| SEC Form 4 | |
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Stock Option

Buy)

(Right to

Remarks:

\$17.17

Explanation of Responses:

FORM 4

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

OMB APPROVAL

Γ

| Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). | | NT OF CHANGES IN BENEFICIAL O | OMB Number: 3235-0 Estimated average burden hours per response: | | |
|--|------------------|--|---|-----------------------|-------------------|
| | | or Section 30(h) of the Investment Company Act of 1940 | | | |
| 1. Name and Address of Reporting Person [*] Watler Peter K. | | 2. Issuer Name and Ticker or Trading Symbol Coherus BioSciences, Inc. [CHRS] | all applicabl Director Officer (giv | ive title 0ther (spec | |
| (Last)(First)(COHERUS BIOSCIENCES, INC.333 TWIN DOLPHIN DRIVE, SUIT | Middle) E 600 | 3. Date of Earliest Transaction (Month/Day/Year) 05/11/2016 | below) Chie | f Technical O | below) Officer |
| | | | | | |

| OMB Number: | 3235-0287 |
|-----------------------|-----------|
| Estimated average bur | den |
| hours per response: | 0.5 |

| | TWIN DOLPHIN DRIVE, SUITE 600 | | | | | | | | | | | | | | | |
|---|---|--|--|-----------------|--|--|--|---------|---|---|------------------------|---|--------------------------------|---|--|--|
| (Street) REDWO CITY | OD C. | A | 94065 | 4. If Am | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | |
| (City) | (S | tate) | (Zip) | | | | | | | | | | | | | |
| | | Tab | le I - Non-D | erivative S | ecurities Ac | quired | Dis | oosed o | of, or | r Bene | ficiall | y Owned | | | | |
| Date | | | Transaction te onth/Day/Year) | Execution Date, | | 3. Transaction Code (Instr.4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)8) | | | | 5. Amour Securitie Beneficia Owned F Reported | s ally following | Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | Code | v | Amount | | (A) or (D) | Price | Transaction(| | | | (|
| | | - | | | curities Acq Is, warrants | , | | | , | | - | Owned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date if any (Month/Day/Yea | Code (Instr | | Expiratio | 6. Date Exercisat Expiration Date (Month/Day/Year) | | 7. Title and Am of Securities Underlying Derivative Secu (Instr. 3 and 4) | | ecurity | 8. Price of Derivative Security (Instr. 5) | ive derivative y Securities | | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |

Date Exercisable

(1)

1. The underlying shares subject to the option vest and become exercisable as to 1/48th of the total number of shares subject to the option in successive, equal monthly installments measured from May 6, 2016,

Expiration Date

05/11/2026

Title

Commor

Stock

/s/ Jean-Frederic Viret, as Attorney in Fact for Peter K. Watler

Amount or Number

of Shares

78,472

\$0.00

05/13/2016

78,472

D

** Signature of Reporting Person Date

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

subject to Reporting Person's continued service relationship with the Issuer on each such vesting date.

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

05/11/2016

** 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.

(A)

78,472

(D)

v

Code

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