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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.

Open to Public Inspection

Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest					Inspection				
A F	A For the 2018 calendar year, or tax year beginning JUL 1, 2018 and ending JU				JUN 30, 2019				
B	Check if ipplicable	C Name	of organization		D Employer identifica	tion number			
	_Addre	ss Tex	as City Management Association						
	Name chang		business as		74-60	74-6053951			
]Initial return		er and street (or P.O. box if mail is not delivered to street address)	Room/suit	e E Telephone number				
	Final	1 1 2 2	1 Rutherford Lane	400		31-7400			
	termir ated		town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	632,147.			
	Amen	ded Ang	tin, TX 78754	H(a) Is this a group retu					
	Application		and address of principal officer Chris Coffman		for subordinates?	Yes X No			
	pendii		as C above		H(b) Are all subordinates inclu	uded? Yes No			
1 1	ax-ex	empt status	501(c)(3) X 501(c) (6) (insert no.) 4947(a)(1)	or 52	71	st. (see instructions)			
			.tcma.org	7	H(c) Group exemption r	•			
			X Corporation	L Yea	r of formation: 1983 M S	State of legal domicile; TX			
	irt I	Summar	y			— ———			
	1	Bnefly descr	ibe the organization's mission or most significant activities. ${ m To}$	romot	e the proficion	ency of			
Activities & Governance		city ma	anagers and other urban administra	tors	and aid in the	е			
Ĕ	2	Check this b	ox If the organization discontinued its operations or disposit	osed of mo	re than 25% of its net asse	ets			
Š	3	Number of v	oting members of the governing body (Part VI, line 1a)		3	17			
g	4	Number of in	dependent voting members of the governing body (Part VI, line 1b)		4	17			
Sa	5	Total numbe	r of individuals employed in calendar year 2018 (Part V, line 2a)		5	0			
ž	6	Total numbe	r of volunteers (estimate if necessary)		6	0			
Ę	7 a	Total unrelat	ed business revenue from Part VIII, column (C), line 12		7a	0.			
•	ь	Net unrelated	d business taxable income from Form 990-T line 38 RECETVI		7b	0.			
			NECEIVI	ED [Prior Year	Current Year			
ø	8	Contribution	s and grants (Part VIII, line 1h)	₩.	258,501.	260,765.			
Revenue	9	Program sen	s and grants (Part VIII, line 1h) vice revenue (Part VIII, line 2g) NOV 1 2 2	nan IIO	324,306.	340,556.			
ě	10	Investment #	ncome (Part VIII, column (A), lines 3, 4, and (d)	N S	24,301.	29,657.			
Œ	44	Other revenu	ie (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1,353.	1,169.			
	12	Total revenue	e - add lines 8 through 11 (must equal Part VIII, column A), fine 12)	UT [608,461.	632,147.			
	13	Grants and s	similar amounts paid (Part IX, column (A), lines 1-3)		13,750.	21,145.			
	14	Benefits paid	to or for members (Part IX, column (A), line 4)		0.	0.			
ģ	15	Salaries, oth	er compensation, employee benefits (Part IX, column (A), lines 5-10)) [0.	0.			
Expenses	16a	Professional	fundraising fees (Part IX, column (A), line 11e)		0.	0.			
ĝ	Ь	Total fundrai	sing expenses (Part IX, column (D), line 25)	0. [
ũ	l .		ses (Part IX, column (A), lines 11a-11d, 11f-24e)		619,457.	612,863.			
	18	Total expens	ses Add lines 13-17 (must equal Part IX, column (A), line 25)		633,207.	634,008.			
	19	Revenue less	s expenses Subtract line 18 from line 12		<24,746.>	<1,861.>			
Ses					Beginning of Current Year	End of Year			
Net Assets Fund Balanc	20	Total assets	(Part X, line 16)		1,058,217.	1,054,017.			
ASS			s (Part X, line 26)		134,155.	131,816.			
Ped	22	Net assets o	r fund balances Subtract line 21 from line 20	Γ	924,062.	922,201.			
	irt II	Signatu							
Unde	er pena	ilties of perjury	, I declare that I have examined this return, including accompanying scheduli	es and state	ments, and to the best of my k	nowledge and belief, it is			
true,	correc	t, and ônplet	e. Declaration of preparer (other than officer) is based on all information of w	vhich prepare	er has any knowledge.				
		13/	tolen		11/5	19			
Sign Date Date									
	Here								
		Type or	print name and title						
		Print/Type pr	eparer's name Preparer's signature		Date Check	PTIN			
Pald		Larry 1	D. Dodson Samu Ulloc	m	11/1/19 self-employed	P01065390			
Prep	arer	Firm's name	▶ Briggs & Veselka Co.			74-1769118			
Use	Only	Firm's addres	s 500 W 5th Street, Suite 1210						
		r	Austin, TX 78701		Phone no.512	-480-8182			
Мау	the IF	RS discuss th	nis return with the preparer shown above? (see instructions)			X Yes No			
	01 12-3		For Paperwork Reduction Act Notice, see the separate instruct	ions.	- <u>-</u>	Form 990 (2018)			

See Schedule O for Organization Mission Statement Continuation

	n 990 (2018) Texas City Management Association	74-6053951	Page 2
Pa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission		
•	The purpose of this Association shall be to promote the	highest	
	standards of governance, service, leadership, ethics and	1 education	
	while embracing individual and regional diversity for the	ne benefit o	F
	our membership and the cities of Texas. TCMA is committee		<u>. </u>
		ted to the	
2	Did the organization undertake any significant program services during the year which were not listed on the		
	prior Form 990 or 990-EZ?	L Yes	X 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	X 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 are required to report the amount of grants and allocations to other		
	revenue, if any, for each program service reported	,	
42	(Code) (Expenses \$ including grants of \$) (Revenue	\$	
70	The annual conference offers an opportunity for individu		red '
	with city management to discuss issues that affect city		
		manager mem	DELP
	and issues related to municipal management.		
			
