SEC Form 4	
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

OMB APPROVAL

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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

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1. Name and Address of Reporting Person [*] Guyer William (Last) (First) (Middle) C/O CORCEPT THERAPEUTICS		ddle)	2. Issuer Name and Ticker or Trading Symbol <u>CORCEPT THERAPEUTICS INC</u> [CORT] 3. Date of Earliest Transaction (Month/Day/Year) 12/01/2023	5. Rela (Check	son(s) to Issuer 10% Owner Other (specify below) nt Officer		
INCORPORATED 149 COMMONWE (Street)			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line) X	g (Check Applicable orting Person n One Reporting		
(City) (St	A 94 tate) (Zij	025 	Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant t satisfy the affirmative defense conditions of Rule 10b5-1(c). See I			n that is intended to	
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned							

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)			4. Securities Disposed Of			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	Transaction(s) (Instr. 3 and 4)		(1150. 4)
Common Stock	12/01/2023		Α		609(1)	Α	\$25.97 ⁽²⁾	6,034 ⁽³⁾⁽⁴⁾	D	
Common Stock	12/01/2023		Α		609(5)	Α	\$0.00	6,643 ⁽⁴⁾	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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expiration Date (Month/Day/Year)			e and int of ities rlying ative ity (Instr. 4)	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)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

1. The Reporting Person purchased shares ("Purchase Plan Shares") of the Issuer's common stock pursuant to a purchase plan ("Purchase Plan") established under the Corcept Therapeutics Incorporated 2012 Incentive Award Plan on December 1, 2023.

2. In accordance with the Purchase Plan, the price was established based on the closing price on the day of the purchase.

3. The Form 4 previously filed inadvertently overstated the number of shares held by 319. The number in Column 5 reflects the corrected amount.

4. Includes 1,472 shares underlying unvested restricted stock awards granted to the Reporting Person by the Issuer on March 1, 2023 and 478 shares underlying unvested restricted stock awards granted to the Reporting Person by the Issuer on September 1, 2023. 100% of the shares underlying the restricted stock awards will vest on the one-year anniversary of the grant date provided the Reporting Person satisfies certain requirements.

5. Shares underlie unvested restricted stock awards granted to the Reporting Person by the Issuer under the Purchase Plan. 100% of the shares underlying the restricted stock awards will vest on the oneyear anniversary of the grant date provided the Reporting Person remains the beneficial owner of the Purchase Plan Shares through such one-year anniversary.

Remarks:

The power of attorney under which this form was signed is on file with the Commission.

<u>/s/ Joseph Douglas Lyon, as</u> <u>attorney-in-fact for William</u> <u>Guyer.</u>

** Signature of Reporting Person

12/05/2023

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.

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