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

Open to Public Inspection

ΑI	For the 2	2018 calendar year, or tax year beginning $$ JUL 1 , $$ 2018 $$ and ending	JUN	30, 2019	
В	Check if	C Name of organization	D E	mployer identifi	cation number
•	pplicable		ľ	•	
Г	Address change	Texas Municipal League			
$\overline{}$	Name change	Doing business as	_	74-6	000125
\vdash	Initial	Number and street (or P.O. box if mail is not delivered to street address) Room/si	ute E Te	elephone numbe	
一	Final	1821 Rutherford Lane 400			231-7400
_	Ireturn/	······································			6,951,276.
_	ated Amender	City or town, state or province, country, and ZIP or foreign postal code Austin, TX 78754		osa receipta \$	
H	_Jreturn _]Applica-		-71	Is this a group re	
Ц.	ttòn ttòn	F Name and address of principal officer John B Love III	1 IL	for subordinates	
		same as C above		Are all subordinates in	
					list (see instructions)
		·▶ www.tml.org		Group exemptio	
			ear of form	ation: 1913 N	State of legal domicile: TX
Pi		Summary			·
ě	1 B	nefly describe the organization's mission or most significant activities. A volunt	ary n	onprofit	
Activities & Governance		ssociation of Texas cities organized for th			
Ę	2 C	heck this box 🕨 📖 if the organization discontinued its operations or disposed of n	nore than 2	25% of its net as	
Š	3 N	umber of voting members of the governing body (Part VI, line 1a)		3	52
ω ω	4 N	umber of independent voting members of the governing body (Part VI, line 1b)		4	52
es	5 To	otal number of individuals employed in calendar year 2018 (Part V, line 2a)		5	40
ŧ	6 To	otal number of volunteers (estimate if necessary)		6	0
ij	7 a To	otal unrelated business revenue from Part VIII, column (C), line 12		7a	167,710.
•	b N	et unrelated business taxable income from Form 990-T, Re 38 EAVED		7b	0.
		I TOLIVED	Pr	ior Year	Current Year
6)	8 C	ontributions and grants (Part VIII, line 1h) rogram service revenue (Part VIII, line 2g)		235,722.	2,246,908.
Ž		rogram service revenue (Part VIII, line 2g)	3,	765,223.	4,171,828.
Revenue	1	rogram service revenue (Part VIII, line 2g) vestment income (Part VIII, column (A), lines 3, 4, and 7d)		135,986.	141,796.
æ		ther revenue (Part VIII column (A) lines 5 6d 8c 9c (10 and 11e)		427,357.	390,744.
	12 To	ther revenue (Part VIII, column (A), lines 5, 6d, sc, 9c, 10c, and 11e, otal revenue - add lines 8 through 11 (must equal Part-VIII, column (A), line 12)		564,288.	6,951,276.
	T	rants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
		enefits paid to or for members (Part IX, column (A), line 4)		0.	0.
(A		alaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	3.	769,075.	3,729,740.
Expenses		rofessional fundraising fees (Part IX, column (A), line 11e)		0.	0.
De la	4	otal fundraising expenses (Part IX, column (D), line 25) 186,509.	· · · · · · ·	_	
Ä			2	643,870.	2,956,449.
	Į.	ther expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		412,945.	6,686,189.
	1	otal expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		151,343.	265,087.
_ 🔀		evenue less expenses. Subtract line 18 from line 12			
ets or ances				of Current Year 050,578.	End of Year 9,104,260.
Base	20 10	otal assets (Part X, line 16)			
Net Asse Fund Bal	21 To	otal liabilities (Part X, line 26)		730,921. 319,657.	7,519,516.
		et assets or fund balances Subtract line 21 from line 20 Signature Block	<u> </u>	319,637.	1,584,744.
					. La contrata de la contrata del contrata de la contrata de la contrata del la contrata del la contrata del la contrata de la
		es of perjury, I declare that I have examined this return, including accompanying schedules and sta		-	knowledge and belier, it is
true,	correct,	and complete. Declaration of preparer (other than officer) is based on all information of which prep	arer nas any	/ knowleage.	
	-	Signature of prices		Date	
Sıgı	1.4	/// DI DI SAMEAT / WINDER		Date	
Her	e 🝴	Bennett Sandlin, Executive Director Type or print name and title		·	
			10545		TI DTIN
		rint/Type preparer's name Rreparer's signature	Date	Check L	PTIN
Paic	<u>⊢</u>	arry Dodson, CPA any W Dodin	10/1	self-employe	
		ırm's name ▶ Briggs & Veselka/Co./		Firm's EIN	74-1769118
Use	Only F	ırm's address 500 W 5th Street, Stite 1210			
		Austin, TX 78701		Phone no. 5 1 2	2-480-8182
Mar	the IRS	discuss this return with the preparer shown above? (see instructions)			X Yes No

Form 990 (2018)

Form	1990 (2018) Texas Municipal League	74-6000125	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
	Briefly describe the organization's mission:		
'	To serve the needs and advocate the interests of its mem	ibers.	
	To belve the needs and davocate the interests of the men		
		 	
			
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 it	measured by expenses	2
~	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other		
		s, the total expenses,	anu
	revenue, if any, for each program service reported	1 050	F02 .
4a	(Code) (Expenses \$ 1,785,006 · including grants of \$) (Revenue	1,850,	
	Program Development: Plans and coordinates training and	development	
	programs for members and affilates including annual work	shops for	
	executives, city managers, personnel and finance officer	·s.	
			
			
	1 200 674	1 220	500
4b	(Code) (Expenses \$ 1,392,674 · including grants of \$) (Revenue		
	Member Services: Assists in planning meetings for 15 reg		<u> </u>
	board meetings, handles phone inquiries from members see	King	
	information or assistance, conducts membership satisfact	lon survey,	and
	provides other miscellaneous member services.		
		-	
		•	
			,
			
	1 165 207	015	387.)
4c	(Code) (Expenses \$ 1,165,287. Including grants of \$) (Revenue Legislative Services: Coordinates legislative policies d	s Jij,	307.
	Legislative Services: Coordinates legislative policies of	ecermined b	<u>y</u>
	membership, monitors legislative and regulatory activiti	es arrectin	<u>g</u>
	cities, provides frequent newsletters updating members o	f such	
	activities.		
		·	
			
4d	Other program services (Describe in Schedule O)		
	(Expenses \$ 1,447,262. including grants of \$) (Revenue \$)	
<u>4e</u>	Total program service expenses ► 5,790,229.		
		Form 9	90 (2018)

