The Securities and Exchange Commission has not necessarily reviewed the information in this filing and has not determined if it is accurate and complete.

The reader should not assume that the information is accurate and complete.

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 FORM D

# Notice of Exempt Offering of Securities

OMB APPROVAL				
OMB Number:	3235- 0076			
Estimated a burden	iverage			
hours per response:	4.00			

1. Issuer's Identity

CIK (Filer ID Nur	nber) Previou Names	None	Entity Type	
<u>0001512762</u>	BioGene	rics, Inc.	X Corporation	
Name of Issue			Limited Partnership	
Coherus BioSciences, Inc.			Limited Liability Company	
Jurisdiction o Incorporation/Orga			General Partnership Business Trust	
DELAWARE			Other (Specify)	
Year of Incorpora	tion/Organization			
Over Five Years Ago				
X Within Last Five Years (S	pecify Year) 2010			
Yet to Be Formed				
2. Principal Place of Busines	s and Contact Informatio	n		
Name	of Issuer			
Coherus BioSciences, Inc.				
Street A	Address 1		Street Address 2	
C/O DENNIS M. LANFEA	R	201 REDW0	OOD SHORES PARKWAY, SUITE 200	
City	State/Province/Cour	ntry ZIP/P	ostalCode Phone Number of Issuer	
REDWOOD CITY	CALIFORNIA	94065	(650) 649-3530	
3. Related Persons				
Last Name		First Name	Middle Name	
Lanfear	Dennis		М.	
Street Address 1	Str	reet Address 2		
Coherus BioSciences, Inc.	201 Redwood 200	l Shores Parkway, S	Suite	
City	State/I	Province/Country	ZIP/PostalCode	
Redwood City	CALIFORNI	A	94065	
<b>Relationship:</b> X Executive	Officer X Director Pro	moter		
Clarification of Response (if	Necessarv):			
	110000501 y J.			

Li	ast Name	First Name		Middle Name
Crooke, M.D.		Graham	К.	
Stree	et Address 1	Street Address 2		
Helix Ventures		555 Bryant Street, Suite 851		
	City	State/Province/Country		ZIP/PostalCode
Palo Alto		CALIFORNIA	94301	
<b>Relationship:</b>	Executive Officer X	Director Promoter		

Clarification of Response (if Necessary):