		·	
4b	(Code) (Expenses \$ including grants of \$) (Revenue		1
	TCMA held two workshops, William King Cole Workshop and		<u> </u>
	Solving Clinics. These workshops discuss city managemen		
	trends in municipal finance and personnel issues, and is		ot F
	efficient city governance.	Juan Iciaco	
	effective effy governance.		
			
4c	(Code) (Expenses \$ including grants of \$) (Revenue)
	TCMA also provides support and resources to the national		
	organization, ICMA, ICMA'a annual conference, and various		
	pilot projects through out Texas educating and supporting	ng city manag	ger
	style of governance.		
			
4d			
	(Expenses \$ including grants of \$) (Revenue \$		
4e	Total program service expenses		
		Form 99	90 (2018)

Form 990 (2018) Texas City Management Association
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
^	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
2	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	<u>-</u>		 -
Ü	public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	_5_	Х	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	_6_		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	7		х
8	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
0	Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
-	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporanly restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		<u>x</u>
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			Х
	Part VI	11a		
D	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
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	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		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	_11f	_X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	x	
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	120		<u> </u>
~	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		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	14b		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	ا _ ِ ا		х
46	foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	_15		
16	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
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	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		<u>X</u>
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	24		х
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	000	2010)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			l
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			۔۔ ا
	Schedule K If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		-
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	25a		
L	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	25a		
ь	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			}
	Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or	230		
20	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		х
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? If "Yes," complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			-
	instructions for applicable filing thresholds, conditions, and exceptions)			
а	and the second s	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	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? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and		x	
	Part V, line 1	34		Х
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		
D	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)? If "Yes," complete Schedule R, Part V, line 2	35b		
26	· · · ·	330		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	-00		
0,	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
-	Note. All Form 990 filers are required to complete Schedule O	38	Х	
Pai				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0 if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	{		
	(gambling) winnings to prize winners?	1c	X	
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Щ.				T	T
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			Yes	No
	filed for the calendar year ending with or within the year covered by this return	2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return		2b		İ
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions				
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	,	3a		x
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule C		3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other a				
	financial account in a foreign country (such as a bank account, securities account, or other financial a		4a		Х
b	If "Yes," enter the name of the foreign country. ▶				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Art	ccounts (FBAR)		1	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		_5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	ction?	_5b		Х
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	e organization solicit			
	any contributions that were not tax deductible as charitable contributions?		6a		X
Ь	If "Yes," did the organization include with every solicitation an express statement that such contribute	ons or gifts			ĺ
	were not tax deductible?		_6b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services of \$75 made partly as a contribution and partly for goods and services of \$75 made partly as a contribution and partly for goods and services of \$75 made partly as a contribution and partly for goods and services of \$75 made partly as a contribution and partly for goods and services of \$75 made partly as a contribution and partly for goods and services of \$75 made partly as a contribution and partly for goods and services of \$75 made partly as a contribution and partly for goods and services of \$75 made partly as a contribution and partly for goods and services of \$75 made partly as a contribution and partly for goods and services of \$75 made partly as a contribution and partly for goods and services of \$75 made partly as a contribution and partly for goods and services of \$75 made partly as a contribution and partly for goods and services of \$75 made partly as a contribution and partly for goods and services of \$75 made partly as a contribution and partly for goods and services of \$75 made partly as a contribution and partly for goods and services of \$75 made partly as a contribution and partly for goods and services of \$75 made partly as a contribution and con	vices provided to the payor?	7a		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7Ь		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	is required	_		
	to file Form 8282?	1	7с		
	If "Yes," indicate the number of Forms 8282 filed during the year	7d	7-		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit or	_	7e 7f		
f -	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contribution of qualified intellectual property, did the organization file Fo		7g		 -
_	If the organization received a contribution of qualified intellectual property, did the organization file re-		79 7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained				
Ŭ	sponsoring organization have excess business holdings at any time during the year?	by 4.10	8	1	
9	Sponsoring organizations maintaining donor advised funds.				-
а	Did the sponsoring organization make any taxable distributions under section 4966?		9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter		_		
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter				}
а	Gross income from members or shareholders	11a			
ь	Gross income from other sources (Do not net amounts due or paid to other sources against				
	·	11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
а	Is the organization licensed to issue qualified health plans in more than one state?		13a		
	Note. See the instructions for additional information the organization must report on Schedule O				
b	Enter the amount of reserves the organization is required to maintain by the states in which the	1			
	organization is licensed to issue qualified health plans	13b			
	Enter the amount of reserves on hand	13c			v
14a	Did the organization receive any payments for indoor tanning services during the tax year?	.0	14a	-	X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule		14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner	ration or			х
	excess parachute payment(s) during the year?		_15		^
16	If "Yes," see instructions and file Form 4720, Schedule N Is the organization an educational institution subject to the section 4968 excise tax on net investment	moomo?	16		Х
16		I INCOME?	-'0		41
	If "Yes," complete Form 4720, Schedule O			990	(0010)

Form 990 (2018) Texas City Management Association 74-6053951 Page Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 2 through 7b below 7b below 7b below 7b below

	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			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 17			
	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 0.			}
b	Enter the number of voting members included in line 1a, above, who are independent 15 17	•		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			ļ
	officer, director, trustee, or key employee?	2		X
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?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6	X	
7a	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?	7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or		_	
	persons other than the governing body?	7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
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	9		<u> </u>
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		<u>X</u>
þ	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	401		
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Х	
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		
	Describe in Schedule O the process, if any, used by the organization to review this Form 990	40-		х
12a	the state of the s	12a 12b		
b	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	120		
·	in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		x
14	Did the organization have a written document retention and destruction policy?	14	Х	
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?			
а	The organization's CEO, Executive Director, or top management official	15a		Х
	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
ь	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 take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ►TX			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)	s only)	availa	able
	for public inspection. Indicate how you made these available. Check all that apply			
	Own website X Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	l finan	cıal	
	statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	Joe Foster - 512-231-7400			
	1821 Rutherford Lane, Suite 900, Austin, TX 78754			

Form 990 (2018)

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending 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.

