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Short Form

OMB No 1545-1150

Form 990-EZ

Return of Organization Exempt From Income Tax

2015

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Open to Public Inspection

Department of the Treasury Internal Revenue Service

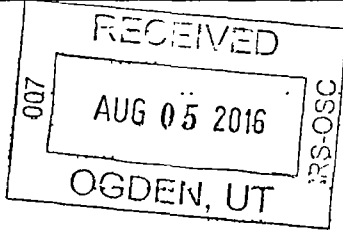
Do not enter social security numbers on this form as it may be made public.

Information about Form 990-EZ and its instructions is at www.irs.gov/form990

Form header section A-L including organization name (Pollock Conservation Cooperative), address (4039 21st Ave West RM/STE 400, Seattle WA 98199), and identification numbers.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)

Main table with 21 rows for Revenue, Expenses, and Net Assets. Revenue total is 0, Total expenses are 63,671, and Net assets at end of year are 13,322.



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For Paperwork Reduction Act Notice, see the separate instructions.

Form 990-EZ (2015)

Part II Balance Sheets (see the instructions for Part II)

Check if the organization used Schedule O to respond to any question in this Part II

	(A) Beginning of year		(B) End of year
22 Cash, savings, and investments	27,412	22	10,167
23 Land and buildings	0	23	
24 Other assets (describe in Schedule O)	56,081	24	27,030
25 Total assets	83,493	25	37,197
26 Total liabilities (describe in Schedule O)	6,500	26	23,875
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	76,993	27	13,322

Part III Statement of Program Service Accomplishments (see the instructions for Part III)

Check if the organization used Schedule O to respond to any question in this Part III

What is the organization's primary exempt purpose?

Improve resource utilization

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

Expenses
(Required for section 501(c)(3) and 501(c)(4) organizations, optional for others)

28 See Schedule O

(Grants \$) If this amount includes foreign grants, check here 28a **60,709**

29

(Grants \$) If this amount includes foreign grants, check here 29a

30

(Grants \$) If this amount includes foreign grants, check here 30a

31 Other program services (describe in Schedule O)

(Grants \$) If this amount includes foreign grants, check here 31a

32 Total program service expenses (add lines 28a through 31a)

32 60,709

Part IV List of Officers, Directors, Trustees, and Key Employees (list each one even if not compensated—see the instructions for Part IV)

Check if the organization used Schedule O to respond to any question in this Part IV

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
Doug Christensen President	2.00	0	0	0
Jan Jacobs Vice President	1.00	0	0	0
Craig Cross Secr/Treas	1.00	0	0	0
Stephanie Madsen Executive Director	1.00	0	0	0
Mike Hyde Board member	0.50	0	0	0
Jim Johnson Board member	0.50	0	0	0
Chris Swasand Board member	0.50	0	0	0
Dave Benson Board Member	0.50	0	0	0
Wally Pareyra Board member	0.50	0	0	0
Inge Andreassen Board member	0.50	0	0	0
John Bundy Board member	0.50	0	0	0
Larry Cotter Board member	0.50	0	0	0

Part II Balance Sheets (see the instructions for Part II)

Check if the organization used Schedule O to respond to any question in this Part II

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	0	22
23 Land and buildings	0	23
24 Other assets (describe in Schedule O)	0	24
25 Total assets	0	25 0
26 Total liabilities (describe in Schedule O)	0	26 0
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	0	27 0

Part III Statement of Program Service Accomplishments (see the instructions for Part III)

Check if the organization used Schedule O to respond to any question in this Part III

What is the organization's primary exempt purpose?

