Sanchez, Rodzandra (COE)

From: Diaz-Greco, Gilma M. (COE)

Sent: Thursday, April 06, 2017 4:15 PM

To: Sanchez, Rodzandra (COE)

Subject: Melinda Pearson, Capital Inventory Clerk, Miami-Dade Internal Services Department

(Conflict of Interest, Outside Employment) INQ 17-107

Attachments: 20170330151228864.pdf

INQ 17-107 Pearson

From: Diaz-Greco, Gilma M. (COE) Sent: Thursday, April 06, 2017 4:14 PM

To: Pearson, Melinda (ISD) < Melinda. Pearson@miamidade.gov>

Cc: Centorino, Joseph (COE) < Joseph. Centorino@miamidade.gov>; Murawski, Michael P. (COE)

<Michael.Murawski@miamidade.gov>; Perez, Martha D. (COE) <perezmd@miamidade.gov>; Turay, Radia (COE)

<Radia.Turay@miamidade.gov>

Subject: Melinda Pearson, Capital Inventory Clerk, Miami-Dade Internal Services Department (Conflict of Interest,

Outside Employment) INQ 17-107

Dear Ms. Pearson:

You inquired whether a prohibited conflict of interest would exist if the not-for profit organization that you established were to partner with the County's Community Action Human Services Department (CAHSD).

Background

You have provided the following information as background:

- You are employed by the Public Legislation Service Bureau (PLSB) of the Miami-Dade Internal Services Department (ISD) as a Capital Inventory Clerk.
- You have also established "A Woman of Many Faces" (AWOMF); a 501 (c)(3) not-for profit organization. AWOMF' focus is on ministering to victims of domestic abuse and human trafficking, providing victims with basic personal care items such as toiletries, conducting workshops on this issue, and working with various law enforcement agencies and other organizations within the community to bring awareness and assist individuals throughout the County.
- You serve as President and Director of AWOMF and administer the not-for-profit and its volunteers on an uncompensated basis. This takes approximately 20 hours of your time a week which is performed outside of your County hours of employment.
- The organization receives small donations from individuals as well and religious organizations.
- You would like to partner with CAHSD's Violence Prevention and Intervention Division to refer victims of domestic violence and human trafficking to applicable programs and services provided to these victims by the County.

Legal Analysis

The first issue to address is that of outside employment. In this case, you advise that you founded and are the director of AWOMF and spend approximately 20 hours in the management and administration of this organization and its volunteers. The COE has found in its informal opinions, that in cases such as the one here, where a County employee establishes and manages a not-for-profit entity and provides services, such as management services to that entity that

would be normally be compensated, that employee is engaged in outside employment. INQ 13-08. You advise that you completed the Outside Employment Request Form and have been granted permission to engage in outside employment. Please remember that both the <u>Outside Employment Request Form</u> and the <u>Outside Employment Statement</u> need to be completed on a yearly basis. Miami Dade Code §§2-11 and 2-11.1(k)(2).

With respect to referrals to CAHSD, nothing in the County code prohibits you from referring any of the victims that your organization works with to victim assistance programs administered by the County.

Please also note that Section 2-11.1(m)(1) of the County Ethics Code prohibits County employees from lobbying or appearing before any County board, department, or agency on behalf of the not-for-profit. INQ 11-01, INQ 11-88. This Section would also prohibit you from making a presentation or appearing before a County agency or board seeking a grant for AWOMF. INQ 12-13. Nevertheless, someone else from your organization may appear before a County agency or board to seek a grant. You also may not, in any way, exploit you County position to benefit AWOMF. Miami-Dade Code §2-11.1(g).

Finally, if AWOMF ever sought to enter into a contract with the County, you should request an opinion from the Ethics Commission at that time to ensure that no conflict of interest exists.

This opinion is based on the facts presented. If these facts change, please contact us. If you have any questions please contact me at (305) 350-0638.

Sincerely,

Gilma (Mimi) Diaz-Greco Staff Attorney



Miami-Dade Commission on Ethics and Public Trust 19 W. Flagler Street, Suite 820 Miami. FL 33130

Tel: (305) 579-2594 Fax: (305) 579-0273 gdiazgr@miamidade.gov

www.facebook.com/MiamiDadeEthics

From: Pearson, Melinda (ISD)

Sent: Thursday, March 30, 2017 3:21 PM

To: Diaz-Greco, Gilma M. (COE) < Gilma.Diaz-Greco@miamidade.gov >

Subject: REF: Melinda Pearson/ Outside employment

Good afternoon, Mrs. Gilma, Please find attached my approved outside employment forms and additional paperwork pertaining to my business that you requested. If you have any questions or concerns please feel free to call me on my cell @954-274-6808.

