMMUNITY INSTITUTIONS; (3) PARTICIPATION IN THE STICKER SHOCK ANTI-ALCOHOL CAMPAIGN FOCUSING ON MILITARY FAMILIES, AND (4) DEVELOPMENT OF A WORKING RELATIONSHIP WITH THE DRUG ENFORCEMENT ADMINISTRATION (DEA) TO TARGET AND EDUCATE MILITARY FAMILIES, PARTICULARLY YOUTH ABOUT THE LEGAL AND HEALTH CONSEQUENCES OF DRUG USE. FIELD AGENTS SPECIFICALLY STRESSED THE IMPORTANCE OF NOT ENGAGING IN CRIMINAL ACTIVITY.

WHILE PROGRESS HAS BEEN MADE, THIS POPULATION CONTINUES TO SUFFER AS A DIRECT RESULT OF UNMET NEEDS. CONSEQUENCES OF THIS INCLUDE FAMILY VIOLENCE, THEFT, DRINKING &

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DRIVING, VANDALISM, HOMICIDES AND DRUG USE, ALL CONTRIBUTING TO ALREADY PERSISTENT
 CRIME FLOWING WELLS AND IN PIMA COUNTY. AMISTADES IS COMMITTED TO CONTINUING TO WORK
 TO RESOLVE THESE ISSUES THROUGH THE WORK OF THE CADCA VETCORPS PROJECT, SUPPORTED BY
 ITS ANTI-DRUG COALITION. KEY NEXT PHASES OF THE EVIDENCE-BASED STRATEGIC PREVENTION
 FRAMEWORK ARE PLANNING, IMPLEMENTATION, AND EVALUATION.

INDIO-LATINO SOCIAL JUSTICE PROJECT

ALLIANCE OF ARIZONA NONPROFITS

AMISTADES WAS SELECTED TO HOST A SOCIAL JUSTICE PROJECTED IN COLLABORATION WITH THE
 ALLIANCE OF ARIZONA NONPROFITS. THE PROJECT WILL HELP CHILDREN SUCCEED BY ENGAGING
 FAMILIES WILL AND BUILDING A SOCIAL SUPPORT NETWORK FOR THEM. OBJECTIVES INCLUDE
 PARENTS' DEVELOPMENT ALONG A CONTINUUM THAT (1) BUILDS SELF-CONCEPT AND LEADS TO NEW
 SKILLS AND (2) LEADS TO EDUCATIONAL ATTAINMENT AND IMPROVED ECONOMIC STATUS.

OVERARCHING GOALS INCLUDE (1) PARENTS SERVING AS A CATALYST FOR POSITIVE CHANGE AS A
 RESULT OF THE TRAINING RECEIVE; (2) CHILDREN AS THE END USERS AND DIRECT
 BENEFICIARIES THEREBY GIVING THEM A STRONGER CHANGE TO ACHIEVE EDUCATIONAL SUCCESS,
 AND (3) FAMILY LEADERS AS CHANGE AGENTS AND CULTURAL BROKERS CREATING SYSTEM CHANGE.

PRIMARY ACTIVITIES THAT WILL BE IMPLEMENTED INCLUDE: (1) TRAIN THE TRAINER
 CURRICULUM DEVELOPMENT; (2) CURRICULUM DELIVERY TO FAMILY LEADERS (PARENTS) FOR
 CAPACITY BUILDING; (3) RECRUITMENT AND TRAINING OF ADDITIONAL FAMILY LEADERS (TRAIN
 THE TRAINER); (4) SYSTEM IDENTIFICATION FOR BARRIER REDUCTION; (4) DEVELOPMENT OF
 PROCESS FOR FAMILY LEADERS TO NEGOTIATE AND ACCESS FAMILY SUPPORT SERVICES; (5)
 INCREASED THE FAMILY KNOWLEDGE OF FAMILY SUPPORT SERVICES WITHIN THE SERVICE SYSTEM,
 AND (6) GRADUATE 50 FAMILY LEADERS IN THE OVERALL PROJECT.

