FORM 4

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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STATEMENT (OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPROVAL								
OMB Number: 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* Wahlstrom Mats					2. Issuer Name and Ticker or Trading Symbol Coherus BioSciences, Inc. [CHRS]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
<u>wanist</u>	rom mais			Concrus Brosciences, me. [Cinto]							X Directo	or		10% Ov	vner					
(Last)	(Fi	irst)	(Middle)	3. Date of Earliest 02/01/2024					Transaction (Month/Day/Year)					Officer below)	(give title		Other (s below)	specify		
C/O COI	HERUS BIO	OSCIENCES, IN	IC.		4 1	f Ame	endme	nt Date	of Origin:	al File	d (Month/Da	av/Year)	6.1	6. Individual or Joint/Group Filing (Check Applicable						
333 TW	N DOLPHI	IN DRIVE, SUI	ΓE 600		'	. ,	Silaillo	nt, Date (or origini	21 1 110	a (Monta ii Be	ay, rour,		Line)						
333 TWIN DOLITIN DIG VE, SOTTE 600									X Form filed by One Reporting Person											
(Street)	NOD.														Form filed by More than One Reporting Person					
CITY	C.	A	94065		Rı	ule	10b	5-1(c)	Tran	sac	tion Ind	ication								
(City)	(S	tate)	(Zip)								action was nons of Rule 1			ract, instructio n 10.	n or written p	plan th	at is intended	i to		
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Trans				saction	ction 2A. Deemed					4. Securi	ties Acquir	ed (A) or	or 5. Amount of				7. Nature			
				Date (Month	/Day/Ye	Execution Date, if any (Month/Day/Year)			Code	action (Instr		d Of (D) (Ins	tr. 3, 4 and	Securitie Benefici	ally	(D) or Indirect I		of Indirect Beneficial		
									r) 8)					Owned F Reported	ollowing	(I) (In		Ownership (Instr. 4)		
								Code	v	Amount	(A) o (D)	Price	Transact	nsaction(s) str. 3 and 4)			(
Common Stock 02			02/0	1/202	2024		M ⁽¹⁾		14,99	14,997 A \$		7 54	54,997		D					
Common Stock 02/0			02/0	1/202	/2024		M ⁽¹⁾		44,99	44,991 A		7 99	99,988		D					
		-	Table II -											Owned						
						Call	-				converti									
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	Date,	4. Transa Code (l 8)		on of I		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amou of Securities Underlying Derivative Securit (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
													Amount							
									.		F141-		Number							
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	of Shares							
Stock Option (Right to Buy)	\$1.667	02/01/2024			М			14,997	(2)		03/10/2024	Common Stock	14,997	\$0	0		D			
Stock Option (Right to Buy)	\$1.667	02/01/2024			М			44,991	(2)		03/10/2024	Common Stock	44,991	\$0	0		D			

Explanation of Responses:

- 1. This represents a cash exercise-and-hold transaction where cash was paid by the Reporting Person for the exercise price.
- 2. The option is fully vested and exercisable.

/s/ Bryan McMichael, as Attorney-in-Fact for Mats

02/05/2024

Wahlstrom

** 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.