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title

Expenses
(Required for section 501(c)(3) and 501(c)(4) organizations; optional for others)

28	(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	28a
29	(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	29a
30	(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	30a
31 Other program services (describe in Schedule O)	(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	31a
32 Total program service expenses (add lines 28a through 31a)		32

Part IV List of Officers, Directors, Trustees, and Key Employees (list each one even if not compensated— see the instructions for Part IV)

Check if the organization used Schedule O to respond to any question in this Part IV

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
Joe Bundrant Board member	0.50	0	0	0
Joe Plesha Board member	0.50	0	0	0
Morgan Crow Board member	0.50	0	0	0
Donna Parker Board member	0.50	0	0	0
Mike Coleman Board member	0.50	0	0	0
Henry Mitchell Board member	0.50	0	0	0
Mike Breivik Board member	0.50	0	0	0
Karl Bratvold Board member	0.50	0	0	0
Mike Luchino Board member	0.50	0	0	0

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V

33 Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O
34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)
35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?
35b If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O
35c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N
37a Enter amount of political expenditures, direct or indirect, as described in the instructions
37b Did the organization file Form 1120-POL for this year?
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?
38b If "Yes," complete Schedule L, Part II and enter the total amount involved
39 Section 501(c)(7) organizations. Enter.
39a Initiation fees and capital contributions included on line 9
39b Gross receipts, included on line 9, for public use of club facilities
40a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911, section 4912, section 4955
40b Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I
40c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958
40d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization
40e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T
41 List the states with which a copy of this return is filed
42a The organization's books are in care of
42b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?
42c At any time during the calendar year, did the organization maintain an office outside the U S?
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year
44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ
44b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ
44c Did the organization receive any payments for indoor tanning services during the year?
44d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O
45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?
45b 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," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)

	Yes	No
46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		X

Part VI Section 501(c)(3) organizations only

All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI

	Yes	No
47 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		
48 Is the organization a school as described in section 170(b)(1)(A)(i)? If "Yes," complete Schedule E		
49a Did the organization make any transfers to an exempt non-charitable related organization?		
b If "Yes," was the related organization a section 527 organization?		
49b		

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None"

(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation

f Total number of other employees paid over \$100,000

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None"

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation

d Total number of other independent contractors each receiving over \$100,000

52 Did the organization complete Schedule A? Note: All section 501(c)(3) organizations must attach a completed Schedule A

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.

Sign Here: *Jan Jacobs* Signature of officer, 8/1/16 Date, Vice President Title

Paid Preparer Use Only: FARRELL BORN Print/Type preparer's name, Farrell Born Preparer's signature, 07/11/16 Date, Check self-employed, PTIN 911679367, Firm's name: Farrell A. Born, CPA, Firm's address: 323 NW 201ST PLACE SEATTLE, WA 98177-2015, Firm's EIN: 911679367, Phone no: 206-774-7918

May the IRS discuss this return with the preparer shown above? See instructions

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

2015

Department of the Treasury
Internal Revenue Service

◆ Attach to Form 990 or 990-EZ.

Open to Public Inspection

◆ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization

Employer identification number

Pollock Conservation Cooperative

91-1948984

Form 990-EZ, Part I, Line 16 - Other Expenses

Description	Amount
Expenses	
Office expenses	\$ 62
Skippers meeting	\$ 5,170
Safety awards	\$ 6,000
Taxes & licenses	\$ 60
Depreciation exp	\$ 1,705
Research	\$ 47,774
Total	\$ 60,771

Form 990-EZ, Part II, Line 24 - Other Assets

Description	Beg. of Year	End of Year
Pledges Receivable	\$ 55,081	\$ 0
Prepaid Expenses and Deferred Charges	\$ 1,000	\$ 1,000
Research cameras	\$ 0	\$ 27,735
Less Accumulated Depreciation	\$ 0	\$ 1,705
Total	\$ 56,081	\$ 27,030

Form 990-EZ, Part II, Line 26 - Other Liabilities

Description	Beg. of Year	End of Year
Accounts Payable and Accrued Expenses	\$ 6,500	\$ 23,875

Form 990-EZ, Part III, Line 28 - First Accomplishment

The organization received approval from the Dept of

Name of the organization

Employer identification number

Pollock Conservation Cooperative

91-1948984

Justice to allow individual allocation of a set quota of Pollock set by the US government, which reduces resource waste. Related research is conducted or funded.

Form 990-EZ, Part III, Line 31 - All Other Accomplishment

The organization received approval from the Dept of Justice to allow individual allocation of a set quota of Pollock set by the US government, which reduces resource waste. Related research is conducted or funded.