OMB No 1545-0052

SCANNED DEC 1 6 2019 (

Form 990-PF

EXTENDED TO NOVEMBER 15. Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

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

Department of the Treasury Internal Revenue Service ► Go to www.irs.gov/Form990PF for instructions and the latest information. For calendar year 2018 or tax year beginning . and ending A Employer identification number Name of foundation THE COUCH FAMILY FOUNDATION C/O MOTT PHILANTHROPIC 10-0000573 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 1560 603-643-3441 800 BOYLSTON STREET City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here BOSTON, MA 02199 Initial return of a former public charity G Check all that apply: Initial return D 1. Foreign organizations, check here Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation X Address change Name change X Section 501(c)(3) exempt private foundation H Check type of organization; E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year J Accounting method. If the foundation is in a 60-month termination Other (specify) under section 507(b)(1)(B), check here (from Part II, col. (c), line 16) 58,716,488. (Part I, column (d) must be on cash basis.) Part | Analysis of Revenue and Expenses (c) Adjusted net (d) Disbursements for charitable purposes (cash basis only) (b) Net investment (a) Revenue and (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) expenses per books income income 6,275,544 N/A Contributions, gifts, grants, etc., received Check If the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 3 778,268. STATEMENT 778,268. 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) STATEMENT 3,135,321 62 Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all 19,660,784. 8,729,125 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances -0.40b Less Cost of goods sold c Gross profit or (loss) 9,042. 9,042 STATEMENT 11 Other income 9,516,435 10,198,175. Total. Add lines 1 through 11 30,000. 13 Compensation of officers, directors, trustees, etc О. 14 Other employee salaries and wages 9 MUA 15 Pension plans, employee benefits 16a Legal fees STMT 4 6,950 Ō **b** Accounting fees 0. STMT 5 459,576. 459,576 c Other professional fees 44 0. 44. 17 Interest 49,764 46,166 3,598. STMT 6 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 200,355. STMT 7 220,952 23 Other expenses Ο. 24 Total operating and administrative 767,286 505,786 233,953. expenses. Add lines 13 through 23 2,055,270. 2,055,270. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements 2,289,223. 2,822,556 505,786 Add lines 24 and 25 27 Subtract line 26 from line 12: 7,375,619 & Excess of revenue over expenses and disbursements 9,010,649 b Net investment income (If negative, enter -0-) N/A C Adjusted net income (if negative, enter -0-)

823501 12-11-18 LHA For Paperwork Reduction Act Notice, see instructions.

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C/O MOTT PHILANTHROPIC

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Part II Balance Sheets Attached schedules and amounts in the description column should be for end of year amounts only		Balance Sheets Attached schedules and amounts in the description	Beginning of year	End o	of year
_	arı	column should be for end-of year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	, 1	Cash - non-interest-bearing	334,933.	918,996.	918,996.
	2	Savings and temporary cash investments		· .	
	3	Accounts receivable -			i
		Less; allowance for doubtful accounts			
	4	Pledges receivable		- 11	
		Less: allowance for doubtful accounts			
	_	Grants receivable			*
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less, allowance for doubtful accounts			
ets		Inventories for sale or use			
Assets		Prepaid expenses and deferred charges			
	ľ	Investments - U.S. and state government obligations Investments - corporate stock STMT 9	31,691,037.	37,392,590.	49,399,692.
			6,845,675.	7,871,390.	
			0,043,073.	7,071,330.	0,391,000.
	' '	Investments land, buildings, and equipment basis	·····		
	۱,	Less accumulated depreciation			
		Investments - mortgage loans Investments - other	1,923,361.	0.	0.
	13 14	Land, buildings, and equipment, basis	1,523,301.	<u> </u>	, , , ,
	14				
	15	Less accumulated depreciation Other assets (describe >)			
		Total assets (to be completed by all filers - see the			
	10	instructions. Also, see page 1, item I)	40,795,006.	46,182,976.	58,716,488.
_	17	Accounts payable and accrued expenses	10,,00,000	7,618.	1
	18	Grants payable		• • • •	
တ္	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
api	21	Mortgages and other notes payable			
ا تـ	22	Other liabilities (describe)			
	23	Total liabilities (add lines 17 through 22)	0.	7,618.	
		Foundations that follow SFAS 117, check here			
,		and complete lines 24 through 26, and lines 30 and 31.			
ances	24	Unrestricted			
= 1		Temporarily restricted			
ğ	26	Permanently restricted			
Š		Foundations that do not follow SFAS 117, check here			
Net Assets or Fund Ba		and complete lines 27 through 31.	_	^	
ž	27	Capital stock, trust principal, or current funds	0.	0.)
SS	28	Paid-in or capital surplus, or land, bldg., and equipment fund		46,175,358.	
≨	29	Retained earnings, accumulated income, endowment, or other funds	40,795,006.	46,175,358.	<u> </u>
ž	30	Total net assets or fund balances	40,793,006.	40,175,330.	
	04	Total linkilities and not access Hund halaness	40,795,006.	46,182,976.	
	31	Total liabilities and net assets/fund balances	•	40,102,570.	
Pi	art	Analysis of Changes in Net Assets or Fund Ba	alances		
1	[otal	net assets or fund balances at beginning of year - Part II, column (a), line 3	30	····	<u> </u>
		t agree with end-of-year figure reported on prior year's return)		1	40,795,006.
		amount from Part I, line 27a	2	7,375,619.	
		increases not included in line 2 (itemize)		3	0.
		ines 1, 2, and 3		4	48,170,625.
		ases not included in line 2 (itemize)	SEE STA	ATEMENT 8 5	1,995,267.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, co		6	46,175,358.
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THE COUCH FAMILY FOUNDATION

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2-story brick war	he kind(s) of property	v sold (for example, real esta stock, 200 shs. MLC Co.)		(b) How P - Pu D - Do	acquired rchase nation		acquired lay, yr.)	(d) Date sold (mo., day, yr.)
1a	CM3 MENTERS							
b SEE ATTACHED	STATEMENT	·S						/
<u>C</u>				-				
<u>d</u> e						· · · · · · · · · · · · · · · · · · ·		
(e) Gross sales price	(f) Depreciation (or allowab	1 1	st or other basis expense of sale				aın or (loss) s (f) mınus (
a b								
C								
d 19,660,784.		1	0,931,65	9.				8,729,125
Complete only for assets showing	gain in column (h) a				(I) Gains (C	ol. (h) gain	minus
(i) FMV as of 12/31/69	(j) Adjusted I as of 12/31	oasis (k) Ex	col. (j), if any		co		not less than (from col. (
a								
C C								
d								0 720 125
е	C 16 o	iona alca anter la Part I. lina	7	- -	T			8,729,125
2 Capital gain net income or (net cap	oital loss) { if (ain, also enter in Part I, line loss), enter -0- in Part I, line	7) 2				8,729,125
Net short-term capital gain or (loss If gain, also enter in Part I, line 8, c		ns 1222(5) and (6):		}			NT / 7	
If (loss), enter -0- in Part I, line 8 Part V Qualification Ur	ador Continu A	940(e) for Reduced	Tay on Not	Jpyost	mont In		N/A	· · · · · · · · · · · · · · · · · · ·
Vas the foundation liable for the secti "Yes," the foundation doesn't qualify	under section 4940(e). Do not complete this par	t					Yes X No
Enter the appropriate amount in ea	ach column for each y		Tore making any en			1		761
Base period years Calendar year (or tax year beginnin	g in) Adjusted	(b) qualifying distributions	Net value of nor				Distrib (col. (b) div	(d) ution ratio ided by col. (c))
2017		3,108,235.			37,974			.05586
2016		1,877,472.	'	4/,4	80,299 43,541	· · ·		.03954
2015		1,056,813.			51,256			.01647
2014 2013		248,870.		9,7	99,330) 	•	.02539
? Total of line 1, column (d)	•				-	2		.16138
Average distribution ratio for the 5			0, or by the numbe	r of years				_
the foundation has been in existent	ce if less than 5 years					3		.03227
Enter the net value of noncharitable	e-use assets for 2018	from Part X, line 5				4	5	9,370,205
Multiply line 4 by line 3						5		1,916,292
Enter 1% of net investment income	e (1% of Part I, line 2	7b)				6	-	90,106
		•						
Add lines 5 and 6		•				7		2,006,398
Add lines 5 and 6 Enter qualifying distributions from	Part XII, line 4	,				8		2,006,398 2,289,223
	•		plete that part using	j a 1% tax	crate.			··-

C/O MOTT PHILANTHROPIC Part IV Capital Gains and Losses for Tax on Investment Income (b) How acquired P - Purchase (a) List and describe the kind(s) of property sold, e.g., real estate, (c) Date acquired (d) Date sold (mo., day, yr.) (mo., day, yr.) 2-story brick warehouse; or common stock, 200 shs. MLC Co. D - Donation STRATEGIES, LLCREMS GROUP SERIES P 1a BBH WEALTH LLC REMS GROUP SERIES P WEALTH STRATEGIES b BBH c BBH WEALTH PARTNERS SE P STRATEGIES LLC ALTAROCK SE P LLC ALTAROCK PARTNERS d BBH WEALTH STRATEGIES, **EMERGING** MA P e BBH WEALTH STRATEGIES, LLC BURGUNDY BURGUNDY EMERGING P F BBH WEALTH STRATEGIES LLC g BBH WEALTH STRATEGIES, LLC P BURGUNDY EMERGING MA SELECT EQUITY SERIES WEALTH STRATEGIES, LLC h BBH SELECT EOUITY P BBH WEALTH STRATEGIES, LLC SERIES р 1818 PARTNERS, LP \overline{P} 1818 PARTNERS P | BROWN BROTHERS 0719 P m BROWN BROTHERS 0719 n BBH WEALTH STRATEGIES, LLC - GQG PARTNERS EMERGIN P BBH WEALTH STRATEGIES, o DISPOSITION OF LLC REMS Þ (h) Gain or (loss) (f) Depreciation allowed (g) Cost or other basis (e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g) -40,345-40,345. -44,723. -44,723. b -19,224. -19,224C 107,867. 107,867. d 2,413. 2,413. е 47,832. 47,832 161,329 161,329. g -41,272 -41,272. h 732,875. 732,875 9,900. 9,900. 258,289. <u>258,289.</u> 2,305,590 2,441,550 -135,960. 14,198,039 6,567,538. 7,630,501. m -378. -378. n 1,917,224. -5,347. 1,922,571 0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), (j) Adjusted basis (k) Excess of col. (i) (i) F.M.V. as of 12/31/69 but not less than "-0-") as of 12/31/69 over col. (j), if any -40,345. а -44,723. b -19,224. C 107,867. d 2,413. 47,832. 161,329. -41,272.h 732,875. 9,900. 258,289. -135,960. 7,630,501. m -378. Π -5,347.0 { If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 } Capital gain net income or (net capital loss) 2