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

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

(A) Name and Title	(B) Average hours per week	(do box	not c	(C Pos heck ss pe	tior more		one h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional frustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Chris Coffman	2.00									
President		Х		X			<u> </u>	0.	0.	0.
(2) Kenneth Williams	2.00								_	_
President Elect		Х		X			<u> </u>	0.	0.	0.
(3) Brad Stafford	2.00						l		_	_
Vice President		X		Х				0.	0.	0.
(4) David Harris	2.00							_		
Immediate Past President		X					<u> </u>	0.	0.	0.
(5) Kelly Kuenstler	2.00									
TML Board Representative		X					L	0.	0.	0.
(6) Shane Stokes	2.00				İ			1		
Director Region 1		X			L			0.	0.	0.
(7) Erik Rejino	2.00									
Director Region 2		X			Ĺ			0.	0.	0.
(8) Robert Hanna	2.00									
Director Region 3		X						0.	0.	0.
(9) Opal D. Mauldin-Jones	2.00									
Director Region 4		X						0.	0.	0.
(10) David Cockrell	2.00									
Director Region 5		Х						0.	0.	0.
(11) Stephanie Russell	2.00									
Director Region 6		x						0.	0.	0.
(12) James Earp	2.00									
Director Region 7		Х					İ	0.	0.	0.
(13) E.A. Hoppe, IV	2.00									
Director Region 8		X						0.	0.	0.
(14) Kevin Carruth	2.00									
Director Region 9		Х						0.	0.	0.
(15) Gabriel Gonzales	2.00									
Director Region 10		X						0.	0.	0.
(16) Sereniah Breland	2.00									
Director-at-Large		х		i				0.	0.	0.
(17) Ian Benavidez	2.00									
Assistants' Organizations		Х				Ш		0.	0.	0.

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Form **990** (2018)

Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 of compensation from the organization

		_	Check if Schedule O cont	ains a response	or note to any lin	e in this Part VIII			
			Grieck is deficiable of contr	anis a response	or mote to any mi	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
ats ts	1:	a	Federated campaigns	1a					
ira oun			Membership dues	1b	260,765.				į
Đ,ể	١,	С	Fundraising events	1c					
ar tr			Related organizations	1d					
S,E			Government grants (contribute		-]		
Θœ			All other contributions, gifts, grant	·					
r Per			similar amounts not included above	ve 1f	İ				
ξÖ	Ι,	a	Noncash contributions included in lines						
Contributions, Gifts, Grants and Other Similar Amounts	•	_	Total. Add lines 1a-1f			260,765.			
					Business Code				
ĕ	2 :	а	Annual conferen	ce	900099	294,562.	294,562.		
ه ≩.	1	b	Workshops		900099	45,994.	45,994.		
SE	١,	c							
e a	Ι,	d							
Program Service Revenue	(e							
ď	1	f	All other program service reve	nue					
		g	Total. Add lines 2a-2f		>	340,556.		·	
	3		Investment income (including	dıvıdends, ınteri	est, and				
			other similar amounts)		▶	29,657.			29,657.
	4		Income from investment of tax	k-exempt bond p	oroceeds 🕨				
	5		Royalties		>				
				(i) Real	(ii) Personal				1
	6 :	а	Gross rents		<u> </u>				
	l	b	Less: rental expenses						
	•	С	Rental income or (loss)						1
	١ (d	Net rental income or (loss)						<u> </u>
	7 :	а	Gross amount from sales of	(i) Securities	(ii) Other		+		
			assets other than inventory		 				
	1	b	Less: cost or other basis						
			and sales expenses		<u> </u>	,			
			Gain or (loss)	Ĺ			- [
	1		Net gain or (loss)				_		
Revenue	8 :	а	Gross income from fundraising including \$	g events (not of					
ě			contributions reported on line	1c) See					İ
			Part IV, line 18	а					
Other			Less: direct expenses	b					· ·
-			Net income or (loss) from fund	-	<u> </u>				
	9 :	а	Gross income from gaming ac	tivities See]		İ		
			Part IV, line 19	a			1		
			Less direct expenses	b					
	,		Net income or (loss) from gam	-					 -
	10 :	а	Gross sales of inventory, less		1		1		1
			and allowances	a .					1
			Less cost of goods sold	b	L				
	۳	<u>c</u>	Net income or (loss) from sale		b				
	-	_	Miscellaneous Revenu Publication Rev	enue	Business Code 900099	1,169.	1,169.		
	11 :		- TOTTCUCTOR MEA	<u> </u>	700077	1,100.	1,100.		
		b c			 		 		
		d	All other revenue				-		
			Total. Add lines 11a-11d		•	1,169.			T
	12		Total revenue. See instructions			632,147.	341,725.	0	. 29,657.