Form 990 (2018) Texas Municipal League
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	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3_		<u> </u>
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			
Ü	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8_		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			i
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?	•	х	
40	If "Yes," complete Schedule D, Part IV	9		
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
• •	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total		· ·	
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	
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
ч	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	110		
u	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	
	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		х	
	Schedule D, Parts XI and XII	12a		
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	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			3.5
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u> </u>
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	45		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		<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			v
	complete Schedule G, Part III	19		$\frac{x}{x}$
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b		
ס 21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		
- '	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
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			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		1	Ì
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete		x	
04.0	Schedule J	23		
248	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			
	Schedule K. If "No," go to line 25a	24a		X
ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	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		
d	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			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete		i	
	Schedule L, Part I	25b	ļ	X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or	1		
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"	l		
	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		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV		<u> </u>	
	instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
	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		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?	1		₹.
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			х
22	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		^
33	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	30		
•	Part V, line 1	34	Х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	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		
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			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		х	
Par	Note. All Form 990 filers are required to complete Schedule O t V Statements Regarding Other IRS Filings and Tax Compliance	38		
	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			7.0
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0	4		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	1		
	(gambling) winnings to prize winners?	1c	X	
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Га	Statements Regarding Other mornings and Tax Compilance (continued)			
		,	Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 40			
	mice for the salarisar year strains and the salarisar strains and the		х	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	<u> </u>	
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	3a	х	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3b	X	-
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	35		
4a	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		х
h	If "Yes," enter the name of the foreign country.	_ <u> </u>		
U	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	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 organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			۱.,
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		-
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	_		x
_	to file Form 8282?	7 <u>c</u>		
	If "Yes," indicate the number of Forms 8282 filed during the year	70		
_	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		
f -	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		-
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
·	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			i
	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	į		}
11	Section 501(c)(12) organizations. Enter	į į		
	Gross income from members or shareholders	İ		
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them)	122		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes." enter the amount of tax-exempt interest received or accrued during the year	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers.	į /		
13	Is the organization licensed to issue qualified health plans in more than one state?	13a		
a	Note. See the instructions for additional information the organization must report on Schedule O			
h	Enter the amount of reserves the organization is required to maintain by the states in which the			
-	organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		X
	If "Yes," see instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16_		X
	If "Yes," complete Form 4720, Schedule O.	لــيــا	000	105:5
		Form	990	(2018)

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

	Check if Schedule O contains a response or note to any line in this Part VI			X									
Sec	tion A. Governing Body and Management			بيتي									
000	don' A. Gotoning Dody and Managomon		Yes	No									
12	Enter the number of voting members of the governing body at the end of the tax year 1a 52	2											
10	If there are material differences in voting rights among members of the governing body, or if the governing	1]										
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	l											
b	Enter the number of voting members included in line 1a, above, who are independent 1b	2											
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	1	}										
~	officer, director, trustee, or key employee?	2		Х									
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		Х									
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, stockholders, or other persons who had the power to elect or appoint one or	6											
, a	more members of the governing body?	7a	х										
h	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			_									
U	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:												
_	The governing body?	8a	х										
b	Each committee with authority to act on behalf of the governing body?	8b	 -	X									
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	-											
9	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		х									
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)												
	tion Di Fottolog (mic decidir 2 requeste micrimateri about pomore in required by micrimateri electrony		Yes	No									
10a	Did the organization have local chapters, branches, or affiliates?	10a	X										
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,												
-	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	х										
112	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х										
	Describe in Schedule O the process, if any, used by the organization to review this Form 990												
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	х										
b	the state of the s	12b	X										
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe												
·	in Schedule O how this was done	12c	x										
13	Did the organization have a written whistleblower policy?	13	Х										
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	<u> </u>											
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?												
9	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).	<u> </u>											
162	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a												
.08	taxable entity during the year?	16a		Х									
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	1.33											
-	In joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's	1											
	exempt status with respect to such arrangements?	16b											
Sec	tion C. Disclosure	1											
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	ıble									
	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, an	d finan	cıal										
	statements available to the public during the tax year.	•	٠										
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 #400, Austin, TX 78754												
832000	5 12-31-18	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 with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

Name and Title	(A)	(B)	l	111126	((mpe	i isat	(D)	(E)	(F)
Officer and a derectivituate of related organizations organizations organizations organizations organizations organizations organizations organizations organizations (W-2/1099-MISC) organizations (W-2/1099-MISC) organizations (W-2/1099-MISC) organizations (W-2/1099-MISC) organizations organiza	* *	Average		not c	Pos heck	itior more	than		Reportable	Reportable	Estimated
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10 Holly Gray-Moore 1.00 X			gie				ted.			_	
10 Holly Gray-Moore 1.00 X	•		stee	Iruste		_ as	beusa		(W-2/1099-MISC)		_
10 Holly Gray-Moore 1.00 X		_	ual în	lonal		akoldı	t com	_			
1			Individ	institui	Officer	Key em	Highes	E E			Organizations
1.00 Nary Dennis 1.00 X X X X X X X X X	(1) Holly Gray-Moore	1.00								-	
Name	Past President		X						0.	0.	0.
California Cal	(2) John Love III	1.00									
Past President	President		X		X				0.	0.	0.
1.00 Nath President Nath President	(3) Mary Dennis	1.00				1	l				
Past President		<u></u>	X						0.	0.	0.
Society Color Co	(4) Jungus Jordan	1.00				ŀ	ŀ		_	_	_
Past President			X				<u> </u>	L	0.	0.	0.
Columb	(5) Leonard Reed	1.00					l		_	_	_
Past President	· · · · · · · · · · · · · · · · · · ·		X				<u> </u>		0.	0.	0.
Terry Henley	(6) Henry Wilson	1.00					ļ				_
Past President	Past President		X				_		0.	0.	0.
Regional Director X	(7) Terry Henley	1.00	_				1		_		_
Director-at-Large			X				L		0.	0.	0.
1.00	(8) Dee Margo	1.00								_	_
Past President			X						0.	0.	0.
Columb	• •	1.00									
Director-at-Large			X						0.	0.	0.
Columb	(10) Steve Adler	1.00							_	_	_
Director-at-Large	Director-at-Large	<u></u>	X						0.	0.	0.
Director-at-Large	(11) Martha Castex-Tatum	1.00					ĺ		_ ;	_	_
Director-at-Large	Director-at-Large	ļ	X					ļ. <u></u>	0.	0.	0.
Director-at-Large	(12) Betsy Price	1.00							_	_	_
Director-at-Large			X						0.	0.	0.
Column Nowling	(13) Joe McComb	1.00			l				_	_	_
Director-at-Large	Director-at-Large		X						0.	0.	0.
(15) Robert Brown 1.00 Regional Director X 0. 0. 0. (16) Ron Nirenberg 1.00 X 0. 0. 0. 0. Director-at-Large X 0. </td <td>(14) Lynn Nowling</td> <td>1.00</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>_</td> <td></td> <td>_</td>	(14) Lynn Nowling	1.00							_		_
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Director-at-Large X 0. 0. 0. (17) Jim Griffin 1.00			X						0.	0.	0.
(17) Jim Griffin Regional Director X 0. 0. 0.	- · · ·	1.00	_								•
Regional Director X 0. 0. 0.		4 00	X	_			<u> </u>		0.	0.	<u> </u>
		1.00	, ,						^	_	•
Form 990 (2019)			Х				L	L	0.	0.	U .