823591 04-01-18

If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8

Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):

(a) List and 2-story br	describe the kind(s) of property so ick warehouse; or common stock,	old, e.g., real estate, 200 shs. MLC Co.		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date solo (mo., day, yr.
a CAPITAL GAINS	DIVIDENDS					
b						
C						
d						· = ·
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f		······································	-	 	ļ	
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·)	···					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) (e) p) Gain or (loss) lus (f) minus (g)	
65,368.	······································	<u> </u>				65,368
			_			.,.,
			1			
						•
		10/04/00				
(i) F.M.V. as of 12/31/69	g gain in column (h) and owned by (j) Adjusted basis	(k) Excess of col. (i)	\dashv	Gains (excess o	ses (from col. (h)) of col. (h) gain over ot less than "-0-")	col. (k),
(1)1	as of 12/31/69	over col. (j), if any				
			4			65,368
		ļ				
		 				
	······································		+-			
	. <u>-</u> <u>-</u>		+			
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		······································				
Capital gain net income or (net cap		r in Part I, line 7 0-" in Part I, line 7	2		8,	729,125
Net short-term capital gain or (loss if gain, also enter in Part I, line 8, of (loss) enter "-0-" in Part I, line 8	column (c).	nd (6):			N/A	

THE COUCH FAMILY FOUNDATION C/O MOTT PHILANTHROPIC Form 990-PF (2018)

1	Λ	_	Λ	Λ	Λ	Λ	F	7	•

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a Exempt operating foundations described in section 4940(d)(2), check here	and enter "N/A" on line 1.			
Date of ruling or determination letter: (attach copy of letter i	if necessary-see instructions)			106.
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here	e ▶ [X] and enter 1%	1	90,	106.
of Part I, line 27b	40/ -4 Dark Line 10 -col /h)	1 1		
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, ent		- <u>-</u>		0.
Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations on	ny, others, enter -0-)	3	9.0	106.
 Add lines 1 and 2 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations or 	nly: others, enter -0-)	4		0.
		5	90.	106.
Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- Credits/Payments:		 		
a 2018 estimated tax payments and 2017 overpayment credited to 2018	6a 147,554	. -		
b Exempt foreign organizations - tax withheld at source		元		
c Tax paid with application for extension of time to file (Form 8868)	6c (元		
d Backup withholding erroneously withheld	6d (<u> </u>		
Total credits and payments. Add lines 6a through 6d		7	147,	554.
Enter any penalty for underpayment of estimated tax. Check here 🗶 if Form 2220 is	s attached	8		0.
Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	•	9		
Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpa		▶ 10	57,	448.
Enter the amount of line 10 to be: Credited to 2019 estimated tax	57,448. Refunded	<u> 11 </u>		0.
art VII-A Statements Regarding Activities				
a During the tax year, did the foundation attempt to influence any national, state, or local	legislation or did it participate or interve	ine in		s No
any political campaign?			1a	X
b Did it spend more than \$100 during the year (either directly or indirectly) for political production by the product of the political product of the prod		efinition	16	X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and cop	oles of any materials published or			٠ ، ا
distributed by the foundation in connection with the activities.				- - x
c Did the foundation file Form 1120-POL for this year?			1c	 ^
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed durin		1		
(1) On the foundation > \$ 0. (2) On foundation mana		<u>) .</u>		i
e Enter the reimbursement (if any) paid by the foundation during the year for political exp managers. ► \$ 0 •	penditure tax imposed on foundation			İ
	the IDS2		2	- -x -
Has the foundation engaged in any activities that have not previously been reported to	tile inor		1-	
If "Yes," attach a detailed description of the activities. Has the foundation made any changes, not previously reported to the IRS, in its govern	ning instrument, articles of incorporation	1. Or		٠,
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		,, 01	3	$-\frac{x}{x}$
a Did the foundation have unrelated business gross income of \$1,000 or more during the			4a	X
b If "Yes," has it filed a tax return on Form 990-T for this year?	o your	N/A	4b	
Was there a liquidation, termination, dissolution, or substantial contraction during the	vear?	,	5	X
If "Yes," attach the statement required by General Instruction T	, 02.			
Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfi	ied either:			
By language in the governing instrument, or				1
By state legislation that effectively amends the governing instrument so that no mand	datory directions that conflict with the s	ate law		ļ
remain in the governing instrument?	•		6 X	
Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," of	complete Part II, col. (c), and Part XV		7 X	
, , , , , , , , , , , , , , , , , , ,				
${f a}$ Enter the states to which the foundation reports or with which it is registered. See instr ${f NH}$	uctions. ►		.	
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to t	the Attorney General (or designate)			
of each state as required by General Instruction G? If "No," attach explanation			8b	X
	of section 4942(1)(3) or 4942(1)(5) for a	alendar		
Is the foundation claiming status as a private operating foundation within the meaning	01 30000011 7372(])(0) 01 13 12(])(0) 101 0			
Is the foundation claiming status as a private operating foundation within the meaning year 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes,"			9	X

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Yes No Section 512(0)(13)? If Yes, "attach schedule. See instructions Section 512(0)(13)? If Yes, "attach schedule. See instructions See	Pa	art VII-A Statements Regarding Activities (continued)			
sections 12(2)(13)? If "Fest, * attach schedule. See instructions If Yes, * attach statement. See instructions or exceptions and fraing requirements for FinCEN Form 114, If "Yes," enter the name of the foreign country If Yes, * attach statements Regarding Activities for Which Form 4720 May Be Required If If Form 4720 If any Item is checked in the "Yes" column, unless an exception applies. If Yes, * In Yes,				Yes	No
sections 12(2)(13)? If "Fest, * attach schedule. See instructions If Yes, * attach statement. See instructions or exceptions and fraing requirements for FinCEN Form 114, If "Yes," enter the name of the foreign country If Yes, * attach statements Regarding Activities for Which Form 4720 May Be Required If If Form 4720 If any Item is checked in the "Yes" column, unless an exception applies. If Yes, * In Yes,	11.	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
12 Did the foundation make a distribution to a disordation or a disease fund over which the foundation or a disqualified person had advisory privileges? 13 Oil did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ➤ N/A 13 N The blooks are in care of ▶ ANDERSEN TAX, LLC Telephone no. ▶ (617) 292-8400 Located at ▶ 125 HIGH STREBET, 16TH FLOOR, BOSTON, MA Section 349(7)(1) monerangic haribide trusts fating Form 990-PF in Itsiu of Form 1041 -check there and enter the amount of 12-exempt interest received or accrued during the year At Aray inter diverge advanced year 2018, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign ecountry? See the instructions for exesphores and filting requirements for PmCEN Form 114, If Yes,* enter the name of the foreign country. ▶ Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 10 During the year, did the foundation (either directly) or indexcibly. (1) Engage in the said or exchange, or lessing of properly with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it ferm) a disqualified person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? (4) Pay compensation to, or pay or remburse the expenses of, a disqualified person? (5) Transfer any recome or assets to a disqualified person for make any of other available for the perfect or use of a disqualified person? (6) Agree to pay money or property to a government official? (Exception, Check: No (7) Transfer any recome or assets to a disqualified person for make any or other available or the perfect of use of a disqualified person? (8) Furnish goods, services, or facilities to (or accept them from) a disqualified person for make any recome or asse			11		x
If Yes, *atach statement. See instructions 12	12			T	_
Website address			12		x
Webste address ► N/A 14 The books are in care of ► ANDERSEN TAX, LLC 15 Section 4947(a)(1) nonexempt charable trusts filing Form 990-Prin lieu of Form 1041 - Check here and early the amount of tax-eventy interest servered or accrued during the year 15 Section 4947(a)(1) nonexempt charable trusts filing Form 990-Prin lieu of Form 1041 - Check here and early the amount of tax-eventy interest servered or accrued during the year 16 Al any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, sect the instructions for exceptions and filing requirements for FincEN Form 1141. If Yes, enter the name of the foregon country Part VII-B [Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 19 Part VII-B [Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 19 Dorrow money from, lend money to, or otherwise extend credit to (or accept in from) a dequalified person? 10 Dorrow money from, lend money to, or otherwise extend credit to (or accept in from) a dequalified person (or accept in from) as dequalified person? 10 Finansis quods, services, or facilities to (or accept in from) as dequalified person? 10 Finansis quods, services, or facilities to (or accept in from) as dequalified person? 11 Finansis quods, services, or facilities to (or accept in from) as dequalified person? 12 Finansis quods, services, or facilities to (or accept in from) as dequalified person? 13 Finansis quods, services, or facilities to (or accept in from) as dequalified person? 14 Pay companisation to, or pay or remburse the expenses of, a disqualified person? 15 Finansis quods, services, or facilities to (or accept the from) as dequalified person? 16 Agrice to pay money or property to a government official? (Exception, Check No.* 16 Agrice to pay money or property to a	12	·	-	X	+
14. The books are in cars of ▶ ANDERSEN TAX, LLC Located at ▶ 125 HIGH STREET. 16TH FLOOR, BOSTON, MA. 20110 15 Section 4947(a)(1) nonexempt charitable trusts filing form 990-PF in heu of Form 1041 - check here and where the amount of tax-ecompt interest received or accreed during the year. A kan by time during cleander, year 218, did the foundation have an interest in or a signature or other authorly over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If Yes,* enter the name of the foreign country. ▶ Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required Filis Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 10 During the year, did the foundation (either directly or indirectly); (1) Engage in the sade or exchange, or issaing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) as disqualified person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? (4) Pay compensation to, or pay or remburse the expenses of, a disqualified person? (5) Furnish goods, services, or facilities to (or accept them from) a disqualified person? (6) Agree to pay money or property to a government official? (Exception, Check 'No' of the foundation engage in a prior year in any within 90 days.) If any answer is 'Yes' to 14(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(6)-3 or in a current notice regarding disaster assistance? See instructions Organizations relying on a current otice regarding disaster assistance, check here Diff the foundation engage in a prior year in any of the acts described in 18, othe	10				
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(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if termination of government service, if terminating within 90 days.) b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions Organizations relying on a current notice regarding disaster assistance? See instructions N/A To Differ the first day of the tax year beginning in 2018? 2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)): A At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2018? If "Yes," list the years Islated in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.) A bif the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. A bif the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. A bif the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? A bif the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? A bif the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) th					
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Part VII-B Statements Regarding Activities for Which r	Offit 4720 Way Be F	required (contin	ueu)		
5a During the year, did the foundation pay or incur any amount to.				Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e))?	Y	es 🗶 No		
 (2) Influence the outcome of any specific public election (see section 4955); o 	r to carry on, directly or indire	ectly,			
any voter registration drive?			es X No]
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Y₁	es 🛣 No		. }
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section				
4945(d)(4)(A)? See instructions		Y	es X No	, ,	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f	or		,	}
the prevention of cruelty to children or animals?		Y(es 🗶 No]
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	er the exceptions described i	n Regulations	ļ .		لـــا
section 53.4945 or in a current notice regarding disaster assistance? See instru	ictions		N/A	5b	
Organizations relying on a current notice regarding disaster assistance, check t	ere		▶□ [.		1
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr	om the tax because it mainta	ined			
expenditure responsibility for the grant?		[/A 🔲 Ye	es 🔲 No 📗	'	'
If "Yes," attach the statement required by Regulations section 53.4945-5(d).				71	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				
a personal benefit contract?		Ye	es 🗶 No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		-	6b	X
If "Yes" to 6b. file Form 8870				_	
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Ye	es 🗶 No		
b If "Yes." did the foundation receive any proceeds or have any net income attribu			N/A	7b	
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$		r	·		
excess parachute payment(s) during the year?	1,000,000 / 0	Y6	es X No		
Part VIII Information About Officers, Directors, Trusto	es. Foundation Ma				
Paid Employees, and Contractors	,	JJ	•		
1 List all officers, directors, trustees, and foundation managers and t	neir compensation.				
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Exp account,	ense
(a) Name and address	nours per week devoted to position	(If not paid, enter -0-)	and deterred compensation	account,	nces
RICHARD W. COUCH	TRUSTEE		Compensaci		
23 BERRILL FARMS LANE					
HANOVER, NH 03755	1.00	0.	0.		0.
	TRUSTEE		-		
23 BERRILL FARMS LANE					
HANOVER, NH 03755	1.00	0.	0.		0.
	MANAGER		-		
2716 HARRIS BLVD		ľ			
AUSTIN, TX 78703	15.00	30,000.	0.		0.
AUSTIN, IX 70703	13.00	30,000.			
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none.	enter "NONE."			
	(b) Title, and average		(d) Contributions to employee benefit plans and deferred	(e) Exp	ense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred	ačcount, allowar	other
NONE	devoted to position	l	compensation		
NONE					
					
