

NEW YORK CITY CONFLICTS OF INTEREST BOARD
Annual Disclosure Report for Calendar Year 2019

CANDIDATES FOR ELECTION

FILER PROFILE

The information on this page is available to the public.

<input type="text" value="Diaz"/>	<input type="text" value="Darma"/>	<input type="text" value="V"/>		
Last Name	First Name	M.I.		
<input type="text" value="OverComing Love Ministries"/>	<input type="text" value="Housing Director/Case Manager"/>			
Name of Employer	Position			
<input type="text" value="228 Pulaski Street"/>	<input type="text" value="Brooklyn"/>	<input type="text" value="NY"/>	<input type="text" value="11206"/>	<input type="text" value="(718) 443-2264"/>
Business Address	City	State	Zip	Business Phone

- Candidate for General Election Candidate for Vacancy
- Write-In Candidate

- Mayor
- Public Advocate
- Comptroller
- District Attorney of _____ County
- Borough President of _____ County
- Council Member from the 37th Council District

PART I

Questions 1 through 21 are to be completed with respect to you the filer.

To ensure that you complete this form fully and accurately, it is necessary that you read all instructions carefully. You are responsible for providing all information requested by each question and for complying with all instructions.

1. **CITY EMPLOYMENT:** During the reporting year, did you have any employment or service with the City?

Yes No

Entry 1:

City Entity				Position	
Address of City Entity	City	State	Zip	Nature of Income	
Amount of Income					

Entry 2:

City Entity				Position	
Address of City Entity	City	State	Zip	Nature of Income	
Amount of Income					

2. **NON-CITY EMPLOYMENT/BUSINESS:** During the reporting year, did you engage in any non-City employment or business?

Yes No

Entry 1:

OverComing Love Ministries	Homeless Shelter	Housing Director/Case Manager	
Name of Employer/Business	Nature of Business	Position	
228 Pulaski Street	Brooklyn	NY	11206
Business Address	City	State	Zip

Was this employer or business licensed or regulated by any State or local agency? Yes, by local

Did this employer or business have business dealings with or non-ministerial matters before a State or local agency? Unknown

Entry 2:

Name of Employer/Business	Nature of Business	Position	
Business Address	City	State	Zip

Was this employer or business licensed or regulated by any State or local agency? _____

Did this employer or business have business dealings with or non-ministerial matters before a State or local agency? _____

Entry 3:

Name of Employer/Business	Nature of Business	Position	
Business Address	City	State	Zip

Was this employer or business licensed or regulated by any State or local agency? _____

Did this employer or business have business dealings with or non-ministerial matters before a State or local agency? _____

3. **REGULATED PROFESSIONS:** During the reporting year, did you practice law or were you a licensed real estate broker or agent or did you practice a profession licensed by the State Department of Education?

Yes No

Entry 1:

Licensed Profession

Provide a general description of the principal subject areas of matters undertaken by you during the reporting year. If you are a licensed professional but did not practice during the reporting year, enter "Did not practice" in this field.

Were you, or are you now, a partner or shareholder of the entity? Yes No

If a partner or shareholder, give a general description of the principal subject areas of matters undertaken by the firm or corporation during the reporting year.

Entry 2:

Licensed Profession

Provide a general description of the principal subject areas of matters undertaken by you during the reporting year. If you are a licensed professional but did not practice during the reporting year, enter "Did not practice" in this field.

Were you, or are you now, a partner or shareholder of the entity? Yes No

If a partner or shareholder, give a general description of the principal subject areas of matters undertaken by the firm or corporation during the reporting year.

4. **POSITIONS:** During the reporting year, did you hold any office, position, trusteeship, directorship, or partnership, whether compensated or not, including any honorary position, other than a position within the City or State of New York or a political position?

