KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	26-427-UF	Version Type:	AMENDED
Report Date:	6/1/2026 8:58 AM	Status:	Submitted

Agency/Facility Information

Agency Name:	Metropolitan Transit Authority of Harris County	Agency Address:	1900 Main, PO BOX 61429
Agency City:	Houston	Agency State:	TX
Agency Zip:	77208		

Director Information

Director Salutation:	Chief	Director First Name:	Ban
Director Middle Name:			
Director Last Name:	Tien		

Reporter Name:	Joseph Drescher	Reporter Email:	joseph.drescher@houstonmetropolice.org

Decedent Information

Identity of Deceased

First Name: Vinh

Middle Name:

Last Name: Nguyen

Suffix:

Date of Birth: 5/1/2004 Sex: Male

Race: Asian or Pacific Islander

Age At Time Of Death: 22

Date/Time of Custody (arrest, incarceration) (mm/dd/yyyy hh:mm AM/PM):

Date/Time of Custody or Incident: 5/16/2026 10:17 AM

Date/Time of Death (mm/dd/yyyy hh:mm AM/PM):

Death Date and Time: 5/16/2026 11:17 AM

Manner / Cause of Death

Has a medical examiner or coroner conducted an evaluation to determine a cause of death?

Medical Examiner/Coroner Evaluation?: Yes, results pending

What was the manner of death? (select only one)

Manner of Death:	Homicide (includes Justifiable Homicide)

Medical Cause of Death:

Medical Cause of Death:

Pending official results from Harris County Institute of Forensic Sciences.

Had the decedent been receiving treatment for the medical condition that caused the death after admission to your jail's jurisdiction?

Medical Treatment:	Not Applicable

If death was an accident, homicide or suicide, who caused the death?

Who caused the death?:	Law enforcement/correctional personnel

If a weapon caused the death, what type of weapon caused the death? (Hold CTRL to select all that apply)

Type of weapon that caused death?:	Handgun

Was the cause of death the result of a pre-existing medical condition or did the decedent develop the condition after admission?

Pre existing medical condition?:	Not Applicable; cause of death was accidental injury, intoxication, suicide or homicide

If death was an accident, homicide or suicide, what was the means of death?

Means of Death:	Firearm

Location / Custody Information

Where did the event causing the death occur?

Street Address:	8250 Park Place Blvd	City:	Houston
County:	Harris	Zip:	77017

What location category best describes where the event causing the death occurred?

Location Category: Roadway/highway/street/sidewalk

What type of custody/facility was the Decedent in at the time of death:

Type of Custody: Pre-Custodial Use of Force

Specific type of custody/facility:

Specific Type of Custody/Facility:

N/A

What was the time and date of the deceased's entry into the law enforcement facility where the death occurred (mm/dd/yyyy hh:mm AM/PM):

Entry Date Time:

Entry Date Time N/A: ☑

Where did the death occur?

Death Location: Medical facility

General Information

Did any other law enforcement agencies respond to calls for service related to this incident?

Other Agencies Respond?: Yes

What were the most serious offense(s) with which the deceased was (or would have been) charged with at the time of death?

Offense 1:

Aggravated Assault on Public Servant

Offense 2:

Aggravated Assault

Offense 3:

Were the Charges:: Not filed at time of death

What were the types of charges or reason for contact? (Hold CTRL to select all that apply)

Type of Offense: Violent Crime Against Persons

At any time during the incident and/or entry into the law enforcement facility, did the decedent display or use a weapon?

Decedent display/use of weapons: Yes, mark all that apply

Decedent Display or Use Weapon Details: Displayed other weapon, specify:

Specify Weapon Displayed:

Meat cleaver

At any time during the incident and/or entry into the law enforcement facility, did the decedent:

Attempt to Injure Others?:	Yes (select all that apply)
Ways Decedent Attempted To Injure Others:	Attempted to injure law enforcement personnel; Attempted to injure civilian(s) or other inmate(s)

At any time during the incident and/or entry into the law enforcement facility, did the decedent:

Appear intoxicated (alcohol or drugs):	Unknown	Make suicidal statements?:	Unknown
Exhibit any mental health problems?:	Yes	Exhibit any medical problems?:	Unknown

At any time during the incident and/or entry into the law enforcement facility, did the decedent:

Barricade self or initiate standoff?:	No	Resist being handcuffed or arrested?:	No
Physically attempt/assault officer(s):	Yes	Gain possession of officer's weapon:	No
Verbally threaten other(s) including law:	Unknown	Escape or attempt to escape/flee custody:	No
Attempt gain possession officer's weapon:	No		

Was the deceased under restraint in the time leading up to the death or the events causing the death?

Under Restraint:	No

Summary of Incident

Summary of How the Death Occurred: (max. 30,000 characters)

Summary:

On May 16, 2026, METRO Police received a report of a disturbance at a bus shelter involving a male individual who was allegedly holding a knife and possible brandishing it towards nearby patrons. Responding officers arrived on scene and initially contacted an individual they believed to be the suspect. A METRO bus supervisor informed the officers that this individual was not involved. During the same interaction, the reporting party identified the male armed with a meat cleaver.

The suspect was located behind a gated entry and was observed pacing back and forth. Officers issued multiple verbal commands directing the suspect to drop the weapon; however, he did not comply. The suspect maintained visual contact with the officers but did not respond verbally.

The suspect eventually opened the gate and charged the toward the officers raising the meat cleaver in a threatening manner. Both officers discharged their firearms, striking the suspect multiple times. Officers immediately rendered aid following the shooting.

The suspect was transported by ambulance to Ben Taub Hospital, where he was pronounced deceased at 11:17 a.m. as a result of his injuries.