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							
	not include amounts reported on lines 6b, 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 domestic organizations	·						
	and domestic governments. See Part IV, line 21			}	j			
2	Grants and other assistance to domestic							
_	individuals See Part IV, line 22	21,145.						
3	 							
	organizations, foreign governments, and foreign							
	individuals See Part IV, lines 15 and 16				,			
4	Benefits paid to or for members							
5	Compensation of current officers, directors,							
	trustees, and key employees							
6	Compensation not included above, to disqualified		-					
	persons (as defined under section 4958(f)(1)) and			į –				
	persons described in section 4958(c)(3)(B)							
7	Other salaries and wages							
8	Pension plan accruals and contributions (include							
	section 401(k) and 403(b) employer contributions)		····					
9	Other employee benefits							
10	Payroll taxes							
11	Fees for services (non-employees)	22 524						
а	Management	33,591.						
b	Legal							
	Accounting	5,000.						
d	Lobbying							
e	Professional fundraising services. See Part IV, line 17			 				
f	Investment management fees							
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch 0.)							
40	Advertising and promotion							
12 13	Office expenses	1,207.						
14	Information technology	33,788.						
15	Royalties	337.33						
16	Occupancy							
17	Travel	4,082.			· · · · · · · · · · · · · · · · · · ·			
18	Payments of travel or entertainment expenses							
	for any federal, state, or local public officials							
19	Conferences, conventions, and meetings	404,380.						
20	Interest							
21	Payments to affiliates							
22	Depreciation, depletion, and amortization							
23	Insurance							
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.)	30.00		<u></u>				
а	ICMA Liasion	38,299.		-				
þ	Boards and committees Member relations	36,026. 29,256.		 				
C	Salary Survey	11,316.		 -	 			
ď		15,918.						
e 25	All other expenses	634,008.	·	 				
25 26	Joint costs. Complete this line only if the organization	034,000.		 				
20	reported in column (B) joint costs from a combined	[•			
	educational campaign and fundraising solicitation.							
	Check here If following SOP 98-2 (ASC 958-720)			1				
								

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note to any line in this Part X			<u>_</u>		
	(A) Beginning of year		(B) End of year		
	1,058,217.	1	1,054,017		
L	···············	2	· · · · · · · · · · · · · · · · · · ·		
L		3			
Ĺ		4			
nd former officers, directors,					
ensated employees. Complete					
L		5			
ualified persons (as defined under					
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					
· · · · · · · · · · · · · · · · · · ·		7			
Γ		8			
		9			
er					
10a					
10b		10c			
		11			
ne 11		12			
ine 11		13			
Ī		14			
Ī		15			
equal line 34)	1,058,217.	16	1,054,017		
	10,000.	17	0		
Accounts payable and accrued expenses Grants payable					
<u> </u>	124,155.	19	131,816		
Ī		20			
ete Part IV of Schedule D		21			
mer officers, directors, trustees,					
oyees, and disqualified persons					
		22			
nrelated third parties		23			
lated third parties		24			
, payables to related third					
ines 17-24) Complete Part X of					
, ,		25			
	134,155.	26	131,816		
958), check here ▶ X and					
3 and 34.					
Į.	924,062.	27	922,201		
Γ		28			
Γ		29			
7 (ASC 958), check here ▶ 🔲 🧍					
nds		30			
or equipment fund		31			
d income, or other funds		32			
<u> </u>	924,062.	33	922,201		
, F	1,058,217.	34	1,054,017		
S	s	s 1,058,217.	s 1,058,217. 34		