				L	
Total number of other employees paid over \$50,000				000 DE	0
	•		Form	990-PF ((2018)

THE COUCH FAMILY FOUNDATION

Form 990-PF (2018)	0/0	мотт	PHILANTHROPIC
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Part VIII. Information About Officers, Directors, Trustees, Four Paid Employees, and Contractors (continued)	ndation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, e	enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		> (
List the foundation's four largest direct charitable activities during the tax year. Include relevant s number of organizations and other beneficiaries served, conferences convened, research papers	produced, etc.	Expenses
1N/A		
		···
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year	r on lines 1 and 2.	Amount
1 N/A		
2		
All other program-related investments. See instructions.	,	
3		
Total. Add lines 1 through 3	▶	0.

THE COUCH FAMILY FOUNDATION

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F	Art X Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations	, see instructions)
1	-Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	<u>58,965,749</u> .
t	Average of monthly cash balances	1b	1,308,571.
ε	Fair market value of all other assets	1c	
(Total (add lines 1a, b, and c)	1d	60,274,320.
•	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	60,274,320.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	904,115.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	59,370,205.
6	Minimum investment return. Enter 5% of line 5	6	2,968,510.
F	Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations, check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6		2,968,510.
2 a	[] 00 100		
b	Income tax for 2018. (This does not include the tax from Part VI.)	1	
C	Add lines 2a and 2b	2c	90,106.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	2,878,404.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	2,878,404.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	2,878,404.
[P]	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	· · · · ·	
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	2,289,223.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:	\vdash	
_	Suitability test (prior IRS approval required)	3a	
ь		3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	2,289,223.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	 	_,
-	income. Enter 1% of Part I, line 27b	5	90,106.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	2,199,117.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation (4940(e) reduction of tax in those years.	qualifies fo	

Form **990-PF** (2018)

THE COUCH FAMILY FOUNDATION C/O MOTT PHILANTHROPIC

Part XIII Undistributed Income (see instructions)

•	(a)	(b)	(c)	(d)
	Corpus	Years prior to 2017	2017	2018
1 Distributable amount for 2018 from Part XI.	·	· · · · · · · · · · · · · · · · · · ·		
line 7				2,878,404.
2 Undistributed income, if any, as of the end of 2018				
a Enter amount for 2017 only			1,596,650.	,
b Total for prior years:				
, ,		0.		
3 Excess distributions carryover, if any, to 2018:				
a From 2013		•	-	
b From 2014				
c From 2015	1			
d From 2016				
ę From <u>2</u> 017			red or r	(-1
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2018 from				
Part XII, line 4: ►\$ 2,289,223.				
a Applied to 2017, but not more than line 2a			1,596,650.	
b Applied to undistributed income of prior		•		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				•
(Election required - see instructions)	0.			•
d Applied to 2018 distributable amount				692,573.
e Remaining amount distributed out of corpus	0.			<u></u>
5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			·
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		i
c Enter the amount of prior years'				
undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2017. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2018. Subtract	,			
lines 4d and 5 from line 1. This amount must				
be distributed in 2019				2,185,831.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2013				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2019.	_	•		
Subtract lines 7 and 8 from line 6a	0.			·············!
0 Analysis of line 9.				
a Excess from 2014				
b Excess from 2015				
c Excess from 2016 d Excess from 2017		•	• • •	
			, ,	
e Excess from 2018	<u> </u>			

823581 12-11-18

Form **990-PF** (2018)

THE COUCH FAMILY FOUNDATION

Form 990-PF (2018) C/O MOT	T PHILANTHR	OPIC		10-00	00573 Page 10
Part XIV Private Operating Fo			II-A, question 9)	N/A	
1 a If the foundation has received a ruling or					
* foundation, and the ruling is effective for			▶		
b Check box to indicate whether the found			I in section	4942(j)(3) or 49	42(_J)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2018	(b) 2017	(c) 2016	(d) 2015	(e) Total
investment return from Part X for	-				
each year listed					1
b 85% of line 2a					
c Qualifying distributions from Part XII,				1	
line 4 for each year listed					i
d Amounts included in line 2c not		-			
used directly for active conduct of					i
exempt activities				1	i
e Qualifying distributions made directly			1		
for active conduct of exempt activities.					ı
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the			 		
alternative test relied upon:					
a "Assets" alternative test - enter. (1) Value of all assets					
` '			+		
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter			 		
2/3 of minimum investment return					
shown in Part X, line 6 for each year				Ì	
listed	<i></i>				
c "Support" alternative test - enter:					
(1) Total support other than gross investment income (interest;					
dividends, rents, payments on					
securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt					
organizațions as provided in					
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization			 		
Pårt XV Supplementary Infor	mation (Comple	to this part only	if the foundation	n had \$5 000 or me	ro in accote
Part XV Supplementary Information at any time during the			ir the foundation	n nau \$5,000 or me	ne in assets
<u></u>		uctions.j			
1 Information Regarding Foundation	-	h 00/ - f th - t - t - l		. fadat.aa bafaya tha alaa	a of any toy
a List any managers of the foundation who year (but only if they have contributed me			itributions received by the	e foundation before the clos	e or any tax
	510 than \$6,000). (000 of	, out ou (o) (c) .)			
SEE STATEMENT 12	400/		/		
b List any managers of the foundation who other entity) of which the foundation has			(or an equally large port	ion of the ownership of a pa	rulership or
NONE	a none at granter mission	-			
 	on Crant Cift Laan	Cabalarahin ata D			
2 Information Regarding Contribution Check here ► 🛣 if the foundation or				not accept upsolicited requi	sete for funde. If
the foundation makes gifts, grants, etc., t					;5t5 tot tuttus. II
a The name, address, and telephone numb	er or email address of th	e berzon io mnom abbi	ications snould be addres	oocu.	
h The form in which applications should be	euhmitted and informat	ion and materials they	thould include:		
b The form in which applications should be	SUDMINICU AND BINDIMAL	ion and materials tiley s	modiu modut,		
c Any submission deadlines:					
e miy addinisaldii deddiilles.					
d Any restrictions or limitations on awards,	Such as by deographica	areas, charitable fields	kinds of institutions or	other factors:	
a . my reconstruction of infinations on availus,	as of goograpinoa	,	, or momonomy of		

Form 990-PF (2018)