Lazars, M.D. John Michael Michael Construction of Response (if Necessary):  Lazars, M.D. 201 Redwood Shores Parkway, Suite 200 City State/Province/Country 94065 Redwood City C LLIPORNIA 94065 Relationship: Executive Offer X Director Promoter Ciartification of Response (if Necessary):  Lazar Name First Name Middle Name City State/Province/Country 20067 Relationship: Executive Offer X Director Promoter Ciartification of Response (if Necessary):  Lazar Name First Name Middle Name City State/Province/Country 20067 Relationship: Executive Offer X Director Promoter Ciartification of Response (if Necessary):  Lazar Name First Name Middle Name City State/Province/Country 20067 Relationship: Executive Offer X Director Promoter Ciartification of Response (if Necessary):  Lazar Name First Name Middle Name City State/Province/Country 20067 Relationship: Executive Offer X Director Promoter Ciartification of Response (if Necessary):  Lazar Name First Name Middle Name City State/Province/Country 20067 Relationship: Executive Offer X Director Promoter Ciartification of Response (if Necessary):  Lazar Name First Name Middle Name City State/Province/Country ZIP/PostalCode City State/Pr	Last Name	First Name	Middle Name
co Coherus BioSciences, Inc.     201     ZuP/PostalCode       City     State/Province/Country     ZIP/PostalCode       Reduxoad City     CALIFORNIA     94065       Relationship:     Executive Officer X Director Promoter     Middle Name       Clarification of Response (if Necessary):     Middle Name     Street Address 1       Street Address 1     Street Address 2     ZIP/PostalCode       Los Name     First Name     Middle Name       Richards     Christos     ZIP/PostalCode       Co Angeles     CALLFORNIA     90067       Relationship:     Executive Officer X Director Promoter     ZIP/PostalCode       Clarification of Response (if Necessary):     Edward     Middle Name       Torres     S.     First Name     Middle Name       Street Address 1     Street Address 2     Lilly Ventures, 115 W Washington     Suite 1680 - South       Street Address 1     NDIANA     46204     Relationship: Executive Officer X Director Promoter       Clarification of Response (if Necessary):     Intel Address 2     ZIP/PostalCode       Indianapolis     INDIANA     46204       Relationship:     Executive Officer X Director Promoter     ZIP/PostalCode       Clarification of Response (if Necessary):     Street Address 2     Middle Name       Torendle, M.D.     August     J. </th <th>Lazarus, M.D.</th> <th>John</th> <th>Michael</th>	Lazarus, M.D.	John	Michael
Concentry     200       City     StateProvince/Country     ZIP/PostalCode       Redwood City     CALLFORNIA     94065       Redutionship:     Executive Officer X Director     Promoter       Clarification of Response (if Necessary):     Middle Name     Middle Name       Richards     Christos     Street Address 1     Street Address 2       Levin & Company     1900 Century Park East, Stire 600     ZIP/PostalCode       City     State/Province/Country     ZIP/PostalCode       Los Angeles     CALLFORNIA     90067       Relationship:     Executive Officer X Director     Promoter       Clarification of Response (if Necessary):     East Name     Middle Name       Street Address 1     Street Address 2     Edward       Street Address 1     Street Address 2     Edward       Street Address 1     Street Address 2     Edward       Idification of Response (if Necessary):     ZIP/PostalCode     Indianapolis       Indianapolis     INDIANA     46204       Relationship:     Executive Officer X Director     Promoter       Clarification of Response (if Necessary):     ZIP/PostalCode     Indianapolis       Last Name     First Name     Middle Name     1       Street Address 1     Street Address 2     Size Address 2     IP/PostalCode	Street Address 1	Street Address 2	
Redwood Gity CALIFORNIA 94065 Relationship: Executive Officer X Director Promoter Clarification of Response (if Necessary): Last Name     First Name     Middle Name       Richards     Christos     Street Address 1       Street Address 1     Street Address 2       Levin & Company     1900 Century Park East, Suite 600       City     StateeProvince/Country       ZIP/PostalCode       Last Name     First Name       Middle Name       Street Address 1     90067       Relationship:     Executive Officer X Director       Clarification of Response (if Necessary):     Middle Name       Last Name     First Name     Middle Name       Street Address 1     Street Address 2       Lilly Ventures, 115 W Washington     Suite 1680 - South     Edward       Street Address 1     Street Address 2     Middle Name       City     State/Province/Country     ZIP/PostalCode       Indianapolis     INDLANA     46204       Relationship:     Executive Officer X Director     Promoter       Clarification of Response (if Necessary):     Iter Address 2     Middle Name       Trender, M.D.     August     J.       Street Address 1     Street Address 2     Street Address 2       Medpace, Inc.     5375 Medpace Way     ZIP/PostalCode       City     State/Province/Count	c/o Coherus BioSciences, Inc.	5	
Relationship:     Executive Officer X Director Promoter       Clarification of Response (if Necessary):       Middle Name       Richards     Christos       Street Address 1       Street Address 1       Street Address 2       Levin & Company     1800 Century Park East, Suite 600       City     State/Province/Country     ZIP/PostalCode       Los Angeles     CALLTORNIA     90067       Relationship:     Executive Officer X Director     Promoter       Clarification of Response (if Necessary):     Middle Name     90067       Street Address 1     Street Address 2       Lilly Ventures, 115 W Washington Street     State/Province/Country     ZIP/PostalCode       Idianapolis     RNDIANA     46204       Relationship:     Executive Officer X Director Promoter     ZIP/PostalCode       Clarification of Response (if Necessary):     Middle Name     Tree Address 1       Street Address 2       Medgace, Inc.     5375 Medgace Way     ZIP/PostalCode       Gity     Street Address 2       Medgace, Inc.     5375 Medgace Way     ZIP/PostalCode       Clarification of Response (if Necessary):     ZIP/PostalCode       Least Name     First Name     Middle Name	City	State/Province/Country	ZIP/PostalCode