Check if Schedule O contains a response or note to any line in this Part XI 1 Total revenue (must equal Part VIII, column (A), line 12) 1 Total expenses (must equal Part IX, column (A), line 12) 2 Total expenses (must equal Part IX, column (A), line 25) 3 Total expenses (must equal Part IX, column (A), line 25) 3 Revenue less expenses Subtract line 2 from line 1 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 5 Net unrealized gains (losses) on investments 5 Consider services and use of facilities 7 Investment expenses 8 Prior period adjustments 8 Consider services and use of facilities 7 Investment expenses 8 Prior period adjustments 8 Column (B) 9 0 0. Net assets or fund balances (explain in Schedule O) 9 0 0. Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B)) Part XIII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII Yes No Yes No Yes No Yes No Yes No 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, 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', 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 th		n 990 (2018) Texas City Management Association	74-605	3951	Pa	ge 12
1 Total revenue (must equal Part VIII, column (A), line 12) 2 Total expenses (must equal Part IX, column (A), line 25) 3 Revenue less expenses Subtract line 2 from line 1 3 < 1, 861.3 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 5 Net unrealized gains (losses) on investments 6 Donated services and use of facilities 7 Investment expenses 8 Prior period adjustments 9 Other changes in net assets or fund balances (explain in Schedule O) 9 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 9 Part XIII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII 9 Accounting method used to prepare the Form 990 Cash X Accrual Cther If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O 2 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:	Pa	rt XI Reconciliation of Net Assets				
2 Total expenses (must equal Part IX, column (A), line 25) 3 Reverue less expenses Subtract line 2 from line 1 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 5 Net unrealized gains (losses) on investments 6 Donated services and use of facilities 7 Investment expenses 8 Prior period adjustments 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)) Part XIII Financial Statements and Reporting Check 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 Accual 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 Separate basis Consolidated basis Both consolidated and separate basis, consolidated basis Separate basis Consolidated basis Both consolidated and separate basis consolidated basis or both If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, or both 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-1337 b if "Yes," did the organization undergo the required audit o		Check if Schedule O contains a response or note to any line in this Part XI				
2 Total expenses (must equal Part IX, column (A), line 25) 3 Reverue less expenses Subtract line 2 from line 1 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 5 Net unrealized gains (losses) on investments 6 Donated services and use of facilities 7 Investment expenses 8 Prior period adjustments 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)) Part XIII Financial Statements and Reporting Check 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 Accual 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 Separate basis Consolidated basis Both consolidated and separate basis, consolidated basis Separate basis Consolidated basis Both consolidated and separate basis consolidated basis or both If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, or both 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-1337 b if "Yes," did the organization undergo the required audit o						
3	1	Total revenue (must equal Part VIII, column (A), line 12)	1			
Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4 924,062. Net unrealized gains (losses) on investments 5 Donated services and use of facilities 6 Donated services and use of facilities 7 Investment expenses 8 Prior period adjustments 9 Other changes in net assets or fund balances (explain in Schedule O) 10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10 Verit XIII Financial Statements and Reporting Check 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 X Accrual Other 1 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? 1 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? 1 If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis Donaldated basis Both consolidated and separate basis, consolidated basis, or both 1 Separate basis Consolidated basis Both consolidated and separate basis, consolidated basis, or both 2 Separate basis Consolidated basis Both consolidated and separate basis, 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? 3a X 3b If "Yes," did the organization undergo the required audit or	2	Total expenses (must equal Part IX, column (A), line 25)	2			
Separate basis. Consolidated basis. or both: Separate basis. Consolidated basis. or both. Separate basis. Occurrity 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 and Separate basis. Occurrity of the audit, review, or compilation of his financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during th	3	Revenue less expenses Subtract line 2 from line 1	3			
Donated services and use of facilities Finnestment expenses Fi	4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	92	4,0	<u>62.</u>
7 Investment expenses 8 Prior period adjustments 9 Other changes in net assets or fund balances (explain in Schedule O) 9 0. Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10 Part XIII Financial Statements and Reporting Check 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 Accual 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, or both: 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 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 describ	5	Net unrealized gains (losses) on investments	5			
Pror period adjustments 9 Other changes in net assets or fund balances (explain in Schedule O) 10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (3)) Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII	6	Donated services and use of facilities	6			
9 Other changes in net assets or fund balances (explain in Schedule O) Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (8)) Part XIII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII Accounting method used to prepare the Form 990	7	Investment expenses .	7			
Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B)) Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII Accounting method used to prepare the Form 990	8	Prior period adjustments	8			
Column (B)) Part XIII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XIII Accounting method used to prepare the Form 990	9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
Check if Schedule O contains a response or note to any line in this Part XII Check if Schedule O contains a response or note to any line in this Part XII Yes No 1 Accounting method used to prepare the Form 990	10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
Check if Schedule O contains a response or note to any line in this Part XII Accounting method used to prepare the Form 990 Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O Were the organization's financial statements compiled or reviewed by an independent accountant? 2a X 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 Were the organization's financial statements audited by an independent accountant? 2b X 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 X 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? 2c X 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? 3a X b If "Yes," did the organization undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits 3b			10	92	2,2	01.
Accounting method used to prepare the Form 990	Pa	rt XIII Financial Statements and Reporting				
Accounting method used to prepare the Form 990		Check if Schedule O contains a response or note to any line in this Part XII				<u>Щ</u>
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 3b					Yes	No
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 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 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? 3a X 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	1					ĺ
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Separate basis			on a	1 1		
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X 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? 3a X 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 3b		·	basis,			l
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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 3b		If the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule O			
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 3b	3a		gle Audıt			
or audits, explain why in Schedule O and describe any steps taken to undergo such audits				3a		X
	b	if "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	red audit			Į
Fa 990 (2018)		or audits, explain why in Schedule O and describe any steps taken to undergo such audits	 			

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

2018

Open to Public Inspection

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

•	Section 501(c)(4), (5), or (6) organiza	tions: Complete Part III			
Nan	ne of organization			Emp	oloyer identification number
	Texas C	ity Management	Association		74-6053951
Pa	art I-A Complete if the org	ganization is exempt un	der section 501(c	or is a section 527	organization.
2	Provide a description of the organic Political campaign activity expendit Volunteer hours for political campa	tures	tical campaign activities	s in Part IV ▶ :	\$
Pa	rt I-B Complete if the org	ganization is exempt un	der section 501(c)(3)	
1	Enter the amount of any excise tax	incurred by the organization un	nder section 4955	▶:	\$
2	Enter the amount of any excise tax	incurred by organization mana	gers under section 495	5 > :	\$
3	If the organization incurred a section	on 4955 tax, did it file Form 472	0 for this year?		Yes No
	Was a correction made?				L Yes
	If "Yes," describe in Part IV		James etter FOU/A	V avant anation 504	(-)(2)
		ganization is exempt un			· · · · · · · · · · · · · · · · · · ·
	Enter the amount directly expended		·		\$
2	Enter the amount of the filing organ	nization's funds contributed to o	other organizations for s	_	•
	exempt function activities	. Add l 1 and 0 Futer bara	and an Form 1120 BOI	▶ :	P
3	Total exempt function expenditures line 17b	s Add lines I and Z Enter here	and on Form 1120-POI	▶ :	t
4	Did the filing organization file Form	1120-DOL for this year?			Yes No
	Enter the names, addresses and er		FIN) of all section 527 n	olitical organizations to whi	
Ū	made payments For each organiza	• •	•		• •
	contributions received that were pr			= :	ate segregated fund or a
	political action committee (PAC) If	additional space is needed, pro	ovide information in Par	t IV.	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's funds If none, enter -0-	contributions received and promptly and directly
				lulius il lione, enter -o-	delivered to a separate
					political organization If none, enter -0-
			-		ii florie, eriter -0-
					