832007 12-31-18

Form 990 (2018)

Form 990 (2018)

Part VII Section A. Officers, Directors, Trus		ploy	ees			ighe	st (
(A)	(B)			Pos	C) utuar	,		(D)	(E)	_	(F)	
Name and title	Average hours per		not c	heck	more	than		Reportable	Reportable	1	stimat	
	week					is bot or/trus			compensation from related	ľ	mount. other	
	(list any	į				Π	Γ	the	organizations	CO	npens	
	hours for	aie				8		1	(W-2/1099-MISC)	- 1	from th	
	related	tee or	ustee			ensat		(W-2/1099-MISC)		or	ganıza	tion
	organizations	l fas	naltr		loyee	dwog a					nd rela	-
	below line)	Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	rmer			org	ganızat	ions
(18) Suzanne De Leon	1.00	트	=	5	<u> </u>	로등	1 2	 		+-		
Regional Director		x	İ	•	1		ŀ	0.	0	.		0.
(19) Ray O'Docharty	1.00				П							
Regional Director	1 00	X			<u> </u>	<u> </u>	<u> </u>	0.	0	•		0.
(20) Connie Schroeder	1.00	x						0.	0			0.
Regional Director (21) Doyle Robinson	1.00	^	-		-	┼	╁	<u> </u>	U	•		<u> </u>
Regional Director	1.00	x						0.	0			0.
(22) Ramiro Rodriguez Jr.	1.00					 	├-	 		+		
Regional Director		х						0.	0	.		0.
(23) Raul Marquez	1.00									1		
Regional Director		X		L	_	<u> </u>	_	0.	0	<u>. </u>		0.
(24) Tamara Young- Hector	1.00	.							0	ľ		0
Regional Director (25) Sherrie Williams	1.00	Х			<u> </u>	├	├-	0.	0	•		0.
Regional Director	1.00	x			ŀ			0.	0			0.
(26) W.L. Pate Jr.	1.00					-	T					
Regional Director		X		l				0.	0			0.
1b Sub-total								0.	0			0.
c Total from continuation sheets to Part VI	i, Section A						ightharpoons	1,604,677.	0		4,4	
d Total (add lines 1b and 1c)							<u>></u>	1,604,677.	0	. 40	4,4	30.
2 Total number of individuals (including but n	ot limited to th	ose	liste	ed al	bove	e) wi	ho r	eceived more than \$100	,000 of reportable			9
compensation from the organization	·									-	Yes	No No
3 Did the organization list any former officer,	director, or tru	uste	ə. ke	v er	nplo	vee	. or	highest compensated e	mplovee on		1	
line 1a? If "Yes," complete Schedule J for s				, -		,	, -	3 1	. ,	3		Х
4 For any individual listed on line 1a, is the su	m of reportab	le co	omp	ensa	ation	n and	d ot	her compensation from	the organization			
and related organizations greater than \$150	0,000? If "Yes,	" co	mple	ete S	Sche	edule	e J i	for such individual		4	X	
5 Did any person listed on line 1a receive or a	•				-		elat	ted organization or indivi	dual for services			١,,
rendered to the organization? If "Yes," com Section B. Independent Contractors	plete Schedul	e <i>J f</i>	or su	ıch	pers	son		·	 	5	<u> </u>	Х
Complete this table for your five highest co.	mnensated in	tene	nde	nt c	ontr	racto	ors t	that received more than	\$100 000 of comper	sation	from	
the organization Report compensation for	•	•							•		.,	
(A)	-							(B)			C)	
Name and business	address	N	ONE	<u> </u>			_	Description of s	ervices	Comp	ensatio	<u>n</u>
							ᆉ					
							_					
												
2 Total number of independent contractors (ii	ncluding but n	ot lu	nite	d to	tho	se lis	stec	d above) who received m	ore than			
\$100,000 of compensation from the organization	zation 🕨				()						
See Part VII, Section	ı A Cont	:ir	lua	ıti	lor	า ธ	she	eets		Form	990 (2018)

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Total revenue. See instructions

Part IX | Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX (D) Fundraising (A) Total expenses Do not include amounts reported on lines 6b. Program service Management and 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 1,001,577. 519,365. 380,515. 101,697. trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 2,177,662. 2,096,438 64,253. 16,971. Other salaries and wages Pension plan accruals and contributions (include 168,854. 333,668. 136,784. 254,917. 24,532. 61,112. 7,538. section 401(k) and 403(b) employer contributions) 17,639. Other employee benefits 47,979. 39,623. 6,612. 1,744. 10 Payroll taxes Fees for services (non-employees): a Management 3,525 3,525. **b** Legal 27,038. 27,038. c Accounting 267,313. 267,313. d Lobbying e Professional fundraising services. See Part IV, line 17 f Investment management fees Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.) 12 Advertising and promotion 378,188. 323,292. 46,899. 7,997. Office expenses 13 18,523. 129,664. 103,732. 7,409. Information technology 14 15 Royalties 209,706. 271,841. 46,601. 15,534. 16 Occupancy 106,229. 99,808. 6,421. 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 809,691. 809,691 Conferences, conventions, and meetings 19 20 Interest 21 Payments to affiliates 58,447. 45,087. 10,020. 3,340. 22 Depreciation, depletion, and amortization 23 Insurance 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.) 382,986. 382,986. Private sector programs 349,713. 111,298. 349,713. Workshops c Public relations 106,129. 5,169. 32,885. 11,741.d Employee training 20,925. 219. 6,436. 27,631. 21,195. e All other expenses 6,686,189. 5,790,229. 709,451. 186,509. Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.

Form **990** (2018)

Check here

If following SOP 98-2 (ASC 958-720)

Pa	rt X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			(A)		(B)
	,		Beginning of year		End of year
	1	Cash - non-interest-bearing	1,393,132.	1	988,391.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	177,639.	4	256,157.
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete			
	l	Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under			
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
ţ		employees' beneficiary organizations (see instr) Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	
⋖	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	314,487.	9	458,058.
	10a	Land, buildings, and equipment cost or other		•	
	1	basis Complete Part VI of Schedule D 10a 888,169.] ,	
	Ь	Less accumulated depreciation 725, 104.	135,947.	10c	163,065.
	11	Investments - publicly traded securities		11	
	12	Investments - other securities See Part IV, line 11	7,029,373.	12	7,238,589.
	13	Investments - program related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	9,050,578.	16	9,104,260.
	17	Accounts payable and accrued expenses	1,226,518.	17	1,437,683.
	18	Grants payable .		18	
	19	Deferred revenue	2,319,881.	19	2,453,851.
	20	Tax-exempt bond liabilities	0.000	20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D	2,261,086.	21	2,238,739.
es	22	Loans and other payables to current and former officers, directors, trustees,			
=======================================		key employees, highest compensated employees, and disqualified persons			
Liabilities		Complete Part II of Schedule L		22	
_	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X of	1 000 400		1 200 042
		Schedule D	1,923,436.		1,389,243.
	26	Total liabilities. Add lines 17 through 25	7,730,921.	26	7,519,516.
		Organizations that follow SFAS 117 (ASC 958), check here ▶ X and			
Ses		complete lines 27 through 29, and lines 33 and 34.	1 210 (57		1 504 744
au	27	Unrestricted net assets	1,319,657.	27	1,584,744.
Ba	28	Temporarily restricted net assets		28	
ם	29	Permanently restricted net assets		29	
Ţ		Organizations that do not follow SFAS 117 (ASC 958), check here		-	
S O		and complete lines 30 through 34.			
set	30	Capital stock or trust principal, or current funds		30	
As	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds	1 210 657	32	1 504 744
_	33	Total net assets or fund balances	1,319,657.	33	1,584,744.
	34	Total liabilities and net assets/fund balances	9,050,578.	34	9,104,260.

