FORM 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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ANNUAL STATEMENT OF CHANGES IN BENEFICIAL

OMB APP	OMB APPROVAL									
OMB Number: 3235-0362										
Estimated average burden										
hours per response	. 10									

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to Sec obligat Instruc	STATEMENT OF CHANGES IN BENEF OWNERSHIP						NEFIC	IAL	Es	OMB Number: 3235-0 Estimated average burden hours per response:							
Form 3	B Holdings Rep	orted.												l no	urs per re	esponse:	1.0
Form 4	Transactions	Reported.	File	d pursuant to S or Section 3								of 1934					
1. Name and Address of Reporting Person* Robb Gary Charles					2. Issuer Name and Ticker or Trading Symbol CORCEPT THERAPEUTICS INC						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify						
(Last)	(Fir	st)	(Middle)		1							A below	v)				
	RCEPT THE PORATED	ERAPEUTICS			3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2023						Year)	Chief Business Officer					
149 CON	MMONWE	ALTH DRIVE		4. If Amend	ment,	Date o	of Orig	ginal File	d (Month	n/Day/`	Year)		6. Individual or Joint/Group Filing (Check App				Applicable
(Street) MENLO PARK CA 94025					Lin							Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(Sta	ate)	(Zip)														
		Table	e I - Non-Deriv	ative Secui	rities	Acq	uire	ed, Dis	posed	of, o	or E	Benefici	ally Own	ed			
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	if any		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Dispo Of (D) (Instr. 3, 4 and 5)			or Disposed	5. Amount of Securities Beneficially Owned at end		6. Ownership Form: Direct (D) or		7. Nature of Indirect Beneficial Ownership		
								Amoun	Amount (A)		P	rice	Issuer's Fiscal Year (Instr. 3 and 4)		Indirect (I) (Instr. 4)		(Instr. 4)
Common	Stock		02/22/2023		G		1,175 I		D		\$0.00	19,4	465 ⁽¹⁾	(1) D			
Common Stock												7,	7,700		I :	Custodial account for child ⁽²⁾	
Common Stock										8,	8,700		I :	Custodial account for child ⁽²⁾			
Common Stock												8,	700 I		I :	Custodial account for child ⁽²⁾	
		Та	ıble II - Derivat (e.g., p	ive Securit uts, calls, v										d			
1. Title of Derivative Security (Instr. 3)	itle of locative of Conversion or Exercise (Month/Day/Year) 3. Transaction Date Execution Date, if any			4. 5. Number 6. Da Transaction of Expi		ate Exercisable and iration Date htth/Day/Year) 7. Title and Amount of Securities Underlying Derivative Security (In: 3 and 4)		e and int of ities rlying ative ity (Instr. 4)	8. Price of Derivative Security (Instr. 5) B OFF		9. Number of derivative Securities Beneficially Dire Owned Following Reported Transaction(s) (Instr. 4)		Beneficial Ownership ct (Instr. 4)				
				(A)	(D)	Date Exer	rcisable	Expiration Date		itle	Amount or Number of Shares						

Explanation of Responses:

1. Includes 1,600 shares underlying unvested restricted stock awards granted to the Reporting Person by the Issuer on March 1, 2023, 2,091 shares underlying unvested restricted stock awards granted to the Reporting Person by the Issuer on June 1, 2023, and 500 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

2. These shares are held by a child of the Reporting Person through a custodial account under the Uniform Transfers to Minors Act for which the Reporting Person is custodian.

/s/ Joseph Douglas Lyon, as 02/12/2024 attorney-in-fact for Gary **Charles Robb**

** 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.