Thank you,



300.03.011 1 of 2

REQUEST FOR OUTSIDE EMPLOYMENT - ISD

Sections 2-11.1(J) and (k) of the Miami-Dade Code provide that County employees may accept incidental or occasional outside employment as long as the employment is not contrary, detrimental, or adverse to the interests of the County and as long as **no County time**, **equipment**, **or other resources are used**. Miami-Dade County Administrative Order 7-1 and Procedure 403 require that any **full-time or part-time** County employee intending to engage in outside employment must first obtain approval from his/her Department Director using this **Request for Outside Employment** form. These approvals must be renewed on an annual basis. Copies of all outside employment approvals shall be maintained in the centralized personnel files of the Human Resources Department. Each County Department shall also maintain appropriate records regarding outside employment requests. Full-time County employees engaging in outside employment must also file an **Outside Employment Statement form** with the Elections Department by July 1st of each year, in accordance with Section 2-11.1(k)(2) of the Miami-Dade County Code. More detailed information on outside employment is available on the Miami-Dade Commission on Ethics website at: http://ethics.miamidade.gov/outside-employment.asp.

Employee's Name	elima (PEARSON	******	Employee ID Number
Present County En	ployment			0100210
Department INTERNA	L SERVICES DEPA	RTMENT	Position or Title	Inventory Clerk
Job Responsibilities R	esponsible) for Keeping	track of	Capital assets for
Miami Bade	for all de			enty, etc.
Proposed Outside	Employment	1		(1
Name of Company/ Organization:	A Monar	OF MANU	Facesn	ninistry Inc.
Job Title:	Founder	Presiden	τ ,	
Responsibilities:	mentor 40 exploitation	una airisex	posed to h	uman Traffiching Child
Location	2281 nu	135St	,	1
Work Schedule:	mon-sun-	AFTER INORK	Total Hours Per We	ek: 20-30
Will your proposed outside	e employer release y		ices are needed by t	he County? Yes No
n my outside employment,	I am employed by or	ne of the following types	of organizations:	
☐ Company or organization th	nat is <u>not</u> a County vend	dor.		
ethics opinion is available a employee is required to file a	t <u>http://ethics.miamidad</u> sworn affidavit with the	le.gov/library/forms/county County Clerk of the Board dis	employee seeking to	nflict of interest exists. The form to request an be a county vendor 2013.pdf. Also, the County to the affidavit form can be found at clerkbcc@miamidade.gov.)
√ Self-employed through my particle County, you are required to http://ethics.miamidade.gov	request an ethics opini	on. The form to request an	ethics oninion is availab	ness is seeking to contract with Miami-Dade le at Idf.)
employee. (If the company th	at is owned by your imme	ediate family member is seekir	a to contract with Miami-I	, parents, stepparents, children, and stepchildren or Dade County, an ethics opinion is required. The form seeking to be a county vendor 2013,pdf.)
understand that this approval Director reserves the right to re conflict with or be related to my	evoke this permission a	at any time. I affirm that th	ove and must be renew e outside employment	ved each year. I further understand that the ISD will not occur during my work hours and will not
affirm that the information (have provided is true,	and I pledge to abide by	the requirements liste	ed here.
Employee Sig	mature V	1-19-11 Date	1	
APPROY		01/19/	17	NOT APPROVED
R - Cul Supervisor	or	Al 10 /1		Supervisor
Division Dire	ector	Date		Division Director
Assistant Dir	- Anno	Date	17/	Assistant Director
ISD Department	Diregio	Date		ISD Department Director

Revised 01/09/2017 (ISD) (2nd Version)

