NOVEMBER 14, 2019

NATIONAL ASSOCIATION OF WOMEN JUDGES  
1001 CONNECTICUT AVENUE, NW, SUITE 1138  
WASHINGTON, DC 20036  
ATTENTION: CONNIE PILLICH

DEAR MS. PILLICH

ENCLOSED ARE THE ORIGINAL AND ONE COPY OF THE 2018 EXEMPT ORGANIZATION RETURNS, AS FOLLOWS...

2018 FORM 990
2018 FORM 990-T
2018 FORM D-20

FEDERAL LAW REQUIRES THAT THE LATEST THREE YEARS OF FORM 990 MUST BE AVAILABLE FOR INSPECTION BY THE GENERAL PUBLIC AT YOUR PRINCIPAL OFFICE AND ANY REGIONAL OR DISTRICT OFFICES THAT HAVE EMPLOYEES WHOSE AGGREGATE NUMBER OF PAID HOURS A WEEK ARE NORMALLY AT LEAST 120. IN ADDITION, IF ON OR AFTER JULY 15, 1987, YOUR ORGANIZATION HAD ACCESS TO A COPY OF ITS EXEMPTION APPLICATION, THAT DOCUMENT WITH ITS RELATED ATTACHMENTS MUST BE KEPT AVAILABLE FOR INSPECTION BY THE GENERAL PUBLIC. SEVERE PENALTIES APPLY FOR NON-COMPLIANCE.

CHANGES TO THE FEDERAL LAW BY THE "TAXPAYER BILL OF RIGHTS 2" IN 1996 REQUIRE YOU TO PROVIDE COPIES OF THESE DOCUMENTS IF REQUESTED. IF WE CAN HELP YOU TO COMPLY WITH THESE REQUIREMENTS, PLEASE CONTACT US.

EACH ORIGINAL SHOULD BE DATED, SIGNED AND FILED IN ACCORDANCE WITH THE FILING INSTRUCTIONS. THE COPY SHOULD BE RETAINED FOR YOUR FILES.

SINCERELY,

ETHAN GEWOLB, CPA
### TAX RETURN FILING INSTRUCTIONS

**FORM 990**

**FOR THE YEAR ENDING**

**DECEMBER 31, 2018**

| Prepared for | NATIONAL ASSOCIATION OF WOMEN JUDGES  
|              | 1001 CONNECTICUT AVENUE, NW, SUITE 1138  
|              | WASHINGTON, DC 20036 |
| Prepared by  | CALIBRE CPA GROUP PLLC  
|              | 7501 WISCONSIN AVENUE, SUITE 1200 WEST  
|              | BETHESDA, MD 20814 |
| Amount due or refund | NOT APPLICABLE |
| Make check payable to | NOT APPLICABLE |
| Mail tax return and check (if applicable) to | NOT APPLICABLE |
| Return must be mailed on or before | NOT APPLICABLE |
| Special Instructions | THIS RETURN HAS QUALIFIED FOR ELECTRONIC FILING. THE RETURN HAS BEEN TRANSMITTED ELECTRONICALLY TO THE IRS AND NO FURTHER ACTION IS REQUIRED. |
Form 8453-EO
Exempt Organization Declaration and Signature for Electronic Filing

Department of the Treasury Internal Revenue Service

Name of exempt organization NATIONAL ASSOCIATION OF WOMEN JUDGES
Employer identification number 52-1185005

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the type of return being filed with Form 8453-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a below and the amount on that line of the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). If you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

1a Form 990 check here □ b Total revenue, if any (Form 990, Part VIII, column (A), line 12) ................. 1b 818,744.
2a Form 990-EZ check here □ b Total revenue, if any (Form 990-EZ, line 9) ........................................... 2b
3a Form 1120-POL check here □ b Total tax (Form 1120-POL, line 22) .................................................. 3b
4a Form 990-PF check here □ b Tax based on investment income (Form 990-PF, Part VI, line 5) ............. 4b
5a Form 8868 check here □ b Balance due (Form 8868, line 3c) ................................................................. 5b

Part II Declaration of Officer

6 X I authorize the U.S. Treasury and its designated Financial Agent to initiate an Automated Clearing House (ACH) electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization’s federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment.

If a copy of this return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I certify that I executed the electronic disclosure consent contained within this return allowing disclosure by the IRS of this Form 990/990-EZ/990-PF (as specifically identified in Part I above) to the selected state agency(ies).