(A) Name and bile Name and bil		ınicipal	Le	eag	jue	<u> </u>			74-6000125						
Name and title	Part VII Section A. Officers, Directors, T	rustees, Key E	mplo	oyee	s, a	nd l	ligh	est	Compensated Employ	ees (continued)					
Nours Per Week (lest any hours for related organizations) Per Week (lest any hours for related organizations) Per Week (lest any hours for related organizations) Per Per Week (lest any hours for related organizations) Per	(A)	(B)			((C)			(D)	(E)	(F)				
Per week (list any) hours for related organizations hours for for the organizations hours for for the organizations hours for for the organizations hours for for the organizations hours for for the organizations hours for for the organizations hours for for the organizations hours for for the organizations hours for for the organizations hours for for the organizations hours for for for for for for for for for for	Name and title	Average			Pos	ition	1		Reportable	Reportable	Estimated				
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Affiliate Director		1.00								_					
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(30) Patrick Rios 1.00	· ·	1.00			!					_					
Regional Director		1 00	X		_	_	<u> </u>		0.	0.	0.				
(31) Karen Hunt 1.00 X 0. 0. 0. 0. 0. (32) Shelley Brophy 1.00 X 0. 0. 0. 0. (33) Steve Killen 1.00 X 0. 0. 0. 0. (34) Michael Rodgere 1.00 X 0. 0. 0. 0. 0. (34) Michael Rodgere 1.00 X 0. 0. 0. 0. 0. 0		1.00					ŀ			_					
Regional Director		1 00	X	lacksquare	lacksquare	<u> </u>	<u> </u>		0.	0.	U •				
(32) Shelley Brophy 1.00 X 0.0 0		1.00	.,								_				
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1.00	Affiliate Director		x						0.	0.	0.				
(40) Beth Ann Unger 1.00 Affiliate Director X 0. 0. 0. (41) Tadd Phillips 1.00 0. 0. 0. 0. Affiliate Director X 0. 0. 0. 0. (42) Eddie Daffern X 0. 0. 0. 0. President-Elect X 0. 0. 0. 0. (43) Belinda Willis 1.00 X 0. 0. 0. 0. Affiliate Director X 0. 0. 0. 0. 0. 0. (44) Christopher Looney 1.00 X 0. 0. 0. 0. 0. 0. (45) Sabrina Schmidt 1.00 X 0.	(39) Jimmy Chew	1.00													
Affiliate Director	Affiliate Director		х						0.	0.	0.				
(41) Tadd Phillips 1.00 Affiliate Director X (42) Eddie Daffern 1.00 President-Elect X (43) Belinda Willis 1.00 Affiliate Director X (44) Christopher Looney 1.00 Affiliate Director X (45) Sabrina Schmidt 1.00 Affiliate Director X (46) Aimee Nemer 1.00 Affiliate Director X 0. 0. 0. 0. 0. 0. 0. 0.	(40) Beth Ann Unger	1.00													
Affiliate Director	Affiliate Director		X						0.	0.	0.				
(42) Eddie Daffern 1.00 President-Elect X 0. 0. 0. (43) Belinda Willis 1.00 0. 0. 0. 0. Affiliate Director X 0. 0. 0. 0. (44) Christopher Looney 1.00 0. 0. 0. 0. 0. Affiliate Director X 0. 0. 0. 0. 0. 0. (45) Sabrina Schmidt 1.00 X 0. <t< td=""><td>(41) Tadd Phillips</td><td>1.00</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></t<>	(41) Tadd Phillips	1.00													
President-Elect	Affiliate Director		Х						0.	0.	0.				
(43) Belinda Willis 1.00 Affiliate Director X (44) Christopher Looney 1.00 Affiliate Director X (45) Sabrina Schmidt 1.00 Affiliate Director X (46) Aimee Nemer 1.00 Affiliate Director X 0. 0. 0. 0. 0. 0.	(42) Eddie Daffern	1.00													
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Total to Part VII, Section A, line 1c	Affiliate Director	1	X		Щ	لـــا	لـــا		0.	U.	U •				
Total to Part VII, Section A, line 1c															
	Total to Part VII, Section A, line 1c														

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	Municipal		_						74-000	<u> </u>
Part VII Section A. Officers, Director	rs, Trustees, Key E	mplo	yee			ligh	est		ees (continued)	
(A)	(B)			(C				(D)	(E)	(F)
Name and title	Average	Position (check all that apply)						Reportable	Reportable	Estimated
	hours	(cl	neck	all t	hat	app	ly)	compensation	compensation	amount of other
	per week					gy.		from the	from related organizations	compensation
	(list any	Ē				płoye		organization	(W-2/1099-MISC)	from the
	hours for	drec				ma pa		(W-2/1099-MISC)	(11 27 1000 700)	organization
	related	ee or	stee			nsate		,		and related
	organizations	1 frust	nal fr.		оуве	отре				organizations
	below	Individual trustee or director	Institutional frustee	ъ	Key employee	Highest compensated employee	Former			
	line)	Ē	Inst	Officer	Key	Hig	For		L	
(47) Maria Redburn	1.00									
Affiliate Director		X						0.	0.	0
(48) Jeff White	1.00								•	•
Affiliate Director		X			\Box			0.	0.	0
(49) Scott Williams	1.00			•					•	•
Affiliate Director		X	Щ	\Box	Щ		L	0.	0.	0
(50) Brian Frieda	1.00									_
Affiliate Director	4.00	X						0.	0.	0
(51) R. Alan Shubert	1.00							_		_
Affiliate Director	1 00	Х						0.	0.	0
(52) Mary Gauer	1.00	,,							^	^
Ex. Officio	- 60 00	Х		_				0.	0.	0
(53) Bennett Sandlin	60.00			. ,				222 102	0	60 071
Executive Director	60.00			Х				322,182.	0.	60,971
(54) Shanna Igo	60.00	ł		., l				206 715	0.	61 060
Deputy Executive Director-	60.00			X				286,715.	<u> </u>	64,968
(55) Scott Houston	60.00	ł		x				188,392.	0.	46,908
Deputy Executive Director-	60.00	-		^		_		100,352.		40,500
(56) Rachael Pitts	80.00	ł		x				151,813.	0.	41,080
Deputy Executive Director-	60.00	-		_			_	131,013.	•	41,000
(57) Chris Corrigan	80.00			x				142,668.	0.	40,299
Director of Communications (58) Joe Foster	60.00			_				142,000.	0.	40,233
Deputy Executive Director-	00.00					х		143,567.	0.	41,432
(59) Monty Wynn	60.00	H	\vdash			Α.		143,307.		41,452
Assistant Director of Legi	- 00.00					х		138,118.	0.	40,725
(60) Bill Longley	60.00	H	\vdash			-		130,110.		10,723
Legislative Counsel	00.00					х		118,636.	0.	35,039
(61) Christy Drake-Admas	60.00	-		\dashv	\dashv			110,0300		33,033
Assistant General Counsel	30.00				l	х		112,586.	0.	33,008
Abbibeant denotal counsel		\vdash	\dashv	\dashv	一			112,3000		33,333
				1						
	 	_		\dashv	\dashv					
	<u> </u>									
		\vdash		\dashv	一					
				- 1						
			\Box	\dashv	\neg					
		П			_					
				ļ	I					
Total to Part VII, Section A, line 1c								1,604,677.		404,430.