Clarification of Response (if Necessary):       Last Name     First Name     Middle Name       Richards     Christos     Street Address 1     Street Address 2       Levin & Company     1800 Century Park East, Suite 600     ZIP/PostalCode       City     StateProvince/Country     ZIP/PostalCode       Los Angeles     CALIFORNIA     90067       Relationship:     Executive Officer X Director     Promoter       Clarification of Response (if Necessary):     Middle Name       Street Address 1     Street Address 2       Lilly Ventures, 115 W Washington     Suite 1680 - South       Street Address 1     Street Address 2       Lilly Ventures, 115 W Washington     Suite 1680 - South       Street     NDIANA     46204       Relationship:     Executive Officer X Director Promoter       Clarification of Response (if Necessary):     ZIP/PostalCode       Indianapolis     INDIANA     46204       Relationship:     Executive Officer X Director Promoter     J.       Clarification of Response (if Necessary):     J.     Street Address 1       Street Address 1     Street Address 2     J.       Relationship:     Executive Officer X Director Promoter     Clarification of Response (if Necessary):       Last Name     First Name     Middle Name       Valablatom     Mats     Street	Redwood City	CALIFORNIA	94065
Last Name     First Name     Middle Name       Richards     Christos     Street Address 1     Street Address 2       Levin & Company     1800 Century Park East, Suite 600     ZIP/PostalCode       City     StateProvince/County     90067       Relationship:     Executive Officer X Director Promoter     Street Address 1       Clarification of Response (if Necessary):     Middle Name       Last Name     First Name     Middle Name       Street Address 1     Street Address 2     Lilly Ventures, 115 W Washington       Street Address 1     Street Address 2     Lilly Ventures, 115 W Washington       Street Address 1     Street Address 2     Street Address 2       Relationship:     Executive Officer X Director Promoter     ZIP/PostalCode       Indinapolis     INDIANA     46204       Relationship:     Executive Officer X Director Promoter     ZIP/PostalCode       Indinapolis     INDIANA     46204       Relationship:     Executive Officer X Director Promoter     ZIP/PostalCode       Clarification of Response (if Necessary):     J.     Street Address 1       Last Name     First Name     Middle Name       Relationship:     Executive Officer X Director Promoter     ZIP/PostalCode       Clarification of Response (if Necessary):     ZIP/PostalCode     ZIP/PostalCode	<b>Relationship:</b> Executive Officer X	Director Promoter	
Richards Christos Street Address 1 Street Address 2 Levin & Company 1800 Century Park East, Suite 600 City State/Province/Country Relationship: Executive Officer X Director Promoter Clarification of Response (if Necessary):   Last Name First Name Middle Name Tromete Clarification of Response (if Necessary):  Last Name First Name Middle Name Clarification of Response (if Necessary):  Last Name First Name Middle Name Clarification of Response (if Necessary):  Last Name First Name Middle Name Clarification of Response (if Necessary):  Last Name First Name Middle Name Clarification of Response (if Necessary):  Last Name First Name Middle Name Clarification of Response (if Necessary):  Last Name First Name Middle Name Clarification of Response (if Necessary):  Last Name First Name Middle Name Clarification of Response (if Necessary):  Last Name First Name Middle Name Clarification of Response (if Necessary):  Last Name First Name Middle Name Clarification of Response (if Necessary):  Last Name First Name Middle Name Clarification of Response (if Necessary):  Last Name First Name Middle Name Clarification of Response (if Necessary):  Last Name First Name Middle Name Clarification of Response (if Necessary):  Last Name First Name Middle Name Clarification of Response (if Necessary):  Last Name First Name Middle Name Clarification of Response (if Necessary):  Last Name First Name Middle Name Clarification of Response (if Necessary):  Last Name First Name Middle Name Clarification of Response (if Necessary):  Last Name First Name Middle Name Clarification of Response (if Necessary):  Last Name First Name Middle Name Clarification of Response (if Necessary):  Last Name Response (if Necessary):  Last Nam	Clarification of Response (if Necessa	ry):	
Street Address 1Street Address 2Levia Company1800 Century Park East, Suite 600CityState/Province/CountryLos AngelesCALIFORNIARelationshipiExecutive Officer X DirectorPromoterClarification of Response (if Necessary):Last NameFirst NameMiddle NameTorresS.Street Address 2Lilly Ventures, 115 W Washington StreetStreet Address 1Street Address 2Lilly Ventures, 115 W Washington StreetStreet Address 1Street Address 2Lilly Ventures, 115 W Washington StreetINDIANAKeeutive Officer X DirectorPromoterCityState/Province/CountryZIP/PostalCodeIndianapolisINDIANA46204RelationshipiExecutive Officer X DirectorPromoterCarrification of Response (if Necessary):J.Street Address 1Street Address 2Medpace, Inc.5375 Medpace WayZIP/PostalCodeCityStreet Address 2Street Address 2Medpace, Inc.5375 Medpace WayZIP/PostalCodeCityStreet Address 1Street Address 2Leonard Capital, LLC122 Streententh Street, Suite 1750 State/Province/CountryZIP/PostalCodeVahlstromMats Street Address 1Street Address 2Relationshipi:Street Address 2Middle NameVahlstromMats Street Address 1Street Address 2Relationshipi:Street Address 1Street Address 2Relatio	Last Name	First Name	Middle Name
Levin & Company     1800 Century Park East, Suite 600     ZIP/PostalCode       Los Angeles     CALIFORNIA     90067       Relationship:     Executive Officer X Director     Promoter       Clarification of Response (if Necessary):     Middle Name     Middle Name       Torres     S.     Edward       Street Address 1     Street Address 2     Edward       Street Address 1     Street Address 2     ZIP/PostalCode       Idily     State/Province/Country     ZIP/PostalCode       Indianapolis     INDIANA     46204       Relationship:     Executive Officer X Director     Promoter       Clarification of Response (if Necessary):     Middle Name     Middle Name       Torendle, M.D.     August     J.     Street Address 2       Medpace, Inc.     5375 Medpace Way     ZIP/PostalCode       City     State/Province/Country     ZIP/PostalCode       Chromati     OHIO     45227       Relationship:     Executive Officer X Director     Promoter       Clarification of Response (if Necessary):     ZIP/PostalCode       Chromati     OHIO     45227       Relationship:     Executive Officer X Director     Promoter       Clarification of Response (if Necessary):     ZIP/PostalCode       Last Name     First Name     Middle Name	Richards		