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300.03.011 2 of 2

REQUEST FOR OUTSIDE EMPLOYMENT - ISD

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employment.asp.		
Employee's Name Welinda Pear	SON	Employee ID Number
Present County Employment		
Department INTERNAL SERVICES DEPARTME Job Responsibilities TESPONSIBLE FOR THE	ENT Position or Keeping + rocking the deportment	ital Inventory Clerk
Proposed Outside Employment		
Name of Company/ Organization: Job Title:	Perfumes resident	
Responsibilities: SoleS Mor	- Hotion	
Location 2381 NO 13	35,5+ (
Work Schedule: Mon-FRI. So	Total Hour	s Per Week: 20-30
Will your proposed outside employer release you if a	nd when your services are ne	eded by the County? Yes No
In my outside employment, I am employed by one of the	ne following types of organizat	ions:
☐ Company or organization that is <u>not</u> a County vendor.		
Company or organization that is a County vendor. (An Ethics O ethics opinion is available at http://ethics.miamidade.gov/lemployee is required to file a sworn affidavit with the County http://ethics.miamidade.gov/outside-employment.asp and	ibrary/forms/county_employee_se	exing to be a county vendor 2013.pdf. Also, the County
Self-employed through my private business, whether incor County, you are required to request an ethics opinion. The http://ethics.miamidade.gov/library/forms/county_employe	rporated or not. (If your privately o	owned business is seeking to contract with Miami-Dade
Company or organization owned by an immediate family me employee. (If the company that is owned by your immediate fa to request an ethics opinion is available at http://ethics.mia	mily member is seeking to contract y	with Miami-Dade County an ethics opinion is required. The form
I understand that this approval is valid only for the outside e Director reserves the right to revoke this permission at any t conflict with or be related to my duties and responsibilities as a	time. I affirm that the outside en	of the renewed each year. I further understand that the ISD apployment will not occur during my work hours and will not
affirm that the information I have provided is true, and I Employee Signature	pledge to abide by the requirer	nents listed here.
TAPAROVED .	01/19/17	NOT APPROVED
Supervisor Supervisor	2/10/17	Supervisor
Division Director	Date	Division Director
Assistant Director	2 Pate 17	Assistant Director
ISD Department Director	Date	ISD Department Director

Revised 01/09/2017 (ISD) (2nd Version)

rec'd 2/10/17 L

Date: MAR 1 7 2017

A WOMAN OF MANY FACES MINISTRY INC PO BOX 520333 MIAMI, FL 33152-0000

Employer Identification Number: 81-4431497 DLN: 26053466001827 Contact Person: CUSTOMER SERVICE ID# 31954 Contact Telephone Number: (877) 829-5500 Accounting Period Ending: December 31 Public Charity Status: 509(a)(2) Form 990/990-EZ/990-N Required: Effective Date of Exemption: November 10, 2016 Contribution Deductibility:

Dear Applicant:

We're pleased to tell you we determined you're exempt from federal income tax under Internal Revenue Code (IRC) Section 501(c)(3). Donors can deduct contributions they make to you under IRC Section 170. You're also qualified to receive tax deductible bequests, devises, transfers or gifts under Section 2055, 2106, or 2522. This letter could help resolve questions on your exempt status. Please keep it for your records.

No

Addendum Applies:

Organizations exempt under IRC Section 501(c)(3) are further classified as either public charities or private foundations. We determined you're a public charity under the IRC Section listed at the top of this letter.

If we indicated at the top of this letter that you're required to file Form 990/990-EZ/990-N, our records show you're required to file an annual information return (Form 990 or Form 990-EZ) or electronic notice (Form 990-N, the e-Postcard). If you don't file a required return or notice for three consecutive years, your exempt status will be automatically revoked.

If we indicated at the top of this letter that an addendum applies, the enclosed addendum is an integral part of this letter.

For important information about your responsibilities as a tax-exempt organization, go to www.irs.gov/charities. Enter "4221-PC" in the search bar to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

A WOMAN OF MANY FACES MINISTRY INC

Sincerela

Jeffrey I. Cooper Director, Exempt Organizations Rulings and Agreements

Date of this notice: 11-16-2016

Employer Identification Number: 81-4431497

Form: SS-4

Number of this notice: CP 575 E

A WOMAN OF MANY FACES MINISTRY INC PO BOX 520333 MIAMI, FL 33152

For assistance you may call us at: 1-800-829-4933

IF YOU WRITE, ATTACH THE STUB AT THE END OF THIS NOTICE.

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 81-4431497. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

When filing tax documents, payments, and related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear-off stub and return it to us.

When you submitted your application for an EIN, you checked the box indicating you are a non-profit organization. Assigning an EIN does not grant tax-exempt status to non-profit organizations. Publication 557, Tax-Exempt Status for Your Organization, has details on the application process, as well as information on returns you may need to file. To apply for recognition of tax-exempt status under Internal Revenue Code Section 501(c)(3), organizations must complete a Form 1023-series application for recognition. All other entities should file Form 1024 if they want to request recognition under Section 501(a).

Nearly all organizations claiming tax-exempt status must file a Form 990-series annual information return (Form 990, 990-EZ, or 990-PF) or notice (Form 990-N) beginning with the year they legally form, even if they have not yet applied for or received recognition of tax-exempt status.

Unless a filing exception applies to you (search www.irs.gov for Annual Exempt Organization Return: Who Must File), you will lose your tax-exempt status if you fail to file a required return or notice for three consecutive years. We start calculating this three-year period from the tax year we assigned the EIN to you. If that first tax year isn't a full twelve months, you're still responsible for submitting a return for that year. If you didn't legally form in the same tax year in which you obtained your EIN, contact us at the phone number or address listed at the top of this letter.

