FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549	
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* HEALY JAMES						2. Issuer Name and Ticker or Trading Symbol Coherus BioSciences, Inc. [CHRS]								5. Relationship of Reporting Person(s) to Iss (Check all applicable) X Director 10% Ow						
		st) (N NVESTMENTS ROAD, BLDG. 4	1			3. Date of Earliest Transaction (Month/Day/Year) 09/29/2020											Officer (give title below)		r (specify v)	
(Street)	PARK CA	A 9	4025 Zip)		4. If <i>i</i>	Line)										ridual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Table	I - No	n-Deriva	tive	Secui	rities	Acc	quirec	d, Di	sposed of	, or B	enefic	ially	Own	ed				
Date			2. Transacti Date (Month/Day	Year) Exec		Deemed ecution Date, ny onth/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4 5)			5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
							Code	v	Amount	(A) or (D)	Price	Turinggas		ion(s)	}		(111511.4)			
Common	n Stock, \$0.0001 par value 09/29/202				020	20			J ⁽¹⁾		950,000	D	\$0.0	00	0			I	See Footnote ⁽²⁾	
Common	Stock, \$0.0	001 par value		09/29/20	020				J ⁽¹⁾		213,546	A	\$0.0	00	0 434,555 I Se					
Common	Stock, \$0.0	001 par value													70,086 D					
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	eemed tion Date, n/Day/Year)		4. 5. Number of Code (Instr. Derivative			Expira	e Exer ation D h/Day/	Year)	7. Title and Amount of Securities Underlying Derivative Security (Instr 3 and 4)		8. Price of Derivative Security (Instr. 5)		9. Number derivative Securities Beneficial Owned Following Reported Transact (Instr. 4)	e Owners s Form: ally Direct (I or Indire g (I) (Instr		Beneficial Ownership ect (Instr. 4)	
					Code	Code V (A) (D)		(D)	Date Exerc			of Shares								

Explanation of Responses:

- 1. Sofinnova Venture Partners VII, L.P. distributed an aggregate of 950,000 shares of common stock of the issuer to its limited and general partners for no consideration on September 29, 2020. Includes pro rata allocation of such shares distributed to Sofinnova Management VII, LLC.
- 2. The shares are held by Sofinnova Venture Partners VII, L.P. The Reporting Person is one of the managing members of the general partner of Sofinnova Venture Partners VII, L.P., and as such, may be deemed to share voting and investment power with respect to such securities. The Reporting Person disclaims beneficial ownership of the reported securities, except to the extent of his proportionate pecuniary interest in Sofinnova Ventures Partners VII, L.P.
- 3. The shares are held by Sofinnova Management VII, LLC. The Reporting Person disclaims beneficial ownership of the reported securities, except to the extent of his proportionate pecuniary interest in Sofinnova Management VII, LLC.

/s/ Jean-Frederic Viret, as Attorney-in-Fact for James I. 10/01/2020

Healy, M.D., Ph.D.

** Signature of Reporting Person Date

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

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

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

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