CityState/Province/CountryZIP/PostalCodeLos AngelesCALLFORNIA90067Relationship:Executive Officer X DirectorPromoterClarification of Response (if Necessary):Middle NameTorresS.EdwardTorresS.EdwardStreet Address 1Street Address 2Lilly Ventures; 115 W Washington StreetSuite 1680 - SouthStreetCityState/Province/CountryZIP/PostalCodeIndianapolisINDLANA46204Relationship:Executive Officer X DirectorPromoterClarification of Response (if Necessary):J.Street Address 2Medpace, Inc.5375 Medpace WayZIP/PostalCodeClarification of Response (if Necessary):J.Street Address 2Medpace, Inc.5375 Medpace WayZIP/PostalCodeClarification of Response (if Necessary):Street Address 2Middle NameClarification of Response (if Necessary):Street Address 2ZIP/PostalCodeClarification of Response (if Necessary):ZIP/PostalCodeZIP/PostalCodeClarification of Response (if Necessary):Street Address 2ZIP/PostalCodeClarification of Response (if Necessary):Street Address 2ZIP/PostalCodeClarification of Response (if Necessa			
Los Angeles     CALIFORNIA     90067       Relationship:     Executive Officer X Director     Promoter       Clarification of Response (if Necessary):     Middle Name       Torres     S.     Edward       Street Address 1     Street Address 2       Lilly Ventures, 115 W Washington     Suite 1680 - South       City     State/Province/Country     ZIP/PostalCode       Indianapolis     INDLANA     46204       Relationship:     Executive Officer X Director     Promoter       Clarification of Response (if Necessary):     J.     Street Address 1       Street Address 1     Street Address 2     Middle Name       Torendle, M.D.     August     J.       Street Address 1     Street Address 2     Middle Name       Clarification of Response (if Necessary):     ZIP/PostalCode     City       Clarification of Response (if Necessary):     ZIP/PostalCode     ZIP/PostalCode       Clarification of Response (if Necessary):     ZIP/PostalCode <t< td=""><td></td><td>5</td><td></td></t<>		5	
Relationship: Executive Officer X Director Promoter         Middle Name         Torres       S.       Edward         Street Address 1       Street Address 2         Lilly Ventures, 115 W Washington       Suite 1680 - South         City       State/Province/Country       ZIP/PostalCode         Indianapolis       INDLANA       46204         Relationship: Executive Officer X Director Promoter         Clarification of Response (if Necessary):         Middle Name       Middle Name         Torende, M.D.       August       J.         Street Address 2         Medpace, Inc.       5375 Medpace Way         City       State/Province/Country       ZIP/PostalCode         Clarification of Response (if Necessary):         Last Name       Middle Name         Medpace Way       ZIP/PostalCode         Clarification of Response (if Necessary):         Last Name       Middle Name         Waldstrom       Mato         Stree	-		
Clarification of Response (if Necessary):       Last Name     First Name     Middle Name       Torres     S.     Edward       Street Address 1     Street Address 2       Lilly Ventures, 115 W Washington     Suite 1680 - South       Street     City     State/Province/Country     ZIP/PostalCode       Indianapolis     INDIANA     46204       Relationship:     Executive Officer X Director     Promoter       Clarification of Response (if Necessary):     Middle Name       Toendle, M.D.     August     J.       Street Address 1     Street Address 2       Medpace, Inc.     5375 Medpace Way     ZIP/PostalCode       City     State/Province/Country     ZIP/PostalCode       Cincinnati     OHIO     45227       Relationship:     Executive Officer X Director     Promoter       Clarification of Response (if Necessary):     ZIP/PostalCode       City     State/Province/Country     ZIP/PostalCode       Clarification of Response (if Necessary):     ZIP/PostalCode     Edward       Last Name     First Name     Middle Name       Value     Street Address 2     Edward       Last Name     First Name     Middle Name       Value     Industry Group     State/Province/Country     ZIP/PostalCode       Derver     COLORADO	C C		90067
Last Name     First Name     Middle Name       Torres     S.     Edward       Street Address 1     Street Address 2       Lilly Ventures, 115 W Washington     Suite 1680 - South       Street     City     State/Province/Country     ZIP/PostalCode       Indianapolis     INDIANA     46204       Relationship:     Executive Officer X Director     Promoter       Clarification of Response (if Necessary):     Middle Name       Troendle, M.D.     August     J.       Street Address 1     Street Address 2       Medpace, Inc.     5375 Medpace Way     ZIP/PostalCode       City     State/Province/Country     ZIP/PostalCode       Cincinnati     OHIO     45227       Relationship:     Executive Officer X Director     Promoter       Clarification of Response (if Necessary):     East Name     Middle Name       City     State/Province/Country     ZIP/PostalCode       Clarification of Response (if Necessary):     East Name     Middle Name       Wahlstrom     Mats     Street Address 2     Econard Capital, LLC       Leonard Capital, LLC     1225 Seventeenth Street, Suite 1750     ZIP/PostalCode       City     State/Province/Country     ZIP/PostalCode       Denver     COLORADO     80202       Relationship:	<b>Relationship:</b> Executive Officer X	Director Promoter	
TorresS.EdwardStreet Address 1Street Address 2Lilly Ventures, 115 W Washington StreetSuite 1680 - SouthCityState/Province/Country PromoterZIP/PostalCodeIndianapolisINDIANA46204Relationship:Executive Officer X DirectorPromoterClarification of Response (if Necessary):IndianapoleMiddle NameLast NameFirst NameMiddle NameTorendle, M.D.AugustJ.Street Address 1Street Address 2Medpace, Inc.5375 Medpace WayZIP/PostalCodeCityState/Province/CountryZIP/PostalCodeCityState/Province/CountryZIP/PostalCodeCityState/Province/CountryZIP/PostalCodeCityState/Province/CountryZIP/PostalCodeCityState/Province/CountryZIP/PostalCodeCityState/Province/CountryZIP/PostalCodeCityState/Province/CountryZIP/PostalCodeCarification of Response (if Necessary):Street Address 2Leonard Capital, LLC1225 Seventeenth Street, Suite 1750ZIP/PostalCodeCityState/Province/CountryState/Province/CountryZIP/PostalCodePenverCOLORADO80202Relationship:Carification of Response (if Necessary):Venter Address 2State Address 1CityState/Province/CountryZIP/PostalCodeCityState/Province/CountryState/Province/CountryQuinteringCOLORADO80202Relatio	Clarification of Response (if Necessa	ry):	