Form	990 (2018) Texas Municipal League	74-	6000125	Pa	ge 12			
Pa	rt XI Reconciliation of Net Assets				_			
	Check if Schedule O contains a response or note to any line in this Part XI				<u> </u>			
1 2 3 4 5 6 7 8	Total revenue (must equal Part VIII, column (A), line 12) Total expenses (must equal Part IX, column (A), line 25) Revenue less expenses Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) Net unrealized gains (losses) on investments Donated services and use of facilities Investment expenses Prior period adjustments Other changes in net assets or fund balances (explain in Schedule O)	1 2 3 4 5 6 7 8 9	6,95 6,68 26 1,31	6,1 5,0	89. 87.			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,		4					
_	column (B))	10	1,58	4,7	44.			
Pa	rt XII Financial Statements and Reporting							
	Check if Schedule O contains a response or note to any line in this Part XII			Yes	No			
1 2a	Accounting method used to prepare the Form 990							
Ь	Were the organization's financial statements audited by an independent accountant? If "Ves." check a box below to indicate whether the financial statements for the year were audited on a separate	a haeie	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 C Consolidated basis D 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 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		х			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audits, explain why in Schedule O and describe any steps taken to undergo such audits	ired aud	3b					
			Form	uan /	(2018)			

SCHEDULE C

(Form 990 or 990-EZ)

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.

2018

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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	itions. Complete Part III			
Nar	ne of organization			Empl	oyer identification number
	Texas M	<u> Kunicipal League</u>			74-6000125
Pa	art I-A Complete if the org	ganization is exempt un	der section 501(c)	or is a section 527 o	rganization.
2	Provide a description of the organic Political campaign activity expendic Volunteer hours for political campa	tures	ical campaign activities	ın Part IV ▶\$	
Pá	art I-B Complete if the org	ganization is exempt un	der section 501(c))(3).	
	Enter the amount of any excise tax			▶ \$	
	Enter the amount of any excise tax	•		5 ▶\$	
3	If the organization incurred a section	on 4955 tax, did it file Form 472	0 for this year?		Yes No
4a	a Was a correction made?				Yes No
	If "Yes," describe in Part IV.				
P	art I-C Complete if the org	ganization is exempt un	der section 501(c	, except section 501(c)(3).
1	Enter the amount directly expende	d by the filing organization for s	ection 527 exempt fund	ction activities > \$	
2	Enter the amount of the filing organ	nization's funds contributed to	other organizations for s	_	
	exempt function activities			▶\$	
3	Total exempt function expenditures	s Add lines 1 and 2 Enter here	and on Form 1120-POL		
	line 17b			▶ \$	
4	Did the filing organization file Form	-			Yes L No
5	Enter the names, addresses and er made payments. For each organiza contributions received that were propolitical action committee (PAC). If	ation listed, enter the amount paromptly and directly delivered to	aid from the filing organ o a separate political org	ization's funds. Also enter th ganization, such as a separa	ne amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0.

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

Schedule C (Form 990 or 990-EZ) 2018

LHA

832041 11-08-18

Schedule C (Form 990 or 990 EZ) 2018 T Part II-A Complete if the orga	exas M	unicipal Lea	gue		6000125 Page 2
Part II-A Complete if the organization 501(h)).	inization i	s exempt under se	ection buricity and ti	ieu romi 3/68 (6	siection under
A Check If the filing organization expenses, and share	of excess lol	bbying expenditures)	I list in Part IV each affiliated	d group member's na	me, address, EIN,
Limits	on Lobbyin	oox A and "limited control g Expenditures s amounts paid or incu		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influe	ance public o	ninion (grass roots lobb)	vina)		
b Total lobbying expenditures to influe	·	· · · · · · · · · · · · · · · · · · ·			
c Total lobbying expenditures (add line	_	* '	·9/		
d Other exempt purpose expenditures		,			
e Total exempt purpose expenditures		and 1d)			
f Lobbying nontaxable amount Enter			in both columns		
If the amount on line 1e, column (a) or		The lobbying nontaxab			
Not over \$500,000		20% of the amount on li			į
Over \$500,000 but not over \$1,000,			ne excess over \$500,000.		
Over \$1,000,000 but not over \$1,50			ne excess over \$1,000,000.		
Over \$1,500,000 but not over \$17,0		\$225,000 plus 5% of the	e excess over \$1,500,000		
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					
j If there is an amount other than zero		e 1h or line 1ı, did the oi	rganization file Form 4720		Yes N
reporting section 4911 tax for this ye	4-Y at made a se See the	separate instructions	o not have to complete all for lines 2a through 2f.)	of the five columns	
	Lobbying	g Expenditures During	4-Year Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2015	5 (b) 2016	(c) 2017	(d) 2018	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount					
(150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount					1
(150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2018

Schedule C (Form 990 or 990-EZ) 2018 Texas Municipal League 74-6000125 Page 3

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 each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description	(a)	(t)
of the lobbying activity	Yes	No	Amo	ount
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				
a Volunteers?				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c Media advertisements?				
d Mailings to members, legislators, or the public?				
e Publications, or published or broadcast statements?	ļ.———	-		
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i Other activities?				
j Total Add lines 1c through 1:	-			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b If "Yes," enter the amount of any tax incurred under section 4912				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912	-			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), see	ection 501(c)	(5) or se	ection	
501(c)(6).		(0), 01 30		
			Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		1	X	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		X
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from Part III-B Complete if the organization is exempt under section 501(c)(4), see				Х
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes." 1 Dues, assessments and similar amounts from members		1		
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of p	olitical			
expenses for which the section 527(f) tax was paid).				
a Current year		2a		
b Carryover from last year		2b		
c Total		2c		
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due	s	3		
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the				
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying a	and political			
expenditure next year?		4		
5 Taxable amount of lobbying and political expenditures (see instructions)		5		
Part IV Supplemental Information				
Provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5, Part II-A (affiliated of	roup list); Part II	-A, lines 1	and 2 (see	
instructions), 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.