				+	
		1	i i	i i	1

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

Schedule C (Form 990 or 990-EZ) 2018

LHA

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Schedule C (Form 990 or 990-EZ) 2018 T Part II-A Complete if the orga	exas C: nization i	ty Management exempt under section	Association on 501(c)(3) and file	74- ed Form 5768 (6053951 Page 2 election under
expenses, and share	of excess lol	, , ,		group member's na	me, address, EIN,
Limits	on Lobbyin	ox A and "limited control" pr Expenditures amounts paid or incurred		(a) Filing organization's totals	(b) Affiliated group totals
1 - Total labburg avandtura to influ	noo ouble o	vision (arang vegta labbuma)			
1a Total lobbying expenditures to influeb Total lobbying expenditures to influe	-		ŀ		-
c Total lobbying expenditures (add line	_				
d Other exempt purpose expenditures					\
e Total exempt purpose expenditures		and 1d)			
f Lobbying nontaxable amount Enter	•	•	th columns		-
If the amount on line 1e, column (a) or (he lobbying nontaxable an			+
Not over \$500,000		0% of the amount on line 16			
Over \$500,000 but not over \$1,000,0		100,000 plus 15% of the ex			
Over \$1,000,000 but not over \$1,500		175,000 plus 10% of the ex			
Over \$1,500,000 but not over \$17,00		225,000 plus 5% of the exc			
Over \$17,000,000		1,000,000			
					
g Grassroots nontaxable amount (ente		•			
h Subtract line 1g from line 1a If zero			-		
i Subtract line 1f from line 1c If zero c					
j If there is an amount other than zero reporting section 4911 tax for this ye		th or line 1i, did the organi	zation file Form 4720		Yes No
(Some organizations tha	t made a se	ear Averaging Period Under tion 501(h) election do not separate instructions for I	t have to complete all o	of the five columns	below.
	Lobbying	Expenditures During 4-Ye	ar Averaging Period		7
Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount	· · · · · · · · · · · · · · · · · · ·				
(150% of line 2a, column(e))					<u> </u>
c Total lobbying expenditures	·				
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2018

74-6053951 Page 3

Schedule C (Form 990 or 990-EZ) 2018 Texas City Management Association 74-605395

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For e	ach "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description	(a)	(1	p)
of th	e lobbying activity	Yes	No	Amo	ount
1	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?				
	Mailings to members, legislators, or the public?	 			
	Publications, or published or broadcast statements?	1			
	Grants to other organizations for lobbying purposes?	<u> </u>			
'	Direct contact with legislators, their staffs, government officials, or a legislative body?	 			
9	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
	Other activities?	}			
-	Total Add lines 1c through 1	 			
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	 			
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6)	on 501(c)	(5), or se	ction	
	501(c)(6).			Yes	No
			<u> </u>	X	
1	Were substantially all (90% or more) dues received nondeductible by members?		1	_ <u>x</u>	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	u	7 3		Х
3 Dar	Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 50			ction	
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."				ne 3, is
1	Dues, assessments and similar amounts from members		1		
	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political	ical		*	
	expenses for which the section 527(f) tax was paid).				
а	Current year		2a		
	Carryover from last year		2b		
	Total	•	2c		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex	cess			
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and		1 1		
	expenditure next year?	•	4		
5	Taxable amount of lobbying and political expenditures (see instructions)		5		
Par	t IV Supplemental Information				
Provi	de the descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5; Part II-A (affiliated grou	p list); Part I	I-A, lines 1 a	nd 2 (see	
	ictions), and Part II-B, line 1. Also, complete this part for any additional information			•	
	·		_		

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

OMB No 1545-0047 Open to Public

Inspection Go to www.irs.gov/Form990 for instructions and the latest information. Employer identification number Name of the organization Texas City Management Association 74-6053951 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" on Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds Yes are the organization's property, subject to the organization's exclusive legal control? 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? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last Held at the End of the Tax Year day of the tax year 2a a Total number of conservation easements 2h **b** Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure 2d listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? 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 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8 1a 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) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 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 Revenue included on Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

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832051 10-29-18

Schedule D (Form 990) 2018

Sche	edule D (Form 990) 2018 Texas C	ity Manage	ment	Assoc	iation		74-60	53951	Page 2
	rt III Organizations Maintaining C	ollections of A	rt, Hist	orical Tr	easures, or Ot	her Sin			
3	Using the organization's acquisition, accessi	on, and other record	ds, check	any of the	following that are a	significa	nt use of its	collection	items
	(check all that apply).								
а	Public exhibition		; ı	oan or exc	hange programs				
b	Scholarly research	•	. [_](Other					
С	Preservation for future generations								
4	Provide a description of the organization's co	ollections and expla	ın how th	ey further t	he organization's e	xempt pu	rpose in Par	t XIII	
5	Dunng the year, did the organization solicit o	r receive donations	of art, his	storical trea	sures, or other sim	lar assets	· _	_	
	to be sold to raise funds rather than to be ma	aintained as part of	the orgar	nization's co	ollection?			Yes	L No
Par	rt IV Escrow and Custodial Arran		ete if the	organizatio	n answered "Yes"	on Form 9	990, Part IV,	line 9, or	
	reported an amount on Form 990, Par	t X, line 21.						_	
1a	is the organization an agent, trustee, custodi	an or other interme	diary for o	contribution	ns or other assets n	ot include	ed _	_	
	on Form 990, Part X?							Yes	L No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing t	able					
						L		Amount	
c	Beginning balance					10	;		
d	Additions during the year					10	1		
е	Distributions during the year					1e			
f	Ending balance								
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21, for e	scrow or co	ustodial account lia	bility?		Yes	L No
b	If "Yes," explain the arrangement in Part XIII.								<u> </u>
Par	rt V Endowment Funds. Complete if	f the organization ar	swered	"Yes" on Fo	rm 990, Part IV, lin	e 10			
		(a) Current year	(b) Pi	nor year	(c) Two years back	(d) Thre	e years back	(e) Four y	ears back
1a	Beginning of year balance		<u> </u>						
b	Contributions								
С	Net investment earnings, gains, and losses					<u> </u>			
d	Grants or scholarships								
е	Other expenditures for facilities								
	and programs				<u> </u>				
f	Administrative expenses								
g	End of year balance					1			
2	Provide the estimated percentage of the curr	ent year end baland	ce (line 1ç	g, column (a	a)) held as				
а	Board designated or quasi-endowment		_%						
b	Permanent endowment	%							
С	Temporarily restricted endowment	%							
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.							
За	Are there endowment funds not in the posse	ssion of the organiz	ation tha	t are held a	nd administered fo	r the orga	ınızatıon	_	
	by							Y	es No
	(i) unrelated organizations							3a(ı)	
	(ii) related organizations							3a(ii)	
b	If "Yes" on line 3a(ii), are the related organiza	tions listed as requi	red on S	chedule R?				3b	
_ 4	Describe in Part XIII the intended uses of the	organization's ende	owment f	unds					
Pai	rt VI Land, Buildings, and Equipm	ent.					<u></u>		
	Complete if the organization answered	d "Yes" on Form 99	0, Part IV	, line 11a S	See Form 990, Part	X, line 10			
	Description of property	(a) Cost or o	other	(b) Cost	or other (c)	Accumul	ated	(d) Book	value
		basis (investi	ment)	basis	(other) c	lepreciati	on		
1a	Land .								
ь	Buildings								
С	Leasehold improvements								
	Equipment								
	Other								
Total	Add lines 1a through 1e (Column (d) must e	gual Form 990, Part	X colum	n (B), line 1	(Oc.)				0.