AMERICORPS VISTA IS A NATIONAL SERVICE PROGRAM DESIGNED SPECIFICALLY TO FIGHT

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POVERTY. AMERICORPS VISTA MEMBERS FOCUS ON CAPACITY BUILDING ACTIVITIES TO STRENGTHEN COMMUNITY AGENCIES THROUGHOUT THE COUNTRY WORKING TO FIGHT ILLITERACY, IMPROVE HEALTH SERVICES, REDUCE UNEMPLOYMENT, INCREASE HOUSING OPPORTUNITIES, IMPROVE EDUCATIONAL OUTCOMES AND MORE. THE ALLIANCE'S MISSION IS TO SERVE, SUPPORT, PROTECT, AND PROMOTE THE NONPROFIT SECTOR WITHIN ARIZONA. THROUGH A GRANT FROM THE CORPORATION FOR NATIONAL AND COMMUNITY SERVICE, THE ALLIANCE HAS THE OPPORTUNITY TO PARTNER WITH LOCAL ORGANIZATIONS THROUGHOUT THE STATE TO COORDINATE AMERICORPS*VISTA PROJECTS.

FORM 990, PART III, LINE 1 - ORGANIZATION MISSION

AMISTADES, INC. (AMISTADES) IS A LATINO-LED, LATINO-SERVING, 501(C)3 NON-PROFIT COMMUNITY DEVELOPMENT ORGANIZATION SERVING PIMA COUNTY AND SOUTHERN ARIZONA. THE MISSION OF AMISTADES IS TO PROVIDE CULTURALLY COMPETENT PREVENTION, EDUCATION AND SOCIAL SERVICES TO LATINO COMMUNITIES. AMISTADES HAS THREE BASIC FOCUS AREAS: SUBSTANCE ABUSE PREVENTION SERVICES TO HIGH-RISK YOUTH AND FAMILIES, PARENT EDUCATION PROGRAMS FOR LOW-INCOME FAMILIES, AND SOCIAL JUSTICE, CULTURAL, AND HISTORICAL INITIATIVES FOR THE LATINO COMMUNITY. AMISTADES HAS ESTABLISHED ITSELF AS A LEADER IN THE PREVENTION COMMUNITY BY DEVELOPING AND IMPLEMENTING PROGRAMS, STRATEGIES AND ACTIVITIES GROUNDED IN GRASSROOTS OUTREACH AND CULTURAL COMPETENCE.

FORM 990, PART VI, LINE 2 - BUSINESS OR FAMILY RELATIONSHIP OF OFFICERS, DIRECTORS, ETC.

RICARDO JASSO, PRESIDENT AND CEO, IS THE FATHER OF CLAUDIA JASSO-STEVENSON, AN EMPLOYEE AND FORMER BOARD MEMBER. CLAUDIA JASSO-STEVENSON, AN EMPLOYEE AND FORMER BOARD MEMBER, OWNS A FUND DEVELOPMENT AND EVENT PLANNING BUSINESS THAT IS COMPENSATED BY THE ORGANIZATION. BOARD MEMBER FRANCESCA LOMONACO IS THE DAUGHTER OF RICARDO JASSO AND THE SISTER OF CLAUDIA JASSO-STEVENSON.

FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

THE FORM 990 IS SENT TO THE ENTIRE GOVERNING BOARD. THEY REVIEW IT THEN APPROVE IT FOR FINAL FILING.

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FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL PROCESS - CEO, TOP MANAGEMENT

THE BOARD MEETS INDEPENDENTLY OF THE PRESIDENT/CEO AND DISCUSSES AND APPROVES HIS
SALARY. AMOUNT IS DEPENDENT ON SIMILAR POSITIONS IN THE COMMUNITY AND AVAILABILITY
OF GRANTS TO FUND THE POSITION.

FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

UPON REQUEST

2013

SCHEDULE O - SUPPLEMENTAL INFORMATION

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AMISTADES INC

20-5274049

FORM 990, PART IX, LINE 11G
OTHER FEES FOR SERVICES

| | (A) TOTAL | (B) PROGRAM SERVICES | (C) MANAGEMENT & GENERAL | (D) FUND- RAISING |
|-----------------------------|-------------------|----------------------------|--------------------------------|-------------------------|
| OTHER CONTRACT SERVICES | 3,470. | | | 3,470. |
| PROGRAM SERVICE CONSULTANTS | 40,204. | 38,194. | 2,010. | |
| TOTAL | <u>\$ 43,674.</u> | <u>\$ 38,194.</u> | <u>\$ 2,010.</u> | <u>\$ 3,470.</u> |