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

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number

	Texas Municipal Lea		74-6000125
Pai	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds or	Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin	e 6	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor advised f	unds
-	are the organization's property, subject to the organization's	-	Yes No
6	Did the organization inform all grantees, donors, and donor a		d only
-	for charitable purposes and not for the benefit of the donor o		
	impermissible private benefit?		Yes No
Pai		anization answered "Yes" on Form 990. Part	
1	Purpose(s) of conservation easements held by the organization		
•	Preservation of land for public use (e.g., recreation or e		ally important land area
	Protection of natural habitat	Preservation of a certified	• •
	Preservation of open space	1 reservation of a certified	Thistorie Structure
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form of a	conservation easement on the last
2		led conservation contribution in the form of a	Held at the End of the Tax Year
_	day of the tax year Total number of conservation easements		2a
			2b
	Total acreage restricted by conservation easements	usture included in (a)	2c
	Number of conservation easements on a certified historic str		20
a	Number of conservation easements included in (c) acquired a	after 7/25/06, and not on a historic structure	2d
_	listed in the National Register		
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by the org	ganization during the tax
	year >		
4	Number of states where property subject to conservation eas		
5	Does the organization have a written policy regarding the per		Yes No
_	violations, and enforcement of the conservation easements if		
6	Staff and volunteer hours devoted to monitoring, inspecting,	nandling of violations, and enforcing conserva	ation easements during the year
_		N	annone de monte de como
7	Amount of expenses incurred in monitoring, inspecting, hand	ning of violations, and emorcing conservation	easements during the year
•	Does each conservation easement reported on line 2(d) abov	en entirefy the requirements of agestion 170/b)//	\/D\/4\
8		e satisfy the requirements of section 170(f)(4	Yes No
_	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation		
	include, if applicable, the text of the footnote to the organizat	ion's inancial statements that describes the	organization's accounting for
Dat	conservation easements t III Organizations Maintaining Collections of	Art Historical Treasures or Othe	r Similar Assets
Fai	Complete if the organization answered "Yes" on Form		. Ommar Addets.
			and belong about modes of out
та	If the organization elected, as permitted under SFAS 116 (AS		
	historical treasures, or other similar assets held for public exh		of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describe		1 h - 1
b	If the organization elected, as permitted under SFAS 116 (AS		
	treasures, or other similar assets held for public exhibition, ed	ducation, or research in furtherance of public s	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		
2	If the organization received or held works of art, historical trea		n, provide
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items	
а	Revenue included on Form 990, Part VIII, line 1		\$
	Assets included in Form 990, Part X		<u> </u>
LHA	For Paperwork Reduction Act Notice, see the Instructions	s for Form 990.	Schedule D (Form 990) 2018

Sche	dule D (Form 990) 2018 Texas M	unicipal L	eagu	.e				74-60	00125	Page 2
Pai	t III Organizations Maintaining C	Collections of A	rt, His	torical Tr	easures,	or Other	Simil	är Asse	ts(continu	jed)
3	Using the organization's acquisition, access	on, and other record	ds, chec	k any of the	following the	at are a sig	nıfıcant	use of its	collection	ıtems
	(check all that apply).									
а	Public exhibition	C	, <u> </u>	Loan or exc	hange progr	ams				
b	Scholarly research	•	با د	Other						
С	Preservation for future generations									
4	Provide a description of the organization's co	=		=	=			ose in Par	t XIII.	
5	During the year, did the organization solicit of	r receive donations	of art, h	istorical trea	sures, or oth	ner sımılar a	assets	_	_	
	to be sold to raise funds rather than to be m								_ Yes	No_
Pai	t IV Escrow and Custodial Arran		ete if the	e organizatio	n answered	"Yes" on F	orm 99	0, Part IV,	line 9, or	
	reported an amount on Form 990, Pa									
1a	Is the organization an agent, trustee, custod	ian or other intermed	diary for	contribution	is or other as	ssets not ir	rciuaea	<u> </u>	Yes	X No
	on Form 990, Part X?	and complete the fe	Manna	table:				L	⊐ tes	LAT NO
D	If "Yes," explain the arrangement in Part XIII	and complete the it	ollowing	taole:					Amount	
_	Paginning balance						1c		Amount	
۲ C	Beginning balance Additions during the year						1d			
d e	Distributions during the year						1e			
f	Ending balance						1f			
	Did the organization include an amount on F	orm 990. Part X. line	21. for	escrow or cu	ustodial acco	ount liability		X	Yes	□ No
	If "Yes," explain the arrangement in Part XIII						, .			$\overline{\mathbf{x}}$
Pai)			
		(a) Current year	(b) F	Prior year	(c) Two yea	rs back (c) Three y	ears back	(e) Four	ears back
1a	Beginning of year balance									
b	Contributions				·					
С	Net investment earnings, gains, and losses									
d	Grants or scholarships		<u> </u>							
е	Other expenditures for facilities		1							
	and programs									
f	Administrative expenses									
g	End of year balance		L							
2	Provide the estimated percentage of the cur	rent year end baland	ce (line 1	g, column (a	i)) held as:					
а	Board designated or quasi-endowment		_%							
	Permanent endowment	%								
¢	Temporarily restricted endowment	%								
_	The percentages on lines 2a, 2b, and 2c sho			_4		al da - Ala a				
За	Are there endowment funds not in the posse	ession of the organiz	ation th	at are neio a	na aaministe	erea for the	organi	zation	F	res No
	by:								3a(ı)	res No
	(i) unrelated organizations								3a(ii)	-
.	(ii) related organizations If "Yes" on line 3a(ii), are the related organizations	ations listed as requi	red on S	Schadula R2					3b	\dashv
4	Describe in Part XIII the intended uses of the	•							<u> </u>	
_	t VI Land, Buildings, and Equipm		344110111	101100						
	Complete if the organization answere		0. Part I	V, line 11a S	See Form 990	0, Part X, III	ne 10			
	Description of property	(a) Cost or o		(b) Cost			umulate	ed	(d) Book	value
		basis (investi		basis		depr	eciation		` '	
1a	Land									
	Buildings									
c	Leasehold improvements				4,162.		58,0			,127.
d	Equipment				4,178.		71,1			,013.
	Other				9,829.	2.9	95,9	04.		,925.
<u>Total</u>	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part	X, colur	nn (B), line 1	0c)				163	,065 .