Schedule D (Form 990) 2018

(7) (8) (9)

Total. (Column (b) must equal Form 990, Part X, col (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.

Texas City Management Association 74-6053951 Page 4 Schedule D (Form 990) 2018 Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a 632,147. Total revenue, gains, and other support per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12: a Net unrealized gains (losses) on investments 2a b Donated services and use of facilities 2b c Recovenes of pnor year grants 2c 2d d Other (Describe in Part XIII) e Add lines 2a through 2d 2e 632,147. 3 Subtract line 2e from line 1 3 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b 4c Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a 634,008. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities 2a 2b **b** Prior year adjustments 2c c Other losses 2d d Other (Describe in Part XIII) e Add lines 2a through 2d 2e 634,008. 3 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b 4a b Other (Describe in Part XIII) c Add lines 4a and 4b 4c Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) 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 Part X, Line 2: The Association is generally exempt from federal income taxes under Section 501(c)(6) of the Internal Revenue Code. However, certain activities of the Association may be considered unrelated business income and, therefore, will be subject to taxation for Federal income tax purposes. Income from certain activities not directly related to the Association's tax-exempt purpose is subject to taxation as unrelated business income. For the years ended June 30, 2018 and 2017, the Association did not have any taxable income.

Schedule D (Form 990) 2018 Texas City Management Association Part XIII Supplemental Information (continued)	74-6053951 Page 5
Management has evaluated the Association's tax positions an	d concluded
that the Association had taken no uncertain tax positions.	With few
exceptions the Association is no longer subject to income to	ax examinations
by the U.S. Federal, state or local tax authorities for year	rs before 2015.
	
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Governments, and Individuals in the United States Grants and Other Assistance to Organizations, SCHEDULE (Form 990)

OMB No 1545-0047	2018	

% Employer identification number 74-6053951 Open to Public Inspection (h) Purpose of grant or assistance X Yes Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of noncash assistance (f) Method of valuation (book, FMV, appraisal, other) Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ■ Go to www.irs.gov/Form990 for the latest information. (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States ► Attach to Form 990. recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (d) Amount of cash grant Texas City Management Association (c) IRC section (if applicable) General Information on Grants and Assistance (p) EIN cntena used to award the grants or assistance? 1 (a) Name and address of organization or government Name of the organization Department of the Treasury Internal Revenue Service Parti Part II

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Enter total number of other organizations listed in the line 1 table

21

Schedule I (Form 990) (2018)

Schedule I (Form 990) (2018)

Page 2

74-6053951

Part III

(f) Description of noncash assistance (e) Method of valuation (book, FMV, appraisal, other) Grants and other assistance are approved by the Executive Board Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information The Association exercises due diligence prior to giving grants and other (Form 990) (2018) Texas City Management Association Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed. (d) Amount of non-cash assistance o Ö ٥. ö 4,865. 870. 5,000. 10,410. (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance Leadership Development Scholarship Tom Muchlenbeck Scholarship Part I, Line 2: Ridley Scholarship assistance. CPM Scholarship

832102 11-02-18

and documented in the Executive Board minutes. Documentation for all grants

other assistance is retained at the Association's office.

and

Schedule I (Form 990) (2018)

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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.

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

OMB No 1545-0047 Open to Public

Inspection

Name of the organization

Employer identification number

Texas City Management Association	/4-6053951
Form 990, Part I, Line 1, Description of Organization Mis	sion:
improvement of municipal administration in Texas.	_
Form 990, Part III, Line 1, Description of Organization M	ission:
council-manager form of government, effective partnership	s with elected
officials, the professionalism of our organization and me	mbers, and
quality service to our membership and the cities we serve	•
Form 990, Part VI, Section A, line 6:	
Memberships in the Association shall be classified as Ful	1, Associate,
Cooperating, Student, and Special.	
Form 990, Part VI, Section A, line 7a:	
The President-Elect, Vice President, Director-at-Large, a	nd Director to the
Texas Municipal League Board shall be elected by a plural	ity of the Voting
Members by ballot.	
Form 990, Part VI, Section A, line 7b:	
The TCMA Constitution may be amended or repealed by a two	-thirds vote of
the voting members of the Association present at the TCMA	Annual Conference
Business Meeting.	
Form 990, Part VI, Section B, line 11b:	
Prior to filing the tax return, the organization's form 9	90 is provided to
the board of directors for review and approval.	