Yes No

Entry 1:

Brownsville Multi Services Center	Board Member
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Name of Entity Position

Was this employer or business licensed or regulated by any State or local agency? Yes, by State and local

Did this employer or business have business dealings with or non-ministerial matters before a State or local agency? Yes, before State and local

Entry 2:

YMCA	Board Member
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Name of Entity Position

Was this employer or business licensed or regulated by any State or local agency? Yes, by State and local

Did this employer or business have business dealings with or non-ministerial matters before a State or local agency? Unknown

Entry 3:

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Name of Entity Position

Was this employer or business licensed or regulated by any State or local agency? _____

Did this employer or business have business dealings with or non-ministerial matters before a State or local agency? _____

Entry 4:

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Name of Entity Position

Was this employer or business licensed or regulated by any State or local agency? _____

Did this employer or business have business dealings with or non-ministerial matters before a State or local agency? _____

5. **POLITICAL POSITIONS:** During the reporting year, did you hold a position as an officer of any political party or political organization or as a member of any political party committee or as a political party district leader?

Yes No

Entry 1:

Democratic Party	District Leader
Name of Organization	Position

Entry 2:

NY State Democratic Committee	State Committee Woman
Name of Organization	Position

Entry 3:

Name of Organization	Position

6. **NON-CITY INCOME:** During the reporting year, did you receive any income of \$1,000 or more from any source (e.g., bank interest), other than from your City position and other than from non-City employment or a business?

Yes No

Entry 1:

<input type="text"/>	<input type="text"/>
Source of Income	Nature of Income
<input type="text"/>	
Amount of Income	

Entry 2:

<input type="text"/>	<input type="text"/>
Source of Income	Nature of Income
<input type="text"/>	
Amount of Income	

Entry 3:

<input type="text"/>	<input type="text"/>
Source of Income	Nature of Income
<input type="text"/>	
Amount of Income	

Entry 4:

<input type="text"/>	<input type="text"/>
Source of Income	Nature of Income
<input type="text"/>	
Amount of Income	

Entry 5:

<input type="text"/>	<input type="text"/>
Source of Income	Nature of Income
<input type="text"/>	
Amount of Income	

7. **DEFERRED INCOME:** During the reporting year, or any time before the reporting year, did you earn any deferred income (your deferred compensation plan should be reported in the “Trusts, Estates, and Other Beneficial Interest” question) of \$1,000 or more which was paid or was to be paid after the close of the reporting year?

Yes No

Entry 1:

Source of Income

Amount of Income

Entry 2:

Source of Income

Amount of Income

Entry 3:

Source of Income

Amount of Income

Entry 4:

Source of Income

Amount of Income

Entry 5:

Source of Income

Amount of Income

8. **PAYMENTS FOR CITY-RELATED TRAVEL:** During the reporting year, did any non-governmental entity or person pay for travel-related expenses in an amount of \$1,000 or more for activities related to your official duties with the City by either reimbursing you or paying the travel-related expenses directly on your behalf?

Yes No

Entry 1:

<input type="text"/>	<input type="text"/>
Source of Income	Value of Payments

Description of Expenses Reimbursed or Paid for Directly

Entry 2:

<input type="text"/>	<input type="text"/>
Source of Income	Value of Payments

Description of Expenses Reimbursed or Paid for Directly

Entry 3:

<input type="text"/>	<input type="text"/>
Source of Income	Value of Payments

Description of Expenses Reimbursed or Paid for Directly

Entry 4:

<input type="text"/>	<input type="text"/>
Source of Income	Value of Payments

Description of Expenses Reimbursed or Paid for Directly

Entry 5:

<input type="text"/>	<input type="text"/>
Source of Income	Value of Payments

Description of Expenses Reimbursed or Paid for Directly

9. **GIFTS (CITY BUSINESS):** During the reporting year, did you receive any gift or gifts from the same person, entity, or donor or affiliated donors who had business dealings with the City, other than a relative, in the total amount or with a total value of \$50 or more?