C/O MOTT PHILANTHROPIC

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3 , Grants and Contributions Paid During th		Payment		
• Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
		DUDI TO	GENERAL SUPPORT	
ALBERT SCHWEITZER FELLOWSHIP 330 BROOKLINE AVE		PUBLIC	GENERAL SUPPORT	
BOSTON, MA 02215				10,000
ALOHA FOUNDATION, INC - HULBERT		PUBLIC	GENERAL SUPPORT	
OUTDOOR CENTER/ INSPIRINGKIDS				
2968 LAKE MOREY RD				b.
FAIRLEE, VT 05045				5,000
AMERICAN PRECISION MUSEUM		PUBLIC	GENERAL SUPPORT	
196 MAIN ST, PO BOX 679				
WINDSOR, VT 05089		<u> </u>		10,000
AVA GALLERY AND ART CENTER		PUBLIC	GENERAL SUPPORT	
11 BANK STREET				10,000
LEBANON, NH 03766				10,000
AVA GALLERY AND ART CENTER		PUBLIC	GENERAL SUPPORT	
11 BANK STREET				
LEBANON, NH 03766				5,000
total SEE C b Approved for future payment	CONTINUATION SHEE	ET(S)	▶ 3a	2,055,270
• Approved for father payment				
NONE				
NONE				
				· · · · · · · · · · · · · · · · · · ·
•				
Total			▶ 3b	0

Form **990-PF** (2018)

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Ye		·		
, Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
BEST BUDDIES NEW HAMPSHIRE		PUBLIC	GENERAL SUPPORT	
64 N MAIN ST #5				5,000.
CONCORD, NH 03301		 		3,000.
BIG BROTHER BIG SISTER OF CAPE COD &		PUBLIC	GENERAL SUPPORT	
THE ISLANDS		1		
1934 FALMOUTH ROAD		1		
CENTERVILLE, MA 02632				10,000.
\				
				Ì
BRADLEY UNIVERSITY	<u> </u>	PUBLIC	GENERAL SUPPORT	
1501 W. BRADLEY AVE.				10 000
PEORIA, IL 61625				10,000.
CAMP JABBERWOCKY- MARTHAS VINEYARD		PUBLIC	GENERAL SUPPORT	
CEREBRAL PALSY CAMP				
200 GREENWOOD AVE				
VINEYARD HAVEN, MA 02568				5,000.
CENTER FOR SCHOOL SUCCESS		PUBLIC	GENERAL SUPPORT	
79 EAST WILDER ROAD				F 000
WEST LEBANON, NH 03784				5,000.
CHANGING PERSPECTIVES		PUBLIC	GENERAL SUPPORT	
P.O. BOX 694				
BRADFORD, VT 05033				7,500.
CHILD AND FAMILY SERVICES OF NEW		PUBLIC	GENERAL SUPPORT	ļ
HAMPSHIRE 464 CHESTNUT STREET				
MANCHESTER, NH 03105				20,000.
CHILDREN'S CENTER OF THE UPPER VALLEY		PUBLIC	GENERAL SUPPORT	
178 MECHANIC ST				
LEBANON, NH 03766				20,000.
CHILDREN'S LITERACY FOUNDATION		PUBLIC	GENERAL SUPPORT	
1536 LOOMIS HILL ROAD				
WATERBURY CENTER, VT 05677				25,000.
CIRCLE PROGRAM		PUBLIC	GENERAL SUPPORT	_
85 MAIN ST #5				E 000
PLYMOUTH, NH 03264	<u> </u>	I		5,000. 2,015,270.
Total from continuation sheets	·			2,010,270.

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Y				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
•				
CITY YEAR NEW HAMPSHIRE		PUBLIC	GENERAL SUPPORT	
848 ELM STREET				5,000.
MANCHESTER, NH 03101		 		3,000.
CLAREMONT LEARNING PARTNERSHIP/ ONE 4		PUBLIC	GENERAL SUPPORT	
ALL FAMILY SPACE				
169 MAIN ST. CLAREMONT , NH 03743		i		65,000.
CHARLESONI , MI 03/43		 		
COLGATE UNIVERSITY		PUBLIC	GENERAL SUPPORT	
13 OAK DRIVE HAMILTON, NY 13346				10,000.
COURT APPOINTED ADVOCATES (CASA) OF		PUBLIC	GENERAL SUPPORT	
NEW HAMPSHIRE P.O. BOX 1327				
MANCHESTER, NH 03105				10,000.
COVER HOME REPAIR, INC.		PUBLIC	GENERAL SUPPORT	1
158 SOUTH MAIN STREET				
WHITE RIVER JUNCTION, VT 05001				10,000.
DARTMOUTH COLLEGE		PUBLIC	GENERAL SUPPORT	
6066 DEVELOPMENT OFFICE				
HANOVER, NH 03755			· · · · · · · · · · · · · · · · · · ·	15,000.
DARTMOUTH COLLEGE: THAYER SCHOOL OF		PUBLIC	GENERAL SUPPORT	
ENGINEERING AT DARTMOUTH				
14 ENGINEERING DR HANOVER, NH 03755				25,000.
HANOVER, MI 03/33				25,000.
DARTMOUTH-HITCHCOCK MEMORIAL HOSPITAL		PUBLIC	GENERAL SUPPORT	
ONE MEDICAL CENTER DRIVE LEBANON, NH 03756				2,500.
DADWOOMH HIMANAAAN WEMARIN NAARI		DURLIC	CENEDAL CUDDODE	
DARTMOUTH-HITCHCOCK MEMORIAL HOSPITAL ONE MEDICAL CENTER DRIVE		PUBLIC	GENERAL SUPPORT	
LEBANON, NH 03756				1,000.
DARTMOUTH-HITCHCOCK: CHAD		PUBLIC	GENERAL SUPPORT	
ONE MEDICAL CENTER DRIVE				
LEBANON, NH 03756		<u> </u>		30,000.
Total from continuation sheets		<u>-</u> -		L <u>.</u>

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to Foundation Purpose of grant or Amount contribution any foundation manager status of Name and address (home or business) or substantial contributor recipient DARTMOUTH-HITCHCOCK: COMMUNITY HEALTH PUBLIC GENERAL SUPPORT ONE MEDICAL CENTER DRIVE 120,000. LEBANON, NH 03756 DARTMOUTH-HITCHCOCK: FRIENDS OF THE PUBLIC GENERAL SUPPORT NORRIS COTTON CANCER CENTER ONE MEDICAL CENTER DRIVE LEBANON, NH 03756 10,000. DISMAS OF VERMONT, INC. PUBLIC GENERAL SUPPORT 103 PARK AVENUE RUTLAND, VT 05701 10,000. FAIRLEE COMMUNITY ARTS, INC. (FCA PUBLIC GENERAL SUPPORT 55 TOWN COMMON RD FAIRLEE, VT 05045 5,000. FRIENDS OF NEW HAMPSHIRE DRUG COURTS PUBLIC GENERAL SUPPORT PO BOX 326 NORTH HAVERHILL, NH 03774 5,000. FRIENDS OF THE CHILMARK PUBLIC PUBLIC GENERAL SUPPORT LIBRARY PO BOX 434 CHILMARK, MA 02535 2,000. FRIENDS OF WLRN PUBLIC GENERAL SUPPORT 172 NE 15TH STREET MIAMI, FL 33132 1,000. FUTURE IN SIGHT PUBLIC GENERAL SUPPORT 25 WALKER ST CONCORD, NH 03301 10,000. GEISEL SCHOOL OF MEDICINE AT PUBLIC GENERAL SUPPORT DARTMOUTH ONE MEDICAL CENTER DRIVE LEBANON, NH 03756 10,000. GIFT OF ADOPTION NEW HAMPSHIRE PUBLIC GENERAL SUPPORT CHAPTER 2001 WAUKEGAN ROAD TECHNY, IL 60082 1,000. Total from continuation sheets

3 Grants and Contributions Paid During the Y		T		
, Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
				:
GIRLS ON THE RUN VERMONT		PUBLIC	GENERAL SUPPORT	
801 EAST MOREHEAD STREET				4 5
CHARLOTTE , NC 28202			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	4,50
GLODAL GAMDUGEG FOIREMANDA		PUBLIC	GENERAL SUPPORT	
GLOBAL CAMPUSES FOUNDATION 43 S MAIN STREET		POBLIC	JENERAL SUFFORT	
RANDOLPH, VT 05060				5,00
,				
GOOD BEGINNINGS OF THE UPPER VALLEY		PUBLIC	GENERAL SUPPORT	
PO BOX 5054				
WEST LEBANON, NH 03784			-	1,00
GOOD BEGINNINGS OF THE UPPER VALLEY		PUBLIC	GENERAL SUPPORT	
PO BOX 5054				. 6.00
WEST LEBANON, NH 03784	 			. 6,00
GOOD NEIGHBOR HEALTH CLINICS		PUBLIC	GENERAL SUPPORT	
70 NORTH MAIN STREET		LOBBIC	GENERAL SUFFORT	
WHITE RIVER JUNCTION, VT 05001				10,00
GRAFTON COUNTY SENIOR CITIZENS		PUBLIC	GENERAL SUPPORT	
COUNCIL, INC.				
10 CAMBELL STREET				
LEBANON, NH 03766		,		17,00
GREEN MOUNTAIN CHILDREN'S CENTER		PUBLIC	GENERAL SUPPORT	
92 FARMVU DR WHITE RIVER JUNCTION, VT 05001				10,00
REEN MOUNTAIN CHILDREN'S CENTER		PUBLIC	GENERAL SUPPORT	
2 FARMVU DR		1		
WHITE RIVER JUNCTION, VT 05001				10,00
REEN MOUNTAIN CHILDREN'S CENTER		PUBLIC	GENERAL SUPPORT	
WHITE RIVER JUNCTION, VT 05001		[14,95
NI-II GONGIIGN, VI 93001				14,30
LAMPSHIRE COOPERATIVE NURSERY SCHOOL		PUBLIC	GENERAL SUPPORT	
.04 LYME RD.				
IANOVER, NH 03755		1		5,00