Street Address 1Street Address 2Lilly Ventures, 115 W Washington StreetSuite 1680 - SouthStreetCityState/Province/Country PromoterZIP/PostalCodeIndianapolisINDIANA46204Relationshipi:Executive Officer X Director PromoterPromoterClarification of Response (if Necessary):First NameMiddle NameTroendle, M.D.AugustJ.Street Address 1Street Address 2Medpace, Inc.5375 Medpace Way State/Province/CountryZIP/PostalCodeCityState/Province/CountryZIP/PostalCodeCityState/Province/CountryStreetRelationshipi:Executive Officer X DirectorPromoterClarification of Response (if Necessary):First NameMiddle NameWalhstromMatsStreet Address 2Leonard Capital, LLC1225 Seventeenth Street, Suite 1750 CityStreet Address 2Leonard Capital, LLCPromoter80202Relationship:Executive Officer X DirectorPromoterCityState/Province/CountryZIP/PostalCodeDenverCOLORADO80202Relationship:Executive Officer X DirectorAddressary:First NameKetalingAddressary:Fir	Last Name		
Lilly Ventures, 115 W Washington Street     Suite 1680 - South       City     State/Province/Country     ZIP/PostalCode       Indianapolis     INDIANA     46204       Relationship:     Executive Officer X Director     Promoter       Clarification of Response (if Necessary):     Middle Name       International Street Address 1       Street Address 1     Street Address 2       Street Address 1     Street Address 2       Medpace, Inc.     5375 Medpace Way     ZIP/PostalCode       City     State/Province/Country     ZIP/PostalCode       Cincinnati     OHIO     45227       Relationship:     Executive Officer X Director     Promoter       Clarification of Response (if Necessary):     IIP/PostalCode       Clarification of Response (if Necessary):     Street Address 1     Street Address 2       Last Name     First Name     Middle Name       Wahlstrom     Mats     Street Address 1     Street Address 2       Leonard Capital, LLC     1225 Seventeenth Street, Suite 1750     ZIP/PostalCode       City     State/Province/Country     ZIP/PostalCode       Denver     COLORADO     80202       Relationship:     Executive Officer X Director     Promoter       Clarification of Response (if Necessary):     IIP/PostalCode       Denver			Edward
Street     City     State/Province/Country     ZIP/PostalCode       Indianapolis     INDIANA     46204       Relationship:     Executive Officer X Director     Promoter       Clarification of Response (if Necessary):     Middle Name       Intervince/Country       Last Name     First Name     Middle Name       Troendle, M.D.     August     J.       Street Address 1     Street Address 2       Medpace, Inc.     5375 Medpace Way       City     State/Province/Country     ZIP/PostalCode       Cincinnati     OHIO     45227       Relationship:     Executive Officer X Director     Promoter       Clarification of Response (if Necessary):     Image: Street Address 1     Street Address 2       Last Name     First Name     Middle Name       Wahlstrom     Mats     Street Address 1     Street Address 2       Leonard Capital, LLC     1225 Seventeenth Street, Suite 1750     City     State/Province/Country     ZIP/PostalCode       Denver     COLORADO     80202       Relationship:     Executive Officer X Director     Promoter       Clarification of Response (if Necessary):     Image: Street Address 2     Image: Street Address 3       Leonard Capital, LLC     1225 Seventeenth Street, Suite 1750     Street Address 1     Street Address 4 <td></td> <td>Street Address 2</td> <td></td>		Street Address 2	
Indianapolis INDIANA 46204 Relationship: Executive Officer X Director Promoter Clarification of Response (if Necessary): Last Name     First Name     Middle Name       Troendle, M.D.     August     J.       Street Address 1     Street Address 2       Medpace, Inc.     5375 Medpace Way     ZIP/PostalCode       City     State/Province/Country     ZIP/PostalCode       Cincinnati     OHIO     45227       Relationship:     Executive Officer X Director     Promoter       Clarification of Response (if Necessary):     Middle Name       Last Name     First Name     Middle Name       Wahlstrom     Mats     Street Address 2       Leonard Capital, LLC     1225 Seventeenth Street, Suite 1750     ZIP/PostalCode       Opriver     COLORADO     80202       Relationship:     Executive Officer X Director     Promoter       Clarification of Response (if Necessary):     ZIP/PostalCode     SIP       Leonard Capital, LLC     1225 Seventeenth Street, Suite 1750     ZIP/PostalCode       Denver     COLORADO     80202       Relationship:     Executive Officer X Director     Promoter       Clarification of Response (if Necessary):     J.     J.       4. Industry Group     Health Care     Retailing	Street	Suite 1680 - South	
Relationship: Executive Officer X Director Promoter         Clarification of Response (if Necessary):         Middle Name         Torendle, M.D.       August       J.         Street Address 1       Street Address 2         Medpace, Inc.       5375 Medpace Way       City       State/Province/Country       ZIP/PostalCode         Cincinnati       OHIO       45227         Relationship:       Executive Officer X Director       Promoter         City       Street Address 2         City City Name       Middle Name         City State/Province/Country       ZIP/PostalCode         City State/Province/Country       ZIP/PostalCode         Colspan="2">City State/Province/Country       ZIP/PostalCode         City State/Province/Country       ZIP/PostalCode         Waldstrom       Mats         Street Address 2       Leonard Capital, LLC       1225 Seventeenth Street, Suite 1750       Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Street Address 2       Leonard Capital, LLC	-		
Clarification of Response (if Necessary):       Last Name     First Name     Middle Name       Troendle, M.D.     August     J.       Street Address 1     Street Address 2       Medpace, Inc.     5375 Medpace Way       City     State/Province/Country     ZIP/PostalCode       Cincinnati     OHIO     45227       Relationship:     Executive Officer X Director     Promoter       Clarification of Response (if Necessary):     Image: Construct of the construction of Response (if Necessary):       Last Name     First Name     Middle Name       Wahlstrom     Mats     Street Address 2       Leonard Capital, LLC     1225 Seventeenth Street, Suite 1750     City       City     State/Province/Country     ZIP/PostalCode       Denver     COLORADO     80202       Relationship:     Executive Officer X Director     Promoter       Clarification of Response (if Necessary):     Image: Color Rabo     80202       Penver     COLORADO     80202       Relationship:     Executive Officer X Director     Promoter       Clarification of Response (if Necessary):     Image: Color Rabo     80202       Agriculture     Health Care     Retailing	-	INDIANA	46204
