

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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

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

| | | |
|--|---|--|
| 1. Name and Address of Reporting Person* <u>SUTTER HILL VENTURES</u> (Last) (First) (Middle) 755 PAGE MILL ROAD, SUITE A-200 (Street) PALO ALTO CA 94304-1005 (City) (State) (Zip) | 2. Issuer Name and Ticker or Trading Symbol <u>CORCEPT THERAPEUTICS INC [CORT]</u> | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director <input checked="" type="checkbox"/> 10% Owner Officer (give title below) Other (specify below) |
| | 3. Date of Earliest Transaction (Month/Day/Year) 10/21/2011 | |
| | | 6. Individual or Joint/Group Filing (Check Applicable Line) <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person |

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) | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) | | | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 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 | | | |
| Common Stock | 10/21/2011 | | j ⁽¹⁾ | | 488,415 | D | \$0.0000 | 5,036,602 | 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. Transaction Code (Instr. 8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (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) | |
|--|--|--------------------------------------|--|--------------------------------|---|--|--------|--|-----------------|---|--|--|---|--|-------|
| | | | | Code | V | (A) | (D) | Date Exercisable | Expiration Date | | | | | | Title |
| Common Stock Warrant | \$2.77 | 10/21/2011 | | j ⁽¹⁾ | | | 4,742 | 03/25/2008 | 03/24/2015 | Common Stock | 4,742 | \$0.0000 | 395,457 | D | |
| Common Stock Warrant | \$2.77 | 10/21/2011 | | j ⁽¹⁾ | | | 30,636 | 03/25/2008 | 03/24/2015 | Common Stock | 30,636 | \$0.0000 | 364,821 | D | |
| Common Stock Warrant | \$2.96 | 10/21/2011 | | j ⁽¹⁾ | | | 27,188 | 04/21/2010 | 04/21/2013 | Common Stock | 27,188 | \$0.0000 | 280,365 | D | |

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|--|
| 1. Name and Address of Reporting Person* <u>SUTTER HILL VENTURES</u> (Last) (First) (Middle) 755 PAGE MILL ROAD, SUITE A-200 (Street) PALO ALTO CA 94304-1005 (City) (State) (Zip) |
| 1. Name and Address of Reporting Person* <u>BAKER G LEONARD JR</u> (Last) (First) (Middle) 755 PAGE MI (Street) PALO ALTO CA 94304-1005 (City) (State) (Zip) |
| 1. Name and Address of Reporting Person* <u>ANDERSON DAVID L</u> |

(Last) (First) (Middle)
[755 PAGE MI](#)

(Street)
[PALO ALTO](#) [CA](#) [94304-1005](#)

(City) (State) (Zip)

1. Name and Address of Reporting Person*
[YOUNGER WILLIAM H JR](#)

(Last) (First) (Middle)
[755 PAGE MI](#)

(Street)
[PALO ALTO](#) [CA](#) [94304-1005](#)

(City) (State) (Zip)

1. Name and Address of Reporting Person*
[COXE TENCH](#)

(Last) (First) (Middle)
[755 PAGE MI](#)

(Street)
[PALO ALTO](#) [CA](#) [94304-1005](#)

(City) (State) (Zip)

1. Name and Address of Reporting Person*
[SANDS GREGORY P](#)

(Last) (First) (Middle)
[755 PAGE MI](#)

(Street)
[PALO ALTO](#) [CA](#) [94304-1005](#)

(City) (State) (Zip)

1. Name and Address of Reporting Person*
[GAITHER JAMES C](#)

(Last) (First) (Middle)
[755 PAGE MI](#)

(Street)
[PALO ALTO](#) [CA](#) [94304-1005](#)

(City) (State) (Zip)

1. Name and Address of Reporting Person*
[SWEET DAVID E](#)

(Last) (First) (Middle)
[755 PAGE MI](#)

(Street)
[PALO ALTO](#) [CA](#) [94304-1005](#)

(City) (State) (Zip)

1. Name and Address of Reporting Person*
[SHEEHAN ANDREW T](#)

(Last) (First) (Middle)
[755 PAGE MI](#)

| | | | |
|--|-----------|----------|------------|
| (Street) | PALO ALTO | CA | 94304-1005 |
| (City) | (State) | (Zip) | |
| 1. Name and Address of Reporting Person* | | | |
| Speiser Michael L | | | |
| (Last) | (First) | (Middle) | |
| 755 PAGE MI | | | |
| (Street) | PALO ALTO | CA | 94304-1005 |
| (City) | (State) | (Zip) | |

Explanation of Responses:

1. Distribution of shares without consideration to Managing Directors of the General Partner of Sutter Hill Ventures, A California Limited Partnership, in accordance with the partnership agreement.

Remarks:

,Multiple Forms Submitted

| | |
|--|----------------------------|
| Robert Yin, by power of attorney | 10/25/2011 |
| Robert Yin, by power of attorney | 10/25/2011 |
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| Robert Yin, by power of attorney | 10/25/2011 |
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| Robert Yin, by power of attorney | 10/25/2011 |
| Robert Yin, by power of attorney | 10/25/2011 |
| Robert Yin, by power of attorney | 10/25/2011 |

** 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.