Part XV Supplementary Information 3 Grants and Contributions Paid During the You				
. Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	A
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
HANOVER AREA CHAMBER OF COMMERCE		PUBLIC	GENERAL SUPPORT	ŀ
146 CARLISLE STREET				
HANOVER, PA 17331		<u> </u>		4,000
WINDLES W. DOWNEY GUIDENING		DUDY TO	CENEDAL CUDDODE	
HANOVER NH ROTARY CHARITIES PO BOX 381		PUBLIC	GENERAL SUPPORT	
HANOVER, NH 03755				5,000
HARLEM RBI DBA DREAM		PUBLIC	GENERAL SUPPORT	
1991 SECOND AVENUE				
NEW YORK, NY 10029			-	2,000
HEADREST		PUBLIC	GENERAL SUPPORT	
14 CHURCH STREET		105510		
LEBANON, NH 03766				15,000
HIGH HORSES		PUBLIC	GENERAL SUPPORT	1
138 HORSE FARM ROAD				
SHARON, VT 05065				10,000
HOPE ON HAVEN HILL		PUBLIC	GENERAL GURDORA	_
326 ROCHESTER HILL RD		FUBLIC	GENERAL SUPPORT	,
ROCHESTER, NH 03867				10,000
•				
ISLAND GROWN INITIATIVE		PUBLIC	GENERAL SUPPORT	
PO BOX 622 VINEYARD HAVEN, MA 02569				10,000
LEAGUE OF NH ARTS AND CRAFTS, HANOVER		PUBLIC	GENERAL SUPPORT	
BRANCH, INC				
13 LEBANON STREET				
HANOVER, NH 03755		·		2,500
LEBANON OPERA HOUSE 51 N PARK ST		PUBLIC	GENERAL SUPPORT	
LEBANON, NH 03766				10,000
				,
MAPLE LEAF CHILDREN'S CENTER		PUBLIC	GENERAL SUPPORT	
2596 VT-113				40.000
THETFORD, VT 05074 Total from continuation sheets			1	10,000

3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
•				
MARTHA'S VINEYARD BOYS & GIRLS CLUB		PUBLIC	GENERAL SUPPORT	
PO BOX 654 EDGARTOWN, MA 02539				5,00
EDGARTOWN, MA 02535				3,000
MARTHA'S VINEYARD HOSPITAL, INC.		PUBLIC	GENERAL SUPPORT	
1 HOSPITAL RD		102210	,	
OAK BLUFFS, MA 02557				10,000
MARTHA'S VINEYARD MUSEUM		PUBLIC	GENERAL SUPPORT	
59 SCHOOL ST EDGARTOWN, MA 02539				250,000
EDGARTONN, MA 02333				230,000
MASSACHUSETTS AUDUBON SOCIETY		PUBLIC	GENERAL SUPPORT	
346 GRAPEVINE RD				
WENHAM, MA 01984				3,500
MAYHEW PROGRAM		PUBLIC	GENERAL SUPPORT	
293 W SHORE ROAD BRISTOL, NH 03222				5,000
BR1310B, Mr. 03222				3,000
MONTSHIRE MUSEUM OF SCIENCE		PUBLIC	GENERAL SUPPORT	
ONE MONTSHIRE ROAD	·			
NORWICH, VT 05055				5,000
MONTSHIRE MUSEUM OF SCIENCE ONE MONTSHIRE ROAD		PUBLIC	GENERAL SUPPORT	
NORWICH, VT 05055				12,000
			i	
T ASCUTNEY OUTDOORS, INC		PUBLIC	GENERAL SUPPORT	
PO BOX 101 BROWNSVILLE , VT 05037	,			10 000
BROWNSVILLE , VI 03037	<u> </u>			10,000
HTUOYVM		PUBLIC	GENERAL SUPPORT	
PO BOX 654				
EDGARTOWN, MA 02539	·			1,697
NEW HAMPSHIRE ACADEMY OF SCIENCE 95 DARTMOUTH COLLEGE HWY		PUBLIC	GENERAL SUPPORT	
LYME, NH 03768				66,400
Total from continuation sheets				

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual. Recipient Foundation Purpose of grant or show any relationship to any foundation manager Amount status of contribution Name and address (home or business) recipient or substantial contributor NEW HAMPSHIRE ALCOHOL AND DRUG ABUSE PUBLIC GENERAL SUPPORT COUNSELORS ASSOCIATION 130 PEMBROKE RD #100 CONCORD NH 03301 5,000. PUBLIC NEW HAMPSHIRE BUSINESS COMMITTEE FOR GENERAL SUPPORT THE ARTS 49 SOUTH MAIN STREET, SUITE 205 CONCORD, NH 03301 1,000. NEW HAMPSHIRE BUSINESS COMMITTEE FOR PUBLIC GENERAL SUPPORT THE ARTS 49 SOUTH MAIN STREET, SUITE 205 CONCORD, NH 03301 1,000. NEW HAMPSHIRE CENTER FOR NONPROFITS PUBLIC GENERAL SUPPORT 84 SILK FARM ROAD CONCORD, NH 03301 5,000. NEW HAMPSHIRE CHARITABLE FOUNDATION PUBLIC GENERAL SUPPORT 37 PLEASANT STREET CONCORD, NH 03301 50,000. NEW HAMPSHIRE CHARITABLE FOUNDATION PUBLIC GENERAL SUPPORT 37 PLEASANT STREET CONCORD, NH 03301 152,703. NEW HAMPSHIRE CHARITABLE FOUNDATION PUBLIC GENERAL SUPPORT 37 PLEASANT STREET CONCORD, NH 03301 10,000. NEW HAMPSHIRE CHILDREN'S TRUST PUBLIC GENERAL SUPPORT 10 FERRY ST # 315 CONCORD, NH 03301 5,000. NEW HAMPSHIRE COLLEGE AND UNIVERSITY PUBLIC GENERAL SUPPORT COUNCIL 3 BARRELL COURT, SUITE 100 CONCORD, NH 03301 1,500. NEW HAMPSHIRE HUMANITIES PUBLIC GENERAL SUPPORT 117 PLEASANT STREET CONCORD, NH 03301 7,500. Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) Recipient If recipient is an individual, Foundation Purpose of grant or show any relationship to any foundation manager Amount contribution status of Name and address (home or business) or substantial contributor recipient NEW HAMPSHIRE LEGAL ASSISTANCE PUBLIC GENERAL SUPPORT 117 NORTH STATE STREET 1,000. CONCORD, NH 03301 PUBLIC GENERAL SUPPORT NEW HAMPSHIRE PUBLIC RADIO 2 PILSBURY STREET CONCORD, NH 03301 1,000. NEW HAMPSHIRE WOMEN'S FOUNDATION PUBLIC GENERAL SUPPORT 2 DELTA DRIVE CONCORD, NH 03301 10,000. PUBLIC NEW HEIGHTS YOUTH, INC. GENERAL SUPPORT 50 E 118TH ST 10,000. NEW YORK, NY 10035 NORTHERN STAGE PUBLIC GENERAL SUPPORT PO BOX 4287 WHITE RIVER JUNCTION, VT 05001 10,000. OPERA NORTH PUBLIC GENERAL SUPPORT 20 WEST PARK STREET 5,000. LEBANON, NH 03766 ORANGE COUNTY PARENT CHILD CENTER PUBLIC GENERAL SUPPORT 693 VT-110 TUNBRIDGE, VT 05077 20,000. PANMASS CHALLENGE PUBLIC GENERAL SUPPORT 77 4TH AVE NEEDHAM, MA 02494 1,000. PLANNED PARENTHOOD OF NORTHERN NEW PUBLIC GENERAL SUPPORT ENGLAND 784 HERCULES DRIVE, SUITE-110 . COLCHESTER, VT 05446 25,000. PLANNED PARENTHOOD OF NORTHERN NEW PUBLIC GENERAL SUPPORT **ENGLAND** 784 HERCULES DRIVE, SUITE 110 COLCHESTER, VT 05446 25,000. Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to Foundation Purpose of grant or **Amount** contribution any foundation manager status of Name and address (home or business) recipient or substantial contributor POSITIVE TRACKS PUBLIC GENERAL SUPPORT 35 SOUTH MAIN STREET HANOVER, NH 03755 15,000. PUBLIC HEALTH COUNCIL OF THE UPPER PUBLIC GENERAL SUPPORT VALLEY ONE COURT STREET #378 5,000. LEBANON, NH 03766 RAISING A READER MA PUBLIC GENERAL SUPPORT 9B HAMILTON PLACE, 3RD FL BOSTON, MA 02108 7,500. REVELS NORTH PUBLIC GENERAL SUPPORT PO BOX 415 HANOVER, NH 03755 2,500. ROOM TO GROW PUBLIC GENERAL SUPPORT 142 BERKLEY STREET 10,000. BOSTON, MA 02116 ROOM TO GROW PUBLIC GENERAL SUPPORT 142 BERKLEY STREET 5,000. BOSTON, MA 02116 SAFEART PUBLIC GENERAL SUPPORT 19-40 HAZEN ST 5,520. EAST ELMHURST, NY 11370 SAFELINE, INC. PUBLIC GENERAL SUPPORT PO BOX 368 6,000. CHELSEA, VT 05038 GENERAL SUPPORT PUBLIC SAIL MARTHA'S VINEYARD 79 BEACH RD VINEYARD HAVEN, MA 02568 7,500. SECOND GROWTH, INC. PUBLIC GENERAL SUPPORT PO BOX 5227 WEST LEBANON, NH 03784 10,000. Total from continuation sheets

Part XV Supplementary Information	PHILANTHROPIC			00573
3 Grants and Contributions Paid During the Ye	ear (Continuation)			
. Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
SOCIETY FOR THE PROTECTION OF NEW HAMPSHIRE FORESTS		PUBLIC	GENERAL SUPPORT	
54 PORTSMOUTH STREET CONCORD, NH 03301			<u> </u>	2,500
SOUTHEASTERN VERMONT COMMUNITY ACTION 91 BUCK DR		PUBLIC	GENERAL SUPPORT	
WESTMINSTER, VT 05158				7,500
SPARK! COMMUNITY CENTER 75 BANK ST		PUBLIC	GENERAL SUPPORT	
LEBANON, NH 03766				5,000
SPECIAL NEEDS SUPPORT CENTER 12 FLYNN STREET		PUBLIC	GENERAL SUPPORT	
LEBANON, NH 03766				5,000.
TEXAS CIVIL RIGHTS PROJECT 1405 MONTOPOLIS DR		PUBLIC	GENERAL SUPPORT	
AUSTIN, TX 78741				2,500.
THE CIRCUS BARN, INC. 1 CIRCUS ROAD		PUBLIC	GENERAL SUPPORT	
GREENSBORO, VT 05841				5,000.
THE FAMILY PLACE 319 US ROUTE 5 SOUTH		PUBLIC	GENERAL SUPPORT	
NORWICH, VT 05055				20,000.
THE GOVERNOR'S INSTITUTES OF VERMONT		PUBLIC	GENERAL SUPPORT	
20 w CANAL ST C5 WINOOSKI, VT 05404				4,000.
THE SCOTLAND HOUSE 430 W DUKE OF GLOUCESTER ST		PUBLIC	GENERAL SUPPORT	
WILLIAMSBURG, VA 23185				5,000.
THE SPACE ON MAIN, INC.		PUBLIC	GENERAL SUPPORT	
174 MAIN STREET BRADFORD, VT 05033 Total from continuation sheets				5,000.