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

Schedule O (Form 990 or 990-EZ) (2018)

Schedule O (Form 990 or 990-EZ) (2018)	Page 2
Name of the organization Texas City Management Association	Employer identification number 74-6053951
Form 990, Part VI, Section C, Line 19:	
All governing documents and financial statements are made	available to the
public. These documents can be obtained by request at the	e office in
Austin, TX.	
	
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SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ▶ Attach to Form 990.

OMB No 1545-0047

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

2018 Open to Public Inspection

Employer identification number 74-6053951 € 9 € Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33 Texas City Management Association Ξ 3 Name of the organization Department of the Treasury Internal Revenue Service Part

	(a) Name, address, and EIN (if applicable) of disregarded entity	Primary activity	Legal domicile (state or foreign country)	(a) Total income	(e) End-of-year assets	(i) Direct controlling entity	
					-	!	
Part II	I ldentification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.	tions. Complete if the organization ans	swered "Yes" on Form 990, Par	t IV, line 34, becau	se it had one or more re	lated tax-exempt	

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	(6)	on 5 Izlo, i.e. ontrolled	entity?	ž			×	_			 _	-	 _
		o o o		Yes				_	 		 		_
	(J)	Direct controlling					N/A						
	(e)		<u>"</u>	501(c)(3))			Line 11						_
	(P)	Exempt Code	section				501(c)(4)						
	(0)	Legal domicile (state or	foreign country)	:			Texas						
	(q)	Primary activity			Serving needs and	advancement of Texas	Cities						
organizations during the tax year.	(a)	Name, address, and EIN	of related organization		Texas Municipal League - 74-6000125	1821 Rutherford Lane, Suite #400	Austin, TX 78754						

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

Schedule R (Form 990) 2018

Schedule R (Form 990) 2018 Texas City Management Association

Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year Part III

Percentage ownership Schedule R (Form 990) 2018 Yes No Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year. (i) Section 512(b)(13) controlled entity? 3 General or F managing partner? Percentage ownership Yes No 9 Ξ Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) Share of end-of-year assets \equiv 6 Disproportionate Yes No allocations? Share of total income Share of end-of-year assets 6 Type of entity (C corp, S corp, or trust) e Share of total Income ε (d)
Direct controlling entity Predominant income (related, unrelated, excluded from tax under sections 512-514) <u>e</u> Legal domicife (state or foreign country) (d)
i Direct controlling |
entity Primary activity 9 (c)
Legal
domicile
(state or
foreign Primary activity <u>@</u> Name, address, and EIN of related organization Name, address, and EIN of related organization 832162 10-02-18 Part IV

Page 3

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Notes, Complete and the party of the post of the party of				-	1.
Total Complete line in any entity is instead in raits in, in, or to this societies with one or more related organizations listed in Parts II-IV? 1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	s with one or more re	lated organizations listed	in Parts II-IV?	Ser	اد
a Receipt of (i) interest, (ii) annuties, (iii) royalties, or (iv) rent from a controlled entity		,			امال
Calif. grant, or capital contribution from related organization(s) Gift, grant, or capital contribution from related organization(s)				1c X	مام
d Loans or loan guarantees to or for related organization(s)				T Y	L
e Loans or loan guarantees by related organization(s)				Je X	ايا
f Dividends from related organization(s)				× 	M
g Sale of assets to related organization(s)				1g X	الم
					اسا
i Exchange of assets with related organization(s)				1i X	اد
j Lease of facilities, equipment, or other assets to related organization(s)				;;	اب
k Lease of facilities, equipment, or other assets from related organization(s)				*	×
l Performance of services or membership or fundraising solicitations for related organization(s)	ınızatıon(s)			¥;	ا
	inization(s)			*	اہ
n Snaring of raid employees, equipment, mailing lists, of other assets with related organization(s)	lon(s)			4 ×	i
o Shaning of paid employees with related organization(s)				+-	1
 Peimbursement paid to related organization(s) for expenses 				d₁ X	اب
q Reimbursement paid by related organization(s) for expenses				1g	~l
					٠.
S Other transfer of cash or property from related organization(s)					: ×
If the answer to any of the above is "Yes," see the instructions for	who must complete the	is line, including covered	information on who must complete this line, including covered relationships and transaction thresholds		
(a) Name of related organization	(b) Transaction type (a·s)	(c) Amount involved	(d) Method of determining amount involved	volved	
(1) Texas Municipal League	N	95,544.	Cash paid		1 1
(2) Texas Municipal League	0	35,446.	Cash paid		ľ
(3)					
(4)					
(5)					ŀ
(6)					
832153 10-02-18	27		Schedule	Schedule R (Form 990) 2018	8

Page 4

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

1	tage ship																	1														9018
3	Percen: owner:																															990) 2
s	anaging artner?	Yes No					L							-				-													4	Form
-	Disprapor Code V-UBi General or Percentage tonale amount in box 20 managing allocations? Of Schedule K-1 partner? Ownership						-							l				 								-				 		Schedule R (Form 990) 2018
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	or amo	چ آ	_				_				ļ			\vdash				-				-				-			<u>-</u>		4	
(F)	Disprop tonal allocatio	Yes								_		 _		L				L												 	1	
(b)	Share of end-of-year	assets																														
(J)	Share of total	псоте																														
(e)	partners sec 501(c)(3) orgs?	Yes No						_		_		 		-				L								_		_		_	4	
	ome pa ed, 5 under	14)										 											•				-				┪	
<u>g</u>	Predominant income pa (related, unrelated, excluded from tax under	s 512-5				!																										
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Schedule R	(Form 990) 2018	Texas	City	Management	Association	74-6053951	Page 5
Part VII	(Form 990) 2018 Supplemental Info	rmation.					
<u> </u>	Provide additional inform	nation for resp	onses to	questions on Schedule	e 8. See instructions		
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