Schedule D (Form 990) 2018

cneaule D	Form 990) 2018	IEVOD	Municipal	ħσ
Part VIII	Investments -	Other Secu	rities	

Part VII Investments - Other Securities.			· · · · · · · · · · · · · · · · · · ·
Complete if the organization answered "Yes"	on Form 990, Part IV, line		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation. Cost or	end-of-year market value
(1) Financial derivatives			- <u>-</u>
(2) Closely-held equity interests			
(3) Other			
(A) Intergovernmental risk			
(B) pool	7,238,589.	End-of-Year Marke	t Value
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	7,238,589.		
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line		
(a) Description of investment	(b) Book value	(c) Method of valuation. Cost or	end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11d See Form 990, Part X, line 15	
(a)	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			·
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line	e 15)	1	>
Part X Other Liabilities.			<u> </u>
Complete if the organization answered "Yes"	on Form 990. Part IV. line	11e or 11f See Form 990, Part X, line	25
(a) Description of liability		b) Book value	
(1) Federal income taxes		· · ·	
		29,493.	
		1,359,750.	
(4)			
(5)			
(6)			
			
(8)			
(9) Total (Column (h) must equal Form 990, Part X, col. (R) lin.	0.25)	1.389.243.	
TATAL IL DIUMO IDI MUST POURI FORM 990. PRO X. COL (B.) IIDI	e 7:11 ■ 1	U J . A T J A I	

^{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 Schedule D (Form 990) 2018

74-6000125 Page 4 Texas Municipal League 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 6,951,276. 1 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 2c c Recoveries of prior year grants d Other (Describe in Part XIII) 2d e Add lines 2a through 2d 6,951, 3 3 Subtract line 2e from line 1 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) 6,951,276. 5 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 7,219,178. 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 c Other losses 2c 532,989. d Other (Describe in Part XIII) 2d 532,989. 2e e Add lines 2a through 2d 6,686,189. 3 3 Subtract line 2e from line 1 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 4b b Other (Describe in Part XIII) c Add lines 4a and 4b 4c 6,686,189. 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 IV, line 2b: The Organization is associated with twenty-one affiliated entities, which are separate organizations. Ten of these affiliates have entered into administrative service agreements with the Organization, whereby the Organization provides various services, including accounting and financial management. The operating cash for these affiliates is maintained in a pooled interest bearing bank account with the Organization; therefore the Organization's reported cash balance includes the funds of these affiliates, which are offset by an equal amount of escrow liability. Part X, Line 2: The Organization is generally exempt from federal income taxes under

Schedule D (Form 990) 2018

Schedule D (Form 990) 2018 Texas Municipal League 74-6000125 Page 5
Part XIII Supplemental Information (continued)
Section 501(c)(4) of the Internal Revenue Code. However, certain
activities of the Organization 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 Organization's
tax-exempt purpose is subject to taxation as unrelated business income.
For the years then ended June 30, 2018 and 2017, the Organization had
taxable income.
Management has evaluated the Organization's tax positions and concluded
that the Organization had taken no uncertain tax positions. With few
exceptions the Organization is no longer subject to income tax
examinations by the U.S. Federal, state or local tax authorities for years
before 2015.
Part XII, Line 2d - Other Adjustments:
Decrease In Unfunded Pension Liability 532,989.

SCHEDULE J (Fòrm 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

➤ Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ➤ Attach to Form 990.

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

2018

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Texas Municipal League

Employer identification number 74-6000125

Pa	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments X Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	X	
2				
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2	Х	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.	i		
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
		1		
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
•	organization or a related organization			
а	Receive a severance payment or change-of-control payment?	4a		Х
b		4b		Х
	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
_	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.	İ		
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of		ľ	
а		5a		X
	Any related organization?	5b		X
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation		İ	
	contingent on the net earnings of			
а	The organization?	6a		X
	Any related organization?	6b		X
_	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments	1		
	not described on lines 5 and 6? If "Yes," describe in Part III	7		Х
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	8	L	X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958-6(c)?	9		

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

Schedule J (Form 990) 2018

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of V	of W-2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(ı) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation		(a)-ii)(a)	reported as deferred on prior Form 990
(1) Bennett Sandlin	Θ	322,182.	0	0	52,868.	8,103.	383,153.	0
Executive Director	<u> </u>	0	0	0	0	0		0
(2) Shanna Igo	Ξ	286,715	0	0	. 56,865.	8,103.	351,683.	0
Deputy Executive Director-	(ii)		0	0		0		0
(3) Scott Houston	Ξ	188,392	0	0	38,805.	8,103.	235,300.	0
Deputy Executive Director-	(ii)		0	0.				0.
(4) Rachael Pitts	Ξ	151,813	0	0	32,977.	8,103.	192,893.	0
Deputy Executive Director-	€	0	0	0	0	0		0
(5) Chris Corrigan	Ξ	142,668	0	0	32,196.	8,103.	182,967.	0.
Director of Communications	€	0	0	0	0	0		0.
(6) Joe Foster	(i)	143,567	0	0	33,329.	8,103.	184,999.	0.
Deputy Executive Director-	€	0	0	0		0		0.
	(i)	138,118.	0	0	32,622.	8,103.	178,843.	0
Assistant Director of Legi	(ii)		0	0		0.		0.
(8) Bill Longley	(1)	118,636.	0	0.	26,93	8,103.	153,675.	0
Legislative Counsel	(ii)		• 0	0.		0		0.
(9) Christy Drake-Admas	(i)	112,586.	0	0	24,905.	8,103.	145,594.	0.
Assistant General Counsel	(ii)	0.	0	0	0	0	0.	0
	(i)							
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Schedule J (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.

Open to Public

OMB No 1545-0047

Inspection

Name of the organization

Texas Municipal League

Employer identification number 74-6000125

Form 990, Part I, Line 1, Description of Organization Mission:
needs and advancing the interests of Texas Cities.
Form 990, Part III, Line 4d, Other Program Services:
Legal Services: Conducts legal research to respond to member requests,
collects and distributes sample ordinances upon request, prepares
monthly column for magazine, speaks at various seminars, responds to
800-900 calls for legal advice.
Expenses \$ 1,042,773. including grants of \$ 0. Revenue \$ 0.
Affiliate Service: Promotes the interests of the League's affiliates by
providing organizational and technical assistance.
Expenses \$ 404,489. including grants of \$ 0. Revenue \$ 0.
Form 990, Part V, Line 13, List of States with Qualified Health Plans:
TX
Form 990, Part VI, Section A, line 6:
Members consist of 1)Regular Members: Any city or town in the State of
Texas may, by proper action of its governing body and the payment of the
current member service fees from its own municipal funds, become an active
member of the League. 2)Associate Members: Individuals and organizations
may be granted associate membership by the Executive Director. Associate
members may receive League publications and attend the League's Annual
Conference. 3)Honorary Members: Any person who has rendered conspicuous
service for the improvement of municipal government may, by vote of the
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2018)

Employer identification number 74-6000125

Board of Directors, be granted an honorary membership in the League. All former presidents of the League shall be Honorary Members.

Form 990, Part VI, Section A, line 7a:

Directors shall be elected as follows: 1)Regional Directors: One director to be elected by and from each of the TML regions' members, provided that such regional director shall in every case be a mayor, councilmember, city commission member, alderman or other member of an elected municipal governing body. 2)Affiliate Directors: One director who is a city official from a TML member city to be elected by the members of TML member cities from each of the affiliates of the League. 3)Directors-at-Large: One director-at-large to be designated by resolution of the governing body of each TML member city for which total population exceeds 200,000 on or before October 1, 1986, or 300,000 thereafter.