Part XV Supplementary Information				
3 Grants'and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
THE YARD		PUBLIC	GENERAL SUPPORT	
PO BOX 405				1
CHILMARK, MA 02535	 	 		250,000
				,
TLC FAMILY RESOURCE CENTER		PUBLIC	GENERAL SUPPORT	
109 PLEASANT ST				
CLAREMONT , NH 03743		-	_	20,000
TOWN OF HANOVER SUSTAINABLE HANOVER		PUBLIC	GENERAL SUPPORT	
COMMITTEE				
PO BOX 483				
HANOVER, NH 03755	_	<u> </u>		5,000.
TRUSTEES OF COLUMBIA UNIVERSITY IN		PUBLIC	GENERAL SUPPORT	
THE CITY OF NEW YORK				
535 w 116TH ST	<u>}</u>]
NEW YORK, NY 10027		<u> </u>		500.
	`			
TWIN PINES HOUSING TRUST - VT		PUBLIC	GENERAL SUPPORT	
240 SOUTH MAIN STREET		100000	DEMENDING COLLOCK	
WHITE RIVER JUNCTION, VT 05001				25,000.
TWIN DINES UNICINA MONSON - VM		PUBLIC	GENERAL SUPPORT	
TWIN PINES HOUSING TRUST - VT 240 SOUTH MAIN STREET		FOBLIC	GENERAL SUFFORT	1
WHITE RIVER JUNCTION, VT 05001				10,000.
UNITED VALLEY INTERFAITH PROJECT,		PUBLIC	GENERAL SUPPORT	
INC.				
PO BOX 187 MERIDEN , NH 03770				5,000.
UNIVERSITY OF TEXAS- LITERACY FIRST		PUBLIC	GENERAL SUPPORT	
200 W. 24TH STREET		FOREIC	SENERAL SOFFORT	
AUSTIN, TX 78705				5,000.
UNIVERSITY OF TEXAS, PRISCILLA POND		PUBLIC	GENERAL SUPPORT	1
FLAWN CHILD AND FAMILY LABORATORY 200 w. 24TH STREET				
AUSTIN, TX 78705				5,000.
IIDDED WALLEY AGUATIOS GENTED		DUBLIC	CEMEDAL CHEDODE	
UPPER VALLEY AQUATICS CENTER 100 ARBORETUM LN		PUBLIC	GENERAL SUPPORT	
WHITE RIVER JUNCTION, VT 05001				5,000.
Total from continuation sheets	<u> </u>	•		1

3 Grants and Contributions Paid During the Y			·	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	,
UDDED UNITED ACCUMENT		PUBLIC	DEVERNI CURRORE	
UPPER VALLEY AQUATICS CENTER 100 ARBORETUM LN		PUBLIC	GENERAL SUPPORT	
WHITE RIVER JUNCTION VT 05001				10,00
WILL RIVER CONCILCA, VI 05001			 	
UPPER VALLEY HAVEN		PUBLIC	GENERAL SUPPORT	
713 HARTFORD AVENUE				
WHITE RIVER JUNCTION, VT 05001				5,00
UPPER VALLEY HAVEN		PUBLIC	GENERAL SUPPORT	
713 HARTFORD AVENUE	.]		}	
WHITE RIVER JUNCTION, VT 05001				35,00
UPPER VALLEY HUMANE SOCIETY		PUBLIC	GENERAL SUPPORT	
300 OLD ROUTE 10 ENFIELD, NH 03748	,			2,50
	- 			2,30
UPPER VALLEY LAND TRUST		PUBLIC	GENERAL SUPPORT	
19 BUCK ROAD				
HANOVER, NH 03755				10,00
UPPER VALLEY SNOW SPORTS FOUNDATION		PUBLIC	GENERAL SUPPORT	
160 WHALEBACK MOUNTAIN RD.			SENDICIE DOTTON	
ENFIELD, NH 03748		ļ		25,00
UPPER VALLEY TRAILS ALLIANCE PO BOX 1215		PUBLIC	GENERAL SUPPORT	
NORWICH, VT 05055				5,00
UPPER VALLEY WALDORF SCHOOL		PUBLIC	GENERAL SUPPORT	
80 BLUFF RD				10.00
QUECHEE, VT 05059				10,00
VALLEY COURT DIVERSION PROGRAMS		PUBLIC	GENERAL SUPPORT	
211 NORTH MAIN STREET				
WHITE RIVER JUNCTION, VT 05001				5,00
VINEYARD COMMITTEE ON HUNGER/ ISLAND		PUBLIC	GENERAL SUPPORT	
FOOD PANTRY]		
PO BOX 4685 /INEYARD HAVEN, MA 02568				2,00
Total from continuation sheets				2,00

	PHILANTHROPIC	<u> </u>		00573
Part XV Supplementary Information				Т
3 Grants and Contributions Paid During the Ye				
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
VINS, INC 6565 WOODSTOCK ROAD ROUTE 4, PO BOX 1281 QUECHEE, VT 05059		PUBLIC	GENERAL SUPPORT	25,000.
VISITING NURSE AND HOSPICE OF VERMONT & NEW HAMPSHIRE PO BOX 976		PUBLIC	GENERAL SUPPORT	
WHITE RIVER JUNCTION, VT 05001			<u> </u>	2,500.
VITAL COMMUNITIES 195 NORTH MAIN STREET WHITE RIVER JUNCTION, VT 05001		PUBLIC	SENERAL SUPPORT	10,000.
WEST CENTRAL BEHAVIORAL HEALTH 9 HANOVER STREET, SUITE 2 LEBANON, NH 03766		PUBLIC	GENERAL SUPPORT	20,000.
WEST CENTRAL BEHAVIORAL HEALTH 9 HANOVER STREET, SUITE 2 LEBANON, NH 03766		PUBLIC	GENERAL SUPPORT	10,000.
WGBH DBA WCAI 3 WATER STREET WOODS HOLE, MA 02543		PUBLIC	GENERAL SUPPORT	1,000.
WHITE RIVER PARTNERSHIP 4266 VT-14 SOUTH ROYALTON, VT 05068		PUBLIC	GENERAL SUPPORT	2,500.
WILLING HANDS ENTERPRISES PO BOX 172 LEBANON, NH 03766		PUBLIC	GENERAL SUPPORT	6,500.
WOODSTOCK COMMUNITY PLAYSCHOOL, INC. DBA RAINBOW PLAYSCHOOL 54 RIVER STREET WOODSTOCK, VT 05091		PUBLIC	GENERAL SUPPORT	20,000.
ZACK'S PLACE ENRICHMENT CENTER 73 CENTRAL STREET, SUITE A, PO BOX 634 WOODSTOCK, VT 05091 Total from continuation sheets		PUBLIC	GENERAL SUPPORT	5,000.

THE COUCH FAMILY FOUNDATION

Form 990-PF (2018)

Part XVI-A

C/O MOTT PHILANTHROPIC

Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelate	ed business income	Exclu	uded by section 512, 513, or 514	(e)
	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue:	Code		1000		
a b	-		 		
	·		 		
d	-				
e	-				
1	-		<u> </u>		
g Fees and contracts from government agencies	•		<u> </u>		
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities			<u> </u>		778,268.
5 Net rental income or (loss) from real estate;			ļ		
a Debt-financed property			ļ		
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property			<u> </u>		0.040
7 Other investment income			├ ─		9,042.
8 Gain or (loss) from sales of assets other				ŀ	2 125 221
than inventory	-		<u> </u>		3,135,321.
9 Net income or (loss) from special events			-		
10 Gross profit or (loss) from sales of inventory			├		
11 Other revenue.					
a b	-				
	·				
d	·				
e			 		
12 Subtotal Add columns (b), (d), and (e)		0.		0.	3,922,631.
13 Total. Add line 12, columns (b), (d), and (e)				13	3,922,631.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities	to the Acc	omplishment of Ex	cemp	t Purposes	
Line No. Explain below how each activity for which inco		-			unkahmant of
the foundation's exempt purposes (other than			Contait	outed importantly to the accom	ipiisiinient oi
1 N/A	. 5, p. 5				
		· · · · · ·			
					
					
	· · · · · ·				
					·
		. <u> </u>			
					
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				····	
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	·····				
823621 12-11-18					Form 990-PF (2018)

	THE	COUCH FAMILY FOU	INDATION			
Form 990-F		MOTT PHILANTHROP		10	0-0000573 Page	e 13
Part X		Regarding Transfers to a		nd Relationships With N	loncharitable	
	Exempt Org					
1 . Did th	ne organization directly or i	ndirectly engage in any of the following	ng with any other organization	n described in section 501(c)	Yes	Νo
(othe	r than section 501(c)(3) or	ganizations) or in section 527, relatin	g to political organizations?		1	
a Trans	sfers from the reporting fou	indation to a noncharitable exempt or	ganization of:		:	
(1) (1a(1)	X
(2) (Other assets				1a(2)	X
b Other	transactions					_
(1) 5	Sales of assets to a noncha	ritable exempt organization			1b(1)	X
(2) F	Purchases of assets from a	noncharitable exempt organization			1b(2)	Х
(3) F	Rental of facilities, equipme	nt, or other assets			1b(3)	Х
(4) F	Reimbursement arrangeme	nts			1b(4)	X
(5) L	oans or loan guarantees				1b(5)	X
(6) F	Performance of services or	membership or fundraising solicitation	ons		1b(6)	X
c Sharı	ng of facilities, equipment,	mailing lists, other assets, or paid em	nployees		1c	X
d If the	answer to any of the above	e is "Yes," complete the following sch	edule. Column (b) should alv	vays show the fair market value of t	he goods, other assets,	
or ser	rvices given by the reportin	ig foundation. If the foundation receiv	ed less than fair market valu	e in any transaction or sharing arra	ngement, show in	
colum	nn (d) the value of the good	ds, other assets, or services received.				
(a)Line no	(b) Amount involved	(c) Name of noncharitable	e exempt organization	(d) Description of transfers, trans	actions, and sharing arrangement	is
		N/A				
					····	
			r		<u>-</u>	
						
	L					
	•	rectly affiliated with, or related to, one	or more tax-exempt organia	ations described	Yes X	NI-
	, , ,	ction 501(c)(3)) or in section 527?			Yes X	INO
b If "Yes	s," complete the following s		(h) Type of arganization	(a) Deceriation	of relationship	
	(a) Name of		(b) Type of organization	(c) Description (טו ובומנוטוואוווף	
	N/A	1				
			1			

(617) 292-8400 Form **990-PF** (2018)

May the IRS discuss this return with the preparer shown below? See instr

P00838213

Firm's EIN ▶ 33-1197384

Sign Here

Paid

Preparer Use Only Preparer's signature

Killu Keulaus

ng accompanying schedules and statements, and to the best of my knowledge

ayee) is based on all information of which preparer has any knowledge

Title

11/04/19

Date

OFFICER

Check _____ self- employed

Phone no.