Under penalties of perjury, I declare that I am an officer of the above named organization and that I have examined a copy of the organization’s 2018 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization’s electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization’s return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund.

Sign Here □ Signature of officer □ Date 11/12/2019 □ INTERIM EXECUTIVE DIRECT

Title

Part III Declaration of Electronic Return Originator (ERO) and Paid Preparer (see instructions)

I declare that I have reviewed the above organization’s return and that the entries on Form 8453-EO are complete and correct to the best of my knowledge. If I am only a collector, I am not responsible for reviewing the return and only declare that this form accurately reflects the data on the return. The organization officer will have signed this form before I submit the return. I will give the officer a copy of all forms and information to be filed with the IRS, and have followed all other requirements in Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-File Providers for Business Returns. If I am also the Paid Preparer, under penalties of perjury I declare that I have examined the above organization’s return and accompanying schedules and statements and, to the best of my knowledge and belief, they are true, correct, and complete. This Paid Preparer declaration is based on all information of which I have any knowledge.

ERO’s SSN or PTIN EIN 47-0900880 Phone no. 202-331-9880

Under penalties of perjury, I declare that I have examined the above return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer is based on all information of which the preparer has any knowledge.

Paid Preparer Use Only

Print/Type preparer’s name □ Preparer’s signature □ Date □ Check if self-employed □ PTIN □ Firm’s name □ Firm’s address □ Firm’s EIN □ Phone no.

8230611 11-12-18 LHA For Privacy Act and Paperwork Reduction Act Notice, see back of form.

12421108 712177 71194 2018.04030 NATIONAL ASSOCIATION OF WOM 71194__1
Form 990
Department of the Treasury
Internal Revenue Service

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

A For the 2018 calendar year, or tax year beginning and ending

B Check if applicable:
[ ] Address change
[ ] Name change
[ ] Initial return
[ ] Final return/terminated
[ ] Amended return
[ ] Application pending

C Name of organization
NATIONAL ASSOCIATION OF WOMEN JUDGES

D Employer identification number
52-1185005

E Telephone number
(202) 393-0222

F Name and address of principal officer
TAMILA E. IPEMA
SAME AS C ABOVE

G Gross receipts
944,875.

H(a) Is this a group return for subordinates? ☑ Yes ☐ No
H(b) Are all subordinates included? ☑ Yes ☐ No

If “No,” attach a list. (see instructions)

I Tax-exempt status: ☑ 501(c)(3) ☐ 501(c)(4) ☐ 501(c)(5) ☐ 501(c)(6) ☐ 4947(a)(1) ☐ 527

J Website: ☑ www.nawj.org

K Form of organization: ☑ Corporation ☐ Trust ☐ Association ☐ Other

L Year of formation: 1995 M State of legal domicile: DC

Part I Summary

1 Briefly describe the organization’s mission or most significant activities: TO PROMOTE THE JUDICIAL ROLE OF PROTECTING THE RIGHTS OF INDIVIDUALS UNDER THE RULE OF LAW THROUGH...

Activities & Governance

8 Contributions and grants (Part VIII, line 1h)

9 Program service revenue (Part VIII, line 2g)

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)

12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)

13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)

14 Benefits paid to or for members (Part IX, column (A), line 4)

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)

16a Professional fundraising fees (Part IX, column (A), line 11e)

b Total fundraising expenses (Part IX, column (D), line 25)

17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)

18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)

19 Revenue less expenses. Subtract line 18 from line 12

Prior Year
232,333.
589,486.
56,385.
467.
878,671.
0.
0.
239,932.
0.
730,494.
970,426.
-91,755.

Current Year
281,500.
490,039.
44,019.
3,186.
818,744.
1,184.
0.
187,060.
0.
793,898.
982,142.
-163,398.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Laurie Denham, Interim Executive Director

Print/Type preparer’s name
ETHAN GEWOLB, CPA

Preparer’s signature
11/14/19

PTIN
00762403

Paid

Print/Type preparer’s name
CALIBRE CPA GROUP PLLC

Preparer’s address
7501 Wisconsin Avenue, Suite 1200 West
Bethesda, MD 20814

Use Only

Phone no. 202-331-9880

For Paperwork Reduction Act Notice, see the separate instructions.

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form 990 (2018)