SEC Form 4	
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

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Section obligat	this box if no lo n 16. Form 4 or tions may conti ction 1(b).		NT OF CHANGES IN BENEFICIAL OWNERSHIP										OMB Number: 323 Estimated average burden hours per response:					
mourae	2(5).			1 10		ction 30(h) of the						•					I	
1. Name and Address of Reporting Person [*] GPI Capital Gemini HoldCo LP					2. Issuer Name and Ticker or Trading Symbol <u>Couchbase, Inc.</u> [BASE]								ck all applicat Director	ng Person(s) to Issuer X 10% Owr		ner		
(Last) (First) (Middle) 1345 AVENUE OF THE AMERICAS FLOOR 32, SUITE C					3. Date of Earliest Transaction (Month/Day/Year) 07/26/2021								 Officer (give title Other (specify below) 				еспу	
					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable					
(Street) NEW Y	(Street) NEW YORK NY 10105											1 1	Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(5	State)	(Zip)															
		٦	able I - No	n-Deriv	ative S	ecurities Ac	quired,	Dis	posed o	of, or	Bene	ficially	Owned					
1. Title of Security (Instr. 3) 2. Trans Date (Month/				action Day/Year) 2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4				and 5) Securities Beneficially Owned Follo		6. Ownersl Form: Dire (D) or Indir (I) (Instr. 4)	ct In ect B O	7. Nature of Indirect Beneficial Ownership		
						Code	v	Amount	nount (A) or (D)		Price	Reported Transactio (Instr. 3 an				(Instr. 4)		
Common Stock 07/26					6/2021		С		4,369,	543 A		(1)	4,369	,543	D ⁽²⁾			
						curities Acqu Ills, warrants							wned					
1. Title of Derivative Security (Instr. 3) 2. 3. Transaction Date 3A. Deemed Execution Date 0 0 5. 0 0 0 1 0 0 0 1 0 0 0 1 0 0 0 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0			Cod	5. Number of Derivative Securities Acquired (A) or Disposed 4 (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount Securities Underlyin Derivative Security (Instr. 3 and 4)		derlying curity	8. Price of 9. Numb Derivative derivativ Security (Instr. 5) Beneficia Owned Followin Reporter		ve Ownes For ally Dire g (I) (nership m: ect (D) ndirect nstr. 4)	11. Nature of Indirect Beneficial Ownershi (Instr. 4)		

Issue's board of directors and Messrs. Migon, William T. Royan and Khai Ha are Managing Partners and members of the Investment Committee of GPI Capital, LLC and may be deemed to have shared voting, investment and dispositive power with respect to the shares held by GPI. Messrs. Migon, Royan and Ha disclaim beneficial ownership of such shares except to the extent of their pecuniary interest therein. The address for GPI is 1345 Avenue of the Americas, 32nd Floor, New York, New York 10105.

Immediately prior to the completion of the Issuer's initial public offering, each share of Series G Preferred Stock is convertible into shares of the Issuer's Common Stock, par value \$0.00001 per share, on a 1.06673317089756-for-one basis and has no expiration date.
 GPI Capital LLC is the sole member of GPI GP Limited, which is the general partner of GPI GP LP, which is the general partner of GPI Capital Gemini HoldCo LP, or GPI. Aleksander J. Migon is a member of the

4.096.192

(A) (D)

Code V

С

Date

Exercisable

(1)

Expiration

(1)

Date

Title

Commo

Stock

Remarks:

Series G Preferred

Stock

(1)

Explanation of Responses:

GPI Capital Gemini HoldCo LP,

Amount or

Number of Shares

4,369,543

\$0.00

By: Mateo Goldman, as

Attorney in Fact

** Signature of Reporting Person Date

Transaction(s)

0

07/26/2021

D⁽²⁾

(Instr. 4)

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

* If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

07/26/2021

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.