Signature of officer or trustee

Print/Type preparer's name

KELLIE NEUHAUS

Firm's name ► ANDERSEN TAX, LLC

Firm's address ▶ 125 HIGH STREET, 16TH FLOOR

BOSTON, MA 02110

Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service **Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No 1545-0047

2018

Name of the organization

THE COUCH FAMILY FOUNDATION

Employer identification number

10-0000573

C/	O MOTT PHILANTHROPIC	10-0000573
Organization type (check of	ne).	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	S01(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
	s covered by the General Rule or a Special Rule. (7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	ile See instructions
General Rule		
General Rule		
•	n filing Form 990, 990·EZ, or 990·PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor.	· · · · · · · · · · · · · · · · · · ·
Special Rules		
sections 509(a)(1) any one contribute	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amou, line 1 Complete Parts I and II	or 16b, and that received from
year, total contribu	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from ations of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educity to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the c	ational purposes, or for the
year, contributions is checked, enter h purpose. Don't cor	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a exclusively for religious, charitable, etc., purposes, but no such contributions totaled mater the total contributions that were received during the year for an exclusively religious implete any of the parts unless the General Rule applies to this organization because it re, etc., contributions totaling \$5,000 or more during the year	ore than \$1,000 lf this box , charitable, etc ,
but it must answer "No" on	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (F Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Fo he filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	-

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

	 Page 2

Schedule B (Form 990, 990-EZ, or 990-PF) (2018) Name of organization Employer identification number THE COUCH FAMILY FOUNDATION C/O MOTT PHILANTHROPIC 10-0000573

Part I	Contributors (see instructions) Use duplicate copies of Part I	if additional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	RICHARD COUCH 23 BERRILL FARMS LANE HANOVER, NH 03755	\$ 6,275,544.	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ 	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 \$	Person Payroll Noncash Complete Part II for noncash contributions)

823452 11-08-18

Name of organization

THE COUCH FAMILY FOUNDATION

C/O MOTT PHILANTHROPIC

Employer identification number

Part II	Noncash Property (see instructions) Use duplicate copies of Pa	rt II if additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	MARKETABLE SECURITIES		
		\$ 393,780.	01/02/18
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
1	MARKETABLE SECURITIES	_	
		s149,388.	01/31/18
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	MARKETABLE SECURITIES		
<u>=</u>		 \$\$	03/07/18
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
1	MARKETABLE SECURITIES		
		\$ 988,827.	04/20/18
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	MARKETABLE SECURITIES	_	
		sss	08/29/18
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		_	
		<u> </u>	

Name of org			1	Page Employer identification number
	UCH FAMILY FOUNDATION TT PHILANTHROPIC			10-0000573
Part III	Exclusively religious, charitable, etc., contributing from any one contributor. Complete columns (a) completing Part III, enter the total of exclusively religious, cluse duplicate copies of Part III if additional s	through (e) and the following line en haritable, etc., contributions of \$1,000 or	try For organizations	that total more than \$1,000 for the ye
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held
		(e) Transfer of gif	t	
-	Transferee's name, address, an	d ZIP + 4	Relationship of tra	insferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held
-				
		(e) Transfer of gif	t .	
	Transferee's name, address, and	d ZIP + 4	Relationship of tra	nsferor to transferee
-				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held
		(e) Transfer of gift	l	

(b) F	urpose of gift	(c) Use of gift	(d) Description of how gift is held
-			

823454 11-08-18

Relationship of transferor to transferee

Transferee's name, address, and ZIP + 4

FORM .99	00-PF	GAIN OR	(LOSS)	FROM	SALE	OF	ASSETS	ST	'ATEMENT	1
DESCRIF	(A) PTION OF PROPERT	Ϋ́				I	MANNER ACQUIRED	DATE ACQUIRED	DATE SO	OLD
BBH WEA	ALTH STRATEGIES,	LLC -	REMS GR	OUP		PU	JRCHASED			
	(B) GROSS SALES PRICE	COS	C) T OR BASIS	EX	(D) PENSE SALE	OF	(E) DEPRE		(F) N OR LOSS	S
	-40,345.		0	•		0.	,	0.	-40,34	45.
DESCRIP	(A) TION OF PROPERT	Ϋ́				P	MANNER ACQUIRED	DATE ACQUIRED	DATE SO	OLD
BBH WEA	LTH STRATEGIES,	LLC -	REMS GR	OUP		PU	JRCHASED			
	(B) GROSS SALES PRICE	COS	C) I OR BASIS	EX.	(D) PENSE SALE	OF	(E) DEPRE		(F) N OR LOSS	S
	-44,723.		0	•		0.		0.	-44,72	23.
DESCRIP	(A) TION OF PROPERT	Ϋ́					MANNER CQUIRED	DATE ACQUIRED	DATE SO	OLD
	LTH STRATEGIES, S SERIES	LLC -	ALTAROCI	ĸ		PU	IRCHASED			
	(B) GROSS SALES PRICE	COS	C) F OR BASIS	EXI	(D) PENSE SALE	OF	(E) DEPRE	C. GAI	(F) N OR LOSS	5
	-19,224.		0	•		0.	-	0.	-19,22	24.

(A) DESCRIPTION OF P	ROPERTY				MANNER CQUIRED		TE VIRED	DATE	SOLI
BBH WEALTH STRAT PARTNERS SERIES	EGIES, I	- LC - ALTAROCK		PU	RCHASED				
(B)	a	(C)	(D)		(E)			(F)	
GROS SALES P		COST OR OTHER BASIS	EXPENSE SALE	Or.	DEPRE	c.	GAIN	OR LO	oss
10	7,867.	0.		0.		0.		107	,867.
(A) DESCRIPTION OF P	ROPERTY				MANNER CQUIRED		TE VIRED	DATE	SOLI
BBH WEALTH STRAT		LC - BURGUNDY		PU	RCHASED				
(B) GROS		(C) COST OR	(D) EXPENSE	OF	(E)			(F)	
SALES P		OTHER BASIS	SALE		DEPRE	C.	GAIN	OR LO	oss ———
	2,413.	0.		0.	·	0.	- <u></u>	2	,413.
(A) DESCRIPTION OF P	ROPERTY				MANNER CQUIRED		TE IRED	DATE	SOLE
BBH WEALTH STRATI		LC - BURGUNDY		PUI	RCHASED				
(B)	_	(C)	(D)		(E)			(F)	
GROS: SALES PI		COST OR OTHER BASIS	EXPENSE SALE	OF	DEPRE	с.	GAIN	OR LO	oss
4	7,832.	0.		0.		0.		47	,832.
(A) DESCRIPTION OF PR	ROPERTY				MANNER CQUIRED	DA ACQU		DATE	SOLD
BBH WEALTH STRATI EMERGING MARKET S		LC - BURGUNDY		PUI	RCHASED				
(B) GROSS	2	(C) COST OR	(D) EXPENSE	OF	(E)			(F)	
SALES PI		OTHER BASIS	SALE	OI.	DEPRE	с.	GAIN	OR LO	oss
161	,329.	0.		0.		0.	-	161	329.

(A) DESCRIPTION OF PROPER	TY			IANNER QUIRED		ATE JIRED	DATE	SOLD
BBH WEALTH STRATEGIES SERIES	, LLC - SELECT E	QUITY	PUR	CHASED				
(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE SALE	OF	(E) DEPRE		GAIN	(F) 1 OR L	oss
-41,272	0.		0.		0.		-41	,272.
(A) DESCRIPTION OF PROPER BBH WEALTH STRATEGIES	 _	OUITY	AC	IANNER QUIRED CHASED		ATE JIRED	DATE	SOLD
SERIES							4 N	
(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE SALE	OF	(E) DEPRE		GAIN	(F) I OR L	oss
732,875	. 0.		0.		0.		732	,875.
(A) DESCRIPTION OF PROPER	тү			ANNER QUIRED		TE VIRED	DATE	SOLD
1818 PARTNERS, LP			PUR	CHASED				
(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE SALE	OF	(E) DEPRE	c.	GAIN	(F)	oss
9,900	. 0.		0.		0.	`	9	,900.
(A) DESCRIPTION OF PROPER	TY			ANNER QUIRED		TE IRED	DATE	SOLD
1818 PARTNERS, LP			PUR	CHASED				
(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE SALE	OF	(E)	c.	GAIN	(F)	oss ·
258,289	. 0.		0.		0.		258	,289.