Yes No

Entry 1:

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Name of Donor

Value of Gift

Nature of Gift

Entry 2:

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Name of Donor

Value of Gift

Nature of Gift

Entry 3:

--	--

Name of Donor

Value of Gift

Nature of Gift

Entry 4:

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Name of Donor

Value of Gift

Nature of Gift

Entry 5:

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Name of Donor

Value of Gift

Nature of Gift

10. **GIFTS (NO CITY BUSINESS):** During the reporting year, did you receive any gift or gifts from the same person, entity, or donor or affiliated donors who had no business dealings with the City, other than a relative, in the total amount or with a total value of \$1,000 or more?

Yes No

Entry 1:

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Name of Donor

Value of Gift

Nature of Gift

Entry 2:

--	--

Name of Donor

Value of Gift

Nature of Gift

Entry 3:

--	--

Name of Donor

Value of Gift

Nature of Gift

Entry 4:

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Name of Donor

Value of Gift

Nature of Gift

Entry 5:

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Name of Donor

Value of Gift

Nature of Gift

11. **TRANSFER OF MONEY OR PROPERTY:** During the reporting year, did you assign income of \$1,000 or more to any person, including a relative, or transfer any interest having a value of \$1,000 or more in a trust, estate, other beneficial interest, securities, or real property to a non-relative for less than fair consideration?

Yes No

Entry 1:

<input type="text"/>	<input type="text"/>
Item or Interest Assigned or Transferred	Person or Entity Assigned or Transferred To
<input type="text"/>	
Value of Item or Interest Assigned or Transferred	

Entry 2:

<input type="text"/>	<input type="text"/>
Item or Interest Assigned or Transferred	Person or Entity Assigned or Transferred To
<input type="text"/>	
Value of Item or Interest Assigned or Transferred	

Entry 3:

<input type="text"/>	<input type="text"/>
Item or Interest Assigned or Transferred	Person or Entity Assigned or Transferred To
<input type="text"/>	
Value of Item or Interest Assigned or Transferred	

Entry 4:

<input type="text"/>	<input type="text"/>
Item or Interest Assigned or Transferred	Person or Entity Assigned or Transferred To
<input type="text"/>	
Value of Item or Interest Assigned or Transferred	

Entry 5:

<input type="text"/>	<input type="text"/>
Item or Interest Assigned or Transferred	Person or Entity Assigned or Transferred To
<input type="text"/>	
Value of Item or Interest Assigned or Transferred	

12. **AGREEMENTS FOR FUTURE PAYMENTS:** During the reporting year, did you have any agreements with a former or current employer, other than the City of New York, for future payments or benefits?

Yes No

Entry 1:

Parties to the Agreement

Terms of the Agreement

Entry 2:

Parties to the Agreement

Terms of the Agreement

13. **AGREEMENTS FOR FUTURE EMPLOYMENT:** During the reporting year, did you have any contract, promise, or agreement with any person or entity with respect to your employment after leaving your City office or position?

Yes No

Entry 1:

Name of the Parties to the Promise or Agreement

Terms of the Promise or Agreement

Entry 2:

Name of the Parties to the Promise or Agreement

Terms of the Promise or Agreement

14. **INTEREST IN GOVERNMENT CONTRACTS:** During the reporting year, did you, or any partnership of which you are a member or any corporation 10% or more of whose stock you own or control, have any interest of \$1,000 or more, excluding bonds and notes, in any contract made or executed by a State agency or local agency?

Yes No

Entry 1:

<input type="text"/>	<input type="text"/>
Entity Which Holds Interest in Contract	Your Relationship to Contracting Entity
<input type="text"/>	<input type="text"/>
Contracting State or Local Agency	Nature of Your Interest
<input type="text"/>	<input type="text"/>
	Value of Interest in Contract

Entry 2:

<input type="text"/>	<input type="text"/>
Entity Which Holds Interest in Contract	Your Relationship to Contracting Entity
<input type="text"/>	<input type="text"/>
Contracting State or Local Agency	Nature of Your Interest
<input type="text"/>	<input type="text"/>
	Value of Interest in Contract

Entry 3:

<input type="text"/>	<input type="text"/>
Entity Which Holds Interest in Contract	Your Relationship to Contracting Entity
<input type="text"/>	<input type="text"/>
Contracting State or Local Agency	Nature of Your Interest
<input type="text"/>	<input type="text"/>
	Value of Interest in Contract

Entry 4:

<input type="text"/>	<input type="text"/>
Entity Which Holds Interest in Contract	Your Relationship to Contracting Entity
<input type="text"/>	<input type="text"/>
Contracting State or Local Agency	Nature of Your Interest
<input type="text"/>	<input type="text"/>
	Value of Interest in Contract

Entry 5:

<input type="text"/>	<input type="text"/>
Entity Which Holds Interest in Contract	Your Relationship to Contracting Entity
<input type="text"/>	<input type="text"/>
Contracting State or Local Agency	Nature of Your Interest
<input type="text"/>	<input type="text"/>
	Value of Interest in Contract

15. **TRUSTS, ESTATES, AND OTHER BENEFICIAL INTERESTS:** During the reporting year, did you hold any trust, estate, or other beneficial interest (such as an Individual Retirement Account (IRA)) of \$1,000 or more, **including New York City or New York State deferred compensation plans** but excluding membership in New York City or New York State retirement systems, and excluding any interest in a trust, estate, or other beneficial interest established by or for a relative or by or for the estate of a relative?

Yes No

Entry 1:

<input type="text"/>	<input type="text"/>
Identity of Beneficial Interest	Nature of Beneficial Interest
<input type="text"/>	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
Value of Beneficial Interest	Contents of Trust Unknown?

Entry 2:

<input type="text"/>	<input type="text"/>
Identity of Beneficial Interest	Nature of Beneficial Interest
<input type="text"/>	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
Value of Beneficial Interest	Contents of Trust Unknown?

Entry 3:

<input type="text"/>	<input type="text"/>
Identity of Beneficial Interest	Nature of Beneficial Interest
<input type="text"/>	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
Value of Beneficial Interest	Contents of Trust Unknown?

Entry 4:

<input type="text"/>	<input type="text"/>
Identity of Beneficial Interest	Nature of Beneficial Interest
<input type="text"/>	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
Value of Beneficial Interest	Contents of Trust Unknown?

Entry 5:

<input type="text"/>	<input type="text"/>
Identity of Beneficial Interest	Nature of Beneficial Interest
<input type="text"/>	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
Value of Beneficial Interest	Contents of Trust Unknown?

16. **INVESTMENTS IN A BUSINESS:** During the reporting year, did you have an investment of \$1,000 or more in a business, other than an investment in securities or an interest in real property?

Yes No

Entry 1:

People Unity Logistically for Social Equality	PULSE	Consulting		
Name of Business	Doing Business As, if any		Nature of Business	
Name of Parent Company, if any	Names of Subsidiaries, if any			
				\$1,000.00 - \$4,999.99
Business Address	City	State	Zip	Value of Investment

Entry 2:

Name of Business	Doing Business As, if any		Nature of Business	
Name of Parent Company, if any	Names of Subsidiaries, if any			
Business Address	City	State	Zip	Value of Investment

Entry 3:

Name of Business	Doing Business As, if any		Nature of Business	
Name of Parent Company, if any	Names of Subsidiaries, if any			
Business Address	City	State	Zip	Value of Investment

Entry 4:

Name of Business	Doing Business As, if any		Nature of Business	
Name of Parent Company, if any	Names of Subsidiaries, if any			
Business Address	City	State	Zip	Value of Investment

17. **SECURITIES:** At the close of the reporting year, did you hold any security having a market value of \$1,000 or more?