Form 990, Part VI, Section A, line 7b:

The Constitution may be amended at any Annual Conference of the League by a two-thirds vote, provided the proposed amendment shall have first been prepared in writing and submitted to the Board of Directors on or before the first day of the Annual Conference. Such amendment shall go into effect immediately upon adoption or as otherwise stipulated. If, within sixty days after the adoption of any amendment, one-third or more of the member cities protest in writing to the Board of Directors against such amendment, it shall automatically be suspended until the next Annual Conference, when it may be taken up again for reconsideration and vote as in the first instance.

Form 990, Part VI, Section A, line 8b:

Employer identification number 74-6000125

The executive committee has the authority to act on behalf of the governing body and any meetings or decisions made by the executive committee are maintained for the Organization's records. There were no actions or decisions made by the executive committee on behalf of the governing body during the current fiscal year; therefore there is no documentation of such meetings or actions.

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

Prior to filing the tax returns, the Organization's Form 990, Form 990-T and audited financial statements are provided for review and approval to management, the Executive Director, and the Budget and Audit committee, which is comprised of four board members and the President-Elect.

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

The Organization provides the conflict of interest policy to employees, in the employee handbook, and board members, in the handouts presented during the new board member orientation meetings. The Organization monitors compliance with the policy on an on-going basis by discussing significant proposed transactions, agreements, or relationships with those parties within the Organization involved on behalf of TML in their respective professional capacities. Failure to disclose any conflict of interest is a violation of the stated policy and the Executive Director and Board of Directors would determine consequences for the affected party.

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

The Executive Committee during the first Board meeting of each calendar

year, shall review the performance of the Executive Director and

communicate the results of that performance review to the full Board of

832212 10-10-18

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

SCHEDULER (Form 990)

Name of the organization Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Related Organizations and Unrelated Partnerships

▼ Attach to Form 990.

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

Texas Municipal League

Open to Public Inspection 2018

OMB No 1545-0047

Employer identification number 74-6000125

(g) Section 512(b)(13) å × × × controlled entity? Direct controlling Yes Identification 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. entity Direct controlling entity End-of-year assets A/A I/A 1/A **e** status (if section Public charrty 501(c)(3)) Total income Exempt Code Ð section 501(c)(6) 501(c)(6) 501(c)(6) 501(c)(6) ਰ Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Legal domicile (state or Legal domicile (state or foreign country) foreign country) rexas Pexas Texas rexas esource administration in to promote the proficiency of city managers and other government accounting and to promote excellence in lo provide members with urban administrators a professionalism of its information related to nembers, advancing the Primary activity Primary activity personnel and human 9 To enhance the Texas Municipal Human Resources Association - 74-2501995, 1821 Rutherford Lane, Suite Texas - 75-2178717, 1821 Rutherford Lane, Government Finance Office Association of Building Officials Association of Texas 74-2502126, 1821 Rutherford Lane, Suite 74-6053951, 1821 Rutherford Lane, Suite Name, address, and EIN (if applicable) Texas City Management Association -Name, address, and EIN of related organization of disregarded entity Suite #400, Austin, TX 78754 #400, Austin, TX 78754 1400, Austin, TX 78754 #400, Austin, TX 78754 Partil Part

832161 10-02-18 LHA

Schedule R (Form 990) 2018

74-6000125

Page 2

Schedule R (Form 990) 2018 Texas Municipal League

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

Beneral or Percentage managing ownership Schedule R (Form 990) 2018 (i) Section 512(b)(13) controlled entity? 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 Yes No 3 Percentage ownership YesNo Ξ Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) Share of end-of-year assets $\boldsymbol{\epsilon}$ <u>6</u> Yes No Disproportionate allocations? Ξ Share of total income ε Share of end-of-year assets Type of entrty (C corp, S corp, or trust) Share of total income Direct controlling entity Predominant income (related, unrelated, excluded from tax under sections 512-514) Ē (e) Legal domicile (state or foreign country) (d)
| Direct controlling entity Primary activity (c)
Legal
domicile
(state or
foreign
country) Primary activity Name, address, and EIN of related organization Name, address, and EIN of related organization <u>a</u> 332162 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

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule	y cross that	potol occupations potol	() II obsolution	Yes No
a Receipt of (i) interest, (ii) annuties, (iii) royalties, or (iv) rent from a controlled entity				1a X
b Gift, grant, or capital contribution to related organization(s)				1b X
c Gift, grant, or capital contribution from related organization(s)				1c X
d Loans or loan guarantees to or for related organization(s)				1d
e Loans or loan guarantees by related organization(s)		,		1e X
f Dwdends from related organization(s)				*
		:		*
B care of assets to reface organization(s)				
				+
 Exchange of assets with related organization(s) Lease of facilities, equipment, or other assets to related organization(s) 				d X
k Lease of facilities, equipment, or other assets from related organization(s)				×
 Performance of services or membership or fundraising solicitations for related organization(s) 	nization(s)			
m Performance of services or membership or fundraising solicitations by related organization(s)	nization(s)			
n Shanng of facilities, equipment, mailing lists, or other assets with related organization(s)	(s)uo		:	t ×
o Sharing of paid employees with related organization(s)				۰ ۲
p Reimbursement paid to related organization(s) for expenses				- t
	•			
 r Other transfer of cash or property to related organization(s) s Other transfer of cash or property from related organization(s) 				+ t
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	ho must complete t	is 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 City Management Association	N	95,544.	Cash received	
Management Association	0	35,446.Cash	Cash received	
Finance Officers Assoc	0	35,204.Cash	Cash received	
Government Finance Officers Association of (4) Texas	N	58,266.	.Cash received	
(5)				
(9)				
832163 10-02-18	32		Schedule	Schedule R (Form 990) 2018

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.

	age Fip									1																								918
€ ,	amount in box 20 managing ownership of Schedule K-1 partner?									;																				i				Schedule R (Form 990) 2018
6	anaging artner?	Yes No								-				ļ						 _		ļ				+				Ŧ				(Form
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3	2 Section 1	rm 106																																Sche
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ε	Dispropor- tionate allocations?	Yes No			 _					_				+	-			\dashv		 		╁				+				+		-		
6)	Share of end-of-year	assets																																İ
(ਲੇ ਨੂੰ	В																																
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€	Share of total	ıncome																																
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Schedule R (Form 990) 2018 Texas Municipal League	74-6000125 Page 5
Part VII Supplemental Information.	
Provide additional information for responses to questions on Schedule R. See instructions	
Part II, Identification of Related Tax-Exempt Organization	ons:
Name of Related Organization:	
Building Officials Association of Texas	
Primary Activity: To enhance the professionalism of its	members, advancing
the standards of th	
Name of Related Organization:	
Texas Municipal Human Resources Association	
Texas Municipal numan Resources Association	
Primary Activity: To promote excellence in personnel and	human resource
administration in Texa	
Name of Related Organization:	
Government Finance Office Association of Texas	
Primary Activity: To provide members with information rel	lated to
government aggounting and fin	
government accounting and fin	
	