	(A) TION OF	PROPERTY				MANNER CQUIRED		ATE JIRED	DATE	SOLD
BROWN B	ROTHERS	0719			PUI	RCHASED				-
		B) OSS	(C) COST OR	(D) EXPENSE	OF	(E)			(F)	
_		PRICE	OTHER BASIS	SALE		DEPRE	c	GAI	OR L	oss
	2,	305,590.	2,441,550.		0.		0.		-135	,960.
DESCRIP	(A) TION OF	PROPERTY				MANNER CQUIRED		TE JIRED	DATE	SOLD
BROWN BI	ROTHERS	0719	_		PUI	RCHASED	-			
		B) OSS	(C) COST OR	(D) EXPENSE	OF	(E)			(F)	
_		PRICE	OTHER BASIS	SALE		DEPRE	c	GAIN	OR LO	oss
	14,	198,039.	12,161,342.		0.		0.		2,036	,697.
BBH WEAL	LTH STRA	PROPERTY ATEGIES, IS EQUITY	- LLC - GQG PARTI SERIES	NERS	A(AANNER CQUIRED CCHASED		TE URED	DATE	SOLD
	GRO	B) OSS PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE SALE	OF	(E) DEPRE	c.	GAIN	(F) 1 OR L	oss
-		-378.	0.		0.		0.			378.
DESCRIPT	(A) PION OF	PROPERTY	_			AANNER CQUIRED		TE UIRED	DATE	SOLD
DISPOSIT			TH STRATEGIES,	LLC -	PUF	RCHASED				
		B) OSS	(C) COST OR	(D) EXPENSE	OF	(E)			(F)	
_		PRICE	OTHER BASIS	SALE		DEPRE	C.	GAIN	OR LO	oss
	1,9	917,224.	1,922,571.		0.		0.		- 5	347.
CAPITAL	GAINS I	DIVIDENDS	FROM PART IV						65,	368.
TOTAL TO	FORM 9	990-PF, PA	ART I, LINE 6A		•				3,135,	321.
							;			

GROSS GAINS REVENUE NET INVEST- ADJ	C) JUSTED INCOME
PARTNERS 26,017. 0. 26,017. 26,017. DIVIDENDS - ALTAROCK 9,787. 0. 9,787. 9,787. DIVIDENDS - BROWN BROTHERS 345,441. 65,368. 280,073. 280,073. DIVIDENDS - BURGUNDY EMERGING MARKET 67,012. 0. 67,012. 67,012. DIVIDENDS - CEDARK ROCK 69,477. 0. 69,477. 69,477. DIVIDENDS - CLARKSTON CAPITAL PARTNERS 34,007. 0. 34,007. 34,007. DIVIDENDS - GQG PARTNERS 487. 0. 487. 487. DIVIDENDS - LBC CREDIT PARTNERS 14,958. 0. 14,958. DIVIDENDS - REMS	
DIVIDENDS - ALTAROCK 9,787. 0. 9,787. 9,787. DIVIDENDS - BROWN BROTHERS 345,441. 65,368. 280,073. 280,073. DIVIDENDS - BURGUNDY EMERGING MARKET 67,012. 0. 67,012. 67,012. DIVIDENDS - CEDARK ROCK 69,477. 0. 69,477. 69,477. DIVIDENDS - CLARKSTON CAPITAL PARTNERS 34,007. 0. 34,007. 34,007. DIVIDENDS - GQG PARTNERS 487. 0. 487. 487. DIVIDENDS - LBC CREDIT PARTNERS 14,958. 0. 14,958. 14,958. DIVIDENDS - REMS	
ALTAROCK 9,787. 0. 9,787. 9,787. DIVIDENDS - BROWN BROTHERS 345,441. 65,368. 280,073. 280,073. DIVIDENDS - BURGUNDY EMERGING MARKET 67,012. 0. 67,012. 67,012. DIVIDENDS - CEDARK ROCK 69,477. 0. 69,477. 69,477. DIVIDENDS - CLARKSTON CAPITAL PARTNERS 34,007. 0. 34,007. 34,007. DIVIDENDS - GQG PARTNERS 487. 0. 487. 487. DIVIDENDS - LBC CREDIT PARTNERS 14,958. 0. 14,958. DIVIDENDS - REMS	
BROTHERS 345,441. 65,368. 280,073. 280,073. DIVIDENDS - BURGUNDY EMERGING MARKET 67,012. 0. 67,012. 67,012. DIVIDENDS - CEDARK ROCK 69,477. 0. 69,477. 69,477. DIVIDENDS - CLARKSTON CAPITAL PARTNERS 34,007. 0. 34,007. 34,007. DIVIDENDS - GQG PARTNERS 487. 0. 487. 487. DIVIDENDS - LBC CREDIT PARTNERS 14,958. 0. 14,958. DIVIDENDS - REMS	
MARKET 67,012. 0. 67,012. 67,012. DIVIDENDS - CEDARK ROCK 69,477. 0. 69,477. 69,477. DIVIDENDS - CLARKSTON CAPITAL PARTNERS 34,007. 0. 34,007. 34,007. DIVIDENDS - GQG PARTNERS 487. 0. 487. 487. DIVIDENDS - LBC CREDIT PARTNERS 14,958. 0. 14,958. DIVIDENDS - REMS	
DIVIDENDS - CLARKSTON CAPITAL PARTNERS 34,007. 0. 34,007. 34,007. DIVIDENDS - GQG PARTNERS 487. 0. 487. 487. DIVIDENDS - LBC CREDIT PARTNERS 14,958. 0. 14,958. 14,958. DIVIDENDS - REMS	
PARTNERS 34,007. 0. 34,007. 34,007. DIVIDENDS - GQG PARTNERS 487. 0. 487. 487. DIVIDENDS - LBC CREDIT PARTNERS 14,958. 0. 14,958. 14,958. DIVIDENDS - REMS	
PARTNERS 487. 0. 487. 487. DIVIDENDS - LBC CREDIT PARTNERS 14,958. 0. 14,958. 14,958. DIVIDENDS - REMS	
CREDIT PARTNERS 14,958. 0. 14,958. 14,958. DIVIDENDS - REMS	
DIVIDENDS - SELECT	
EQUITY SERIES 128,901. 0. 128,901. 128,901. INTEREST - 1818	
PARTNERS 9,273. 0. 9,273. 9,273. INTEREST -	
ALTAROCK 7,914. 0. 7,914. 7,914. INTEREST -	
BURGUNDY EMERGING MARKET 980. 0. 980. 980. INTEREST - CEDAR	
ROCK 667. 0. 667. 667. INTEREST -	
CLARKSTON CAPITAL PARTNERS 9,226. 0. 9,226. 9,226. INTEREST - CPIV	
ECX LLC 25. 0. 25. 25. INTEREST - GQG	
PARTNERS 76. 0. 76. 76. INTEREST - LBC	
CREDIT PARTNERS 72,444. 0. 72,444. 72,444. INTEREST - REMS	
GROUP SERIES 2,490. 0. 2,490. 2,490. INTEREST - SELECT	
EQUITY SERIES 12,295. 0. 12,295. 12,295.	
TO PART I, LINE 4 843,636. 65,368. 778,268. 778,268.	

FORM 990-PF	OTHER	INCOME	·	STATEMENT	3
DESCRIPTION .		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTEI NET INCOI	
FROM K-1: BURGUNDY EMERGING MARKET SERIES FROM K-1: GQG PARTNERS EMERGING MARKETS EQUITY SERIES FROM K-1: SELECT EQUITY SERIES FROM K-1: 1818 PARTNERS		7,421. 639. 257. 725.	7,421. 639. 257. 725.		
TOTAL TO FORM 990-PF, PART I	, LINE 11 =	9,042.	9,042.		
FORM 990-PF	ACCOUNTING FEES		STATEMENT		4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITAI PURPOSI	
ACCOUNTING FEES	6,950	0. 0	•		0.
TO FORM 990-PF, PG 1, LN 16B	6,950	0	•		0.
FORM 990-PF (OTHER PROFE	SSIONAL FEES		STATEMENT	 5
DESCRIPTION	(A) EXPENSES PER BOOKS		(C) ADJUSTED NET INCOME		
INVESTMENT FEES FROM K-1: BURGUNDY EMERGING MARKET FROM K-1: GQG PARTNERS	456,552 2,174				0.
EMERGING MARKETS EQUITY SERIES	850	. 850	,		0.
TO FORM 990-PF, PG 1, LN 16C	459,576	459,576			0.

FORM 990-PF	TAXES			STATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		
FOREIGN TAXES PAYROLL TAXES	46,166. 3,598.	46,166		0. 3,598.
TO FORM 990-PF, PG 1, LN 18	49,764.	46,166	•	3,598.
FORM 990-PF OTHER EXPENSES				STATEMENT 7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		
OTHER GENERAL AND ADMIN	220,952.	0	•	200,355.
TO FORM 990-PF, PG 1, LN 23	220,952.	0	•	200,355.
FORM 990-PF OTHER DECREASE	S IN NET AS	SETS OR FUND	BALANCES	STATEMENT 8
DESCRIPTION				AMOUNT
BBH ADJUSTMENT TO QRP COST BA	1,995,267.			
TOTAL TO FORM 990-PF, PART II	I, LINE 5			1,995,267.
FORM 990-PF	CORPORAT	E STOCK		STATEMENT 9
DESCRIPTION		ВС	OOK VALUE	FAIR MARKET VALUE
EQUITIES			37,392,590.	49,399,692.
TOTAL TO FORM 990-PF, PART II	, LINE 10B	 -3	37,392,590.	49,399,692.

FORM ,990-PF	CORPORATE BONDS		STATEMENT	10
DESCRIPTION		BOOK VALUE	FAIR MARKE VALUE	T
FIXED INCOME SECURITIES		7,871,390.	8,397,8	00.
TOTAL TO FORM 990-PF, PART	I, LINE 10C 7,871,390.		8,397,800.	
FORM 990-PF LIST (NAME OF CONTRIBUTOR	OF SUBSTANTIAL CONTRIE PART VII-A, LINE 10 ADDRESS	BUTORS	STATEMENT	11
RICHARD W. COUCH	23 BERRILL FA			
BARBARA J. COUCH	23 BERRILL FA			
FORM 990-PF	PART XV - LINE 1A F OF FOUNDATION MANAGE		STATEMENT	12

NAME OF MANAGER

RICHARD W. COUCH BARBARA J. COUCH