Yes No

Entry 1:

<input type="text"/>	<input type="text"/>	<input type="text"/>
Issuing Entity	Type of Security	Market Value at the Close of The Reporting Year
<input type="text"/>		
% of Ownership	Held for You in Trust <input type="radio"/> Yes <input type="radio"/> No	Jointly Held <input type="radio"/> Yes <input type="radio"/> No

If you own over 50% of the stock of this company, you must answer the next two questions:

Does this company own real estate for investment purposes? Yes No
Does this company own securities for investment purposes? Yes No

Entry 2:

<input type="text"/>	<input type="text"/>	<input type="text"/>
Issuing Entity	Type of Security	Market Value at the Close of The Reporting Year
<input type="text"/>		
% of Ownership	Held for You in Trust <input type="radio"/> Yes <input type="radio"/> No	Jointly Held <input type="radio"/> Yes <input type="radio"/> No

If you own over 50% of the stock of this company, you must answer the next two questions:

Does this company own real estate for investment purposes? Yes No
Does this company own securities for investment purposes? Yes No

Entry 3:

<input type="text"/>	<input type="text"/>	<input type="text"/>
Issuing Entity	Type of Security	Market Value at the Close of The Reporting Year
<input type="text"/>		
% of Ownership	Held for You in Trust <input type="radio"/> Yes <input type="radio"/> No	Jointly Held <input type="radio"/> Yes <input type="radio"/> No

If you own over 50% of the stock of this company, you must answer the next two questions:

Does this company own real estate for investment purposes? Yes No
Does this company own securities for investment purposes? Yes No

Entry 4:

<input type="text"/>	<input type="text"/>	<input type="text"/>
Issuing Entity	Type of Security	Market Value at the Close of The Reporting Year
<input type="text"/>		
% of Ownership	Held for You in Trust <input type="radio"/> Yes <input type="radio"/> No	Jointly Held <input type="radio"/> Yes <input type="radio"/> No

If you own over 50% of the stock of this company, you must answer the next two questions:

Does this company own real estate for investment purposes? Yes No
Does this company own securities for investment purposes? Yes No

To enter additional entries, use the addendum page at the end of the report.

18. **REAL ESTATE:** During the reporting year, did you have a vested or contingent interest valued at \$1,000 or more in any real property, aside from your primary or secondary personal residence (unless your primary or secondary residence is co-owned by someone who is not a relative)?

Yes No

Entry 1

<input type="text"/>		<input type="text"/>		
Nature of Property		If Other, Describe		
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Property Address	City	State	Zip	Size of Property
<input type="text"/>	<input type="text"/>	<input type="text"/>		
Acquisition Date	Percentage of Your Ownership	Market Value of Property		

Entry 2

<input type="text"/>		<input type="text"/>		
Nature of Property		If Other, Describe		
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Property Address	City	State	Zip	Size of Property
<input type="text"/>	<input type="text"/>	<input type="text"/>		
Acquisition Date	Percentage of Your Ownership	Market Value of Property		

Entry 3

<input type="text"/>		<input type="text"/>		
Nature of Property		If Other, Describe		
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Property Address	City	State	Zip	Size of Property
<input type="text"/>	<input type="text"/>	<input type="text"/>		
Acquisition Date	Percentage of Your Ownership	Market Value of Property		

Entry 4

<input type="text"/>		<input type="text"/>		
Nature of Property		If Other, Describe		
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Property Address	City	State	Zip	Size of Property
<input type="text"/>	<input type="text"/>	<input type="text"/>		
Acquisition Date	Percentage of Your Ownership	Market Value of Property		

19. **MONEY OWED TO YOU:** During the reporting year, was any loan, note, or account receivable owed to you in the amount of \$1,000 or more by anyone other than a relative (*i.e.*, did anyone owe you money)?