For the most current information on your filing requirements and other important information, visit www.irs.gov/charities.

IMPORTANT REMINDERS:

- * Keep a copy of this notice in your permanent records. This notice is issued only one time and the IRS will not be able to generate a duplicate copy for you. You may give a copy of this document to anyone asking for proof of your EIN.
- * Use this EIN and your name exactly as they appear at the top of this notice on all your federal tax forms.
- * Refer to this EIN on your tax-related correspondence and documents.
- * Provide future officers of your organization with a copy of this notice.

Your name control associated with this EIN is AWOM. You will need to provide this information, along with your EIN, if you file your returns electronically.

If you have questions about your EIN, you can contact us at the phone number or address listed at the top of this notice. If you write, please tear off the stub at the bottom of this notice and include it with your letter. Thank you for your cooperation.

Keen	this	nart	for	vour	records.
TOCK	CITTD	Part	TOT	your	TECOTOP *

CP 575 E (Rev. 7-2007)

Return this part with any correspondence so we may identify your account. Please correct any errors in your name or address.

CP 575 E

9999999999

Your	Telephone Number	Best Time to Call	DATE OF	THIS NOTICE:	11-16-2016	
() –		EMPLOYER	R IDENTIFICATION	ON NUMBER:	81-4431497
			FORM: S	SS-4	NOBOD	

INTERNAL REVENUE SERVICE
CINCINNATI OH 45999-0023

A WOMAN OF MANY FACES MINISTRY INC PO BOX 520333 MIAMI, FL 33152



Open with

NO THANKS

YES

Gmail

IRS DEPARTMENT OF THE TREASURY
INTERNAL REVENUE SERVICE
CINCINNATI OH 45999-0023

COMPOSI

Inbox (1,752) Starred Important Sent Mail Drafts (9) Circles

A WOMAN OF MANY FACES MINISTRY INC PO BOX 520333 MIAMI, FL 33152

Date of this notice: 11-16-2016 Employer Identification Number: 81-4431497

Form: SS-4

Number of this notice: CP 575 E

For assistance you may call us at: 1-800-829-4933

IF YOU WRITE, ATTACH THE STUB AT THE END OF THIS NOTICE.

M Mendy

Unwanted

More

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For the most current information on your filing requirements and other important information, visit www.irs.gov/charities.

(IRS USE ONLY) 575E

11-16-2016 AWOM O 9999999999 SS-4

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- $^{\star}\,$ Use this EIN and your name exactly as they appear at the top of this notice on all your federal tax forms.
- * Refer to this EIN Baggour tax-refated correspondence and documents.
- * Provide future officers of your organization with a copy of this notice.

Detail by Entity Name

Florida Not For Profit Corporation

A WOMAN OF MANY FACES MINISTRY, INC.

Filing Information

Document Number

N16000011023

FEI/EIN Number

NONE

Date Filed

11/10/2016

State

FL

Status

ACTIVE

Principal Address

2281 NW 135TH ST #116

MIAMI, FL 33167

Mailing Address

P.O. BOX 520333

MIAMI, FL 33152

Registered Agent Name & Address

PEARSON, MELINDA

2281 NW 135TH ST #116

MIAMI, FL 33167

Officer/Director Detail

Name & Address

Title PD

PEARSON, MELINDA

PO BOX 520333

MIAMI, FL 33152

Title SD

ANDERSON, ĢENIA

PO BOX 520333

MIAMI, FL 33152

Title TD

OLIVER, BARBARA

PO BOX 520333

MIAMI, FL 33152

Annual Reports

No Annual Reports Filed

Document Images

No images are available for this filing.



South Florida Human Trafficking Task Force Membership Application and Update Form

To apply for membership and/or to update agency information please complete the following questions:

complete the felletting queetiene.
1. Organization/Agency Name: A Woman OF Many Faces Ministry Inc
2. Individual Applicant Name and Date of Birth: Melino Pearson
August 11,1970
3. Address: RO Box 520333 Miami, FU 33152
4. Main Telephone Number/Point of Contact: <u> </u>
5. Website:
6. Email: A Woman Ot Many Faces & O. Comail. Com
7. Agency Owner/CEO/President/Director/etc: Melinda Pearson Founder &
8. Discription of Organization/Services Provided: \\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \
etc for young ladies, minister to them provide
referrals to other organization such as Clory House etc.
9. Additional Information (Organization License Number/Other): \(\int\int\int\int\int\int\int\int\int\int
Entity not In Sunbiz
Thanks for your submission and participation

(All collected information is used for processing membership requests and updating purposes only)