Last Name     First Name     Middle Name       Troendle, M.D.     August     J.       Street Address 1     Street Address 2       Medpace, Inc.     5375 Medpace Way       City     State/Province/Country     ZIP/PostalCode       Cincinnati     OHIO     45227       Relationship:     Executive Officer X Director     Promoter       Clarification of Response (if Necessary):     Middle Name       Mats     Street Address 1     Street Address 2       Leonard Capital, LLC     1225 Seventeenth Street, Suite 1750     ZIP/PostalCode       Oury     State/Province/Country     ZIP/PostalCode       Denver     COLORADO     80202       Relationship:     Executive Officer X Director     Promoter       Clarification of Response (if Necessary):     4. Industry Group     4. Industry Group	<b>Relationship:</b> Executive Officer X	Director Promoter	
Treendle, M.D.AugustJ.Street Address 1Street Address 2Medpace, Inc.5375 Medpace WayCityState/Province/CountryZIP/PostalCodeCincinnatiOHIO45227Relationship:Executive Officer X DirectorPromoterClarification of Response (if Necessary):Middle NameWahlstromMatsStreet Address 1Street Address 2Leonard Capital, LLC1225 Seventeenth Street, Suite 1750CityState/Province/CountryZIP/PostalCodeDenverCOLORADO80202Relationship:Executive Officer X DirectorPromoterClarification of Response (if Necessary):Health CareRetailing	Clarification of Response (if Necessa	ry):	
Street Address 1     Street Address 2       Medpace, Inc.     5375 Medpace Way       City     State/Province/Country     ZIP/PostalCode       Cincinnati     OHIO     45227       Relationship:     Executive Officer X Director     Promoter       Clarification of Response (if Necessary):     First Name     Middle Name       Wahlstrom     Mats     Street Address 2       Leonard Capital, LLC     1225 Seventeenth Street, Suite 1750     City       City     State/Province/Country     ZIP/PostalCode       Denver     COLORADO     80202       Relationship:     Executive Officer X Director     Promoter		First Name	
Medpace, Inc.     5375 Medpace Way       City     State/Province/Country     ZIP/PostalCode       Cincinnati     OHIO     45227       Relationship:     Executive Officer X Director     Promoter       Clarification of Response (if Necessary):     Image: Street Address 1     First Name     Middle Name       Maths     Street Address 1     Street Address 2       Leonard Capital, LLC     1225 Seventeenth Street, Suite 1750     ZIP/PostalCode       Denver     COLORADO     80202       Relationship:     Executive Officer X Director     Promoter		-	J.
City     State/Province/Country     ZIP/PostalCode       Cincinnati     OHIO     45227       Relationship:     Executive Officer X Director     Promoter       Clarification of Response (if Necessary):			
Cincinnati OHIO 45227 Relationship: Executive Officer X Director Promoter Clarification of Response (if Necessary): Last Name First Name Middle Name   Wahlstrom Mats   Street Address 1 Street Address 2   Leonard Capital, LLC 1225 Seventeenth Street, Suite 1750   City State/Province/Country   Denver COLORADO   80202   Relationship:   Executive Officer X Director   Promoter   Clarification of Response (if Necessary):	-	I U	
Relationship:       Executive Officer X Director       Promoter         Clarification of Response (if Necessary):       First Name       Middle Name         Last Name       First Name       Middle Name         Wahlstrom       Mats       Street Address 1       Street Address 2         Leonard Capital, LLC       1225 Seventeenth Street, Suite 1750       ZIP/PostalCode         Denver       COLORADO       80202         Relationship:       Executive Officer X Director       Promoter         Clarification of Response (if Necessary):       Health Care       Retailing	<sup>c</sup>	-	
Clarification of Response (if Necessary):       Last Name     First Name     Middle Name       Wahlstrom     Mats       Street Address 1     Street Address 2       Leonard Capital, LLC     1225 Seventeenth Street, Suite 1750       City     State/Province/Country       ZIP/PostalCode       Denver     COLORADO       Relationship:     Executive Officer X Director       Promoter     Clarification of Response (if Necessary):			45227
Last Name     First Name     Middle Name       Wahlstrom     Mats     Street Address 1     Street Address 2       Leonard Capital, LLC     1225 Seventeenth Street, Suite 1750     ZIP/PostalCode       City     State/Province/Country     ZIP/PostalCode       Denver     COLORADO     80202       Relationship:     Executive Officer X Director     Promoter       Clarification of Response (if Necessary):     4. Industry Group       Agriculture     Health Care     Retailing	<b>Relationship:</b> Executive Officer X	Director Promoter	
Wahlstrom Mats   Street Address 1 Street Address 2   Leonard Capital, LLC 1225 Seventeenth Street, Suite 1750   City State/Province/Country   City State/Province/Country   Denver COLORADO   Relationship: Executive Officer X   Promoter Relationship:	Clarification of Response (if Necessa	ry):	
Street Address 1Street Address 2Leonard Capital, LLC1225 Seventeenth Street, Suite 1750CityState/Province/CountryZIP/PostalCodeDenverCOLORADO80202Relationship:Executive Officer X DirectorPromoterClarification of Response (if Necessary):			Middle Name
Leonard Capital, LLC 1225 Seventeenth Street, Suite 1750   City State/Province/Country   Denver COLORADO   Relationship: Executive Officer X Director Promoter Clarification of Response (if Necessary): 4. Industry Group Agriculture Health Care Retailing			
CityState/Province/CountryZIP/PostalCodeDenverCOLORADO80202Relationship:Executive Officer X DirectorPromoterClarification of Response (if Necessary):Clarification of Response (if Necessary):4. Industry GroupHealth CareRetailing			
Denver COLORADO 80202 Relationship: Executive Officer X Director Promoter Clarification of Response (if Necessary): 4. Industry Group Agriculture Health Care Retailing	-		
Relationship:       Executive Officer X Director       Promoter         Clarification of Response (if Necessary):	•	5	
Clarification of Response (if Necessary): 4. Industry Group Agriculture Health Care Retailing			00202
4. Industry Group Agriculture Health Care Retailing	<b>Relationship:</b> Executive Officer X	Director Promoter	
Agriculture Health Care Retailing	Clarification of Response (if Necessa	ry):	
	4. Industry Group		
	Agriculture	Health Caro	
	0		Xetaiiiig