Yes No

Entry 1

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Name of Debtor	Type of Obligation	Due Date	Nature of Collateral, if any
<input type="text"/>	<input type="text"/>		
Highest Amount Owed During the Reporting Year	Amount Owed at the Close of the Reporting Year		

Entry 2:

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Name of Debtor	Type of Obligation	Due Date	Nature of Collateral, if any
<input type="text"/>	<input type="text"/>		
Highest Amount Owed During the Reporting Year	Amount Owed at the Close of the Reporting Year		

Entry 3:

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Name of Debtor	Type of Obligation	Due Date	Nature of Collateral, if any
<input type="text"/>	<input type="text"/>		
Highest Amount Owed During the Reporting Year	Amount Owed at the Close of the Reporting Year		

Entry 4:

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Name of Debtor	Type of Obligation	Due Date	Nature of Collateral, if any
<input type="text"/>	<input type="text"/>		
Highest Amount Owed During the Reporting Year	Amount Owed at the Close of the Reporting Year		

Entry 5:

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Name of Debtor	Type of Obligation	Due Date	Nature of Collateral, if any
<input type="text"/>	<input type="text"/>		
Highest Amount Owed During the Reporting Year	Amount Owed at the Close of the Reporting Year		

20. **MONEY YOU OWE:** During the reporting year or on the date you file this report, did you owe any entity or person (other than a relative) \$5,000, excluding mortgages on your primary and secondary residences, or more for a period of 90 consecutive days?

Yes No

Entry 1

<input type="text"/>	<input type="text"/>	<input type="text"/>
Name of Creditor	Type of Loan	Other Liability, if any
<input type="text"/>	<input type="text"/>	<input type="text"/>
Nature of Collateral, if any	Name of Guarantor, if any	Amount Owed

Entry 2

<input type="text"/>	<input type="text"/>	<input type="text"/>
Name of Creditor	Type of Loan	Other Liability, if any
<input type="text"/>	<input type="text"/>	<input type="text"/>
Nature of Collateral, if any	Name of Guarantor, if any	Amount Owed

Entry 3

<input type="text"/>	<input type="text"/>	<input type="text"/>
Name of Creditor	Type of Loan	Other Liability, if any
<input type="text"/>	<input type="text"/>	<input type="text"/>
Nature of Collateral, if any	Name of Guarantor, if any	Amount Owed

Entry 4

<input type="text"/>	<input type="text"/>	<input type="text"/>
Name of Creditor	Type of Loan	Other Liability, if any
<input type="text"/>	<input type="text"/>	<input type="text"/>
Nature of Collateral, if any	Name of Guarantor, if any	Amount Owed

Entry 5

<input type="text"/>	<input type="text"/>	<input type="text"/>
Name of Creditor	Type of Loan	Other Liability, if any
<input type="text"/>	<input type="text"/>	<input type="text"/>
Nature of Collateral, if any	Name of Guarantor, if any	Amount Owed

21. **RELATIVES IN CITY SERVICE:** Do you have any relative(s) holding a position, whether paid or unpaid, with the City?

Yes No

Entry 1

Alisson N Diaz	Peace Officer	Sergeant
Name of Relative	City Title	City Position
Department of Homeless Services - 071		Daughter
City Agency		Relationship to Filer

Entry 2

Name of Relative	City Title	City Position
City Agency		Relationship to Filer

Entry 3

Name of Relative	City Title	City Position
City Agency		Relationship to Filer

Entry 4

Name of Relative	City Title	City Position
City Agency		Relationship to Filer

Entry 5

Name of Relative	City Title	City Position
City Agency		Relationship to Filer

Entry 6

Name of Relative	City Title	City Position
City Agency		Relationship to Filer

Any intentional violation of the Annual Disclosure Law (NYC Administrative Code Section 12-110), including, but not limited to, failure to include assets or liabilities, and misstatements of assets or liabilities, shall constitute a misdemeanor punishable by imprisonment for not more than one year or by a fine not to exceed \$1,000, or by both. In addition, any intentional violation of the provisions of the Annual Disclosure Law may subject the person reporting to assessment by the Conflicts of Interest Board of a civil penalty in an amount up to \$10,000.

CERTIFICATION

I, Darma V. Diaz, certify that all information given herein is true and
(Print Name)

accurate to the best of my knowledge.

Date: 3/3/20 *Signed: Darma V. Diaz Digitally signed by Darma V. Diaz Date: 2020.03.03 18:14:27 -05'00'

*A copy of the signature, sent by electronic transmission, will be treated as the original signature for the purpose of this report.