**Commercial Banking** Health Insurance Insurance Hospitals & Physicians Investing Pharmaceuticals **Investment Banking** Pooled Investment Fund X Other Health Care Is the issuer registered as Manufacturing an investment company under **Real Estate** the Investment Company Commercial Act of 1940? Construction Yes No Other Banking & Financial Services **REITS & Finance Business Services** Residential Energy Other Real Estate **Coal Mining Electric Utilities Energy Conservation Environmental Services** Oil & Gas Other Energy

Restaurants Technology Computers Telecommunications Other Technology Travel Airlines & Airports Lodging & Conventions Tourism & Travel Services Other Travel

### 5. Issuer Size

Revenue Range	OR	Aggregate Net Asset Value Range
No Revenues		No Aggregate Net Asset Value
\$1 - \$1,000,000		\$1 - \$5,000,000
\$1,000,001 - \$5,000,000		\$5,000,001 - \$25,000,000
\$5,000,001 - \$25,000,000		\$25,000,001 - \$50,000,000
\$25,000,001 - \$100,000,000		\$50,000,001 - \$100,000,000
Over \$100,000,000		Over \$100,000,000
X Decline to Disclose		Decline to Disclose
Not Applicable		Not Applicable

6. Federal Exemption(s) and Exclusion(s) Claimed (select all that apply)

Rule 504(b)(1) (not (i), (ii) or (iii))	Rule 505	
Rule 504 (b)(1)(i)	X Rule 506	
Rule 504 (b)(1)(ii)	Securities Act Sectio	n 4(5)
Rule 504 (b)(1)(iii)	Investment Company	v Act Section 3(c)
	Section 3(c)(1)	Section 3(c)(9)
	Section 3(c)(2)	Section 3(c)(10)
	Section 3(c)(3)	Section 3(c)(11)
	Section 3(c)(4)	Section 3(c)(12)
	Section 3(c)(5)	Section 3(c)(13)
	Section 3(c)(6)	Section 3(c)(14)
	Section 3(c)(7)	

#### 7. Type of Filing

X New Notice Date of First Sale 2013-07-15 First Sale Yet to Occur Amendment

## 8. Duration of Offering

Does the Issuer intend this offering to last more than one ye	ear? Yes X No	
9. Type(s) of Securities Offered (select all that apply)		
Equity X Debt X Option, Warrant or Other Right to Acquire Another Secu X Security to be Acquired Upon Exercise of Option, Warra Other Right to Acquire Security	Pooled Investment Fund Interests Tenant-in-Common Securities mit or Other (describe)	
10. Business Combination Transaction		
Is this offering being made in connection with a business co a merger, acquisition or exchange offer?	ombination transaction, such as Yes X No	
Clarification of Response (if Necessary):		
11. Minimum Investment		
Minimum investment accepted from any outside investor \$	50 USD	
12. Sales Compensation		
Recipient	Recipient CRD Number X None	
N/A	None	
(Associated) Broker or Dealer X None	(Associated) Broker or Dealer CRD Number X None	1
None	None	
Street Address 1	Street Address 2	
N/A	N/A	
City	State/Province/Country	ZIP/Postal Code
N/A	Unknown	00000
State(s) of Solicitation (select all that apply) Check "All States" or check individual States	Foreign/non-US	
CALIFORNIA COLORADO INDIANA OHIO		

## 13. Offering and Sales Amounts

Total Offering Amount\$40,001,000 USD orIndefiniteTotal Amount Sold\$28,000,700 USDorIndefiniteTotal Remaining to be Sold\$12,000,300 USD orIndefinite

Clarification of Response (if Necessary):

14. Investors

Select if securities in the offering have been or may be sold to persons who do not qualify as accredited investors, and enter the number of such non-accredited investors who already have invested in the offering. Regardless of whether securities in the offering have been or may be sold to persons who do not qualify as accredited investors, enter the total number of investors who already have invested in the offering:

15. Sales Commissions & Finder's Fees Expenses

Provide separately the amounts of sales commissions and finders fees expenses, if any. If the amount of an expenditure is not known, provide an estimate and check the box next to the amount.

6

Finders' Fees \$0 USD Estimate

Clarification of Response (if Necessary):

16. Use of Proceeds

Provide the amount of the gross proceeds of the offering that has been or is proposed to be used for payments to any of the persons required to be named as executive officers, directors or promoters in response to Item 3 above. If the amount is unknown, provide an estimate and check the box next to the amount.

\$0 USD Estimate

Clarification of Response (if Necessary):

Signature and Submission

Please verify the information you have entered and review the Terms of Submission below before signing and clicking SUBMIT below to file this notice.

## Terms of Submission

In submitting this notice, each issuer named above is:

- Notifying the SEC and/or each State in which this notice is filed of the offering of securities described and undertaking to furnish them, upon written request, in the accordance with applicable law, the information furnished to offerees.\*
- Irrevocably appointing each of the Secretary of the SEC and, the Securities Administrator or other legally designated officer of the State in which the issuer maintains its principal place of business and any State in which this notice is filed, as its agents for service of process, and agreeing that these persons may accept service on its behalf, of any notice, process or pleading, and further agreeing that such service may be made by registered or certified mail, in any Federal or state action, administrative proceeding, or arbitration brought against the issuer in any place subject to the jurisdiction of the United States, if the action, proceeding or arbitration (a) arises out of any activity in connection with the offering of securities that is the subject of this notice, and (b) is founded, directly or indirectly, upon the provisions of: (i) the Securities Act of 1933, the Securities Exchange Act of 1934, the Trust Indenture Act of 1939, the Investment Company Act of 1940, or the Investment Advisers Act of 1940, or any rule or regulation under any of these statutes, or (ii) the laws of the State in which the issuer maintains its principal place of business or any State in which this notice is filed.
- Certifying that, if the issuer is claiming a Rule 505 exemption, the issuer is not disqualified from relying on Rule 505 for one of the reasons stated in Rule 505(b)(2)(iii).

Each Issuer identified above has read this notice, knows the contents to be true, and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

For signature, type in the signer's name or other letters or characters adopted or authorized as the signer's signature.

Issuer	Signature	Name of Signer	Title	Date
Coherus BioSciences, Inc.	/s/ Alan C. Mendelson	Alan C. Mendelson	Secretary	2013-07-23

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.

\* This undertaking does not affect any limits Section 102(a) of the National Securities Markets Improvement Act of 1996 ("NSMIA") [Pub. L. No. 104-290, 110 Stat. 3416 (Oct. 11, 1996)] imposes on the ability of States to require information. As a result, if the securities that are the subject of this Form D are "covered securities" for purposes of NSMIA, whether in all instances or due to the nature of the offering that is the subject of this Form D, States cannot routinely require offering materials under this undertaking or otherwise and can require offering materials only to the extent NSMIA permits them to do so under NSMIA's preservation of their anti-fraud authority.