FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |
|-------------|------|-------|
|-------------|------|-------|

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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

|                                                               | ion 1(b).                                                             | nue. See                                   |             | File           |                                                                               |                                                           |                                                                                                                |                                      |                                                                |                                            | es Exchan<br>npany Act |                                                                                               | 193                                                      | 4                       |                                                     | nours                                                                                                                    | per res                                             | sponse:                                                           | 0.5                                   |
|---------------------------------------------------------------|-----------------------------------------------------------------------|--------------------------------------------|-------------|----------------|-------------------------------------------------------------------------------|-----------------------------------------------------------|----------------------------------------------------------------------------------------------------------------|--------------------------------------|----------------------------------------------------------------|--------------------------------------------|------------------------|-----------------------------------------------------------------------------------------------|----------------------------------------------------------|-------------------------|-----------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|-------------------------------------------------------------------|---------------------------------------|
| 1. Name and Address of Reporting Person*  MAHONEY DAVID L     |                                                                       |                                            |             |                | 2. Issuer Name and Ticker or Trading Symbol CORCEPT THERAPEUTICS INC [ CORT ] |                                                           |                                                                                                                |                                      |                                                                |                                            |                        |                                                                                               | ] (Che                                                   | ck all applic           | tionship of Reportin<br>all applicable)<br>Director |                                                                                                                          | ing Person(s) to Issuer                             |                                                                   |                                       |
| (Last) (First) (Middle) C/O CORCEPT THERAPEUTICS INCORPORATED |                                                                       |                                            |             |                | 3. Date of Earliest Transaction (Month/Day/Year) 05/26/2021                   |                                                           |                                                                                                                |                                      |                                                                |                                            |                        |                                                                                               |                                                          |                         | Officer (give title below)                          |                                                                                                                          | Other (:<br>below)                                  | specify                                                           |                                       |
| 149 COMMONWEALTH DRIVE                                        |                                                                       |                                            |             |                | 4. If Amendment, Date of Original Filed (Month/Day/Year)                      |                                                           |                                                                                                                |                                      |                                                                |                                            |                        |                                                                                               | Individual or Joint/Group Filing (Check Applicable Line) |                         |                                                     |                                                                                                                          |                                                     |                                                                   |                                       |
| (Street) MENLO                                                | PARK C                                                                | Α                                          | 94025       |                |                                                                               |                                                           |                                                                                                                |                                      |                                                                |                                            |                        |                                                                                               |                                                          | 2                       |                                                     | iled by Mor                                                                                                              |                                                     | orting Perso<br>n One Repo                                        | - 1                                   |
| (City)                                                        | (5                                                                    | State)                                     | (Zip)       |                |                                                                               |                                                           |                                                                                                                |                                      |                                                                |                                            |                        |                                                                                               |                                                          |                         |                                                     |                                                                                                                          |                                                     |                                                                   |                                       |
|                                                               |                                                                       | Tak                                        | ole I - Nor | -Deriv         | ativ                                                                          | e Se                                                      | curities                                                                                                       | s Ac                                 | quired,                                                        | Dis                                        | posed o                | f, or Be                                                                                      | ene                                                      | ficiall                 | y Owned                                             |                                                                                                                          |                                                     |                                                                   |                                       |
| Date                                                          |                                                                       |                                            | Date        | :h/Day/Year) i |                                                                               | 2A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Yea |                                                                                                                | Transaction Disposed Code (Instr. 5) |                                                                | ties Acquired (A)<br>I Of (D) (Instr. 3, 4 |                        | (A) or<br>3, 4 and                                                                            | 5. Amour<br>Securitie<br>Beneficia<br>Owned F            | es<br>ally<br>following | Form<br>(D) o                                       |                                                                                                                          | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership |                                                                   |                                       |
|                                                               |                                                                       |                                            |             |                |                                                                               |                                                           |                                                                                                                |                                      | Code V                                                         |                                            | Amount                 | unt (A) or (D)                                                                                |                                                          | Price                   | Reported<br>Transact<br>(Instr. 3 a                 | ion(s)                                                                                                                   |                                                     |                                                                   | (Instr. 4)                            |
|                                                               |                                                                       |                                            | Table II -  |                |                                                                               |                                                           |                                                                                                                |                                      |                                                                |                                            | osed of,<br>onvertil   |                                                                                               |                                                          |                         | Owned                                               |                                                                                                                          | ,                                                   |                                                                   |                                       |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)           | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction<br>Date<br>(Month/Day/Year) | Execution   | Date, T        | I.<br>Transa<br>Code (I                                                       |                                                           | 5. Number<br>of<br>Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D) (Instr.<br>3, 4 and 5) |                                      | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |                                            |                        | 7. Title and Amount<br>of Securities<br>Underlying<br>Derivative Security<br>(Instr. 3 and 4) |                                                          | ecurity                 | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(<br>(Instr. 4) | e<br>S<br>Illy                                      | Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | Beneficial<br>Ownership<br>(Instr. 4) |
|                                                               |                                                                       |                                            |             | C              | Code                                                                          | v                                                         | (A)                                                                                                            | (D)                                  | Date<br>Exercisab                                              |                                            | Expiration<br>Date     | Title                                                                                         | O<br>N<br>O                                              | lumber                  |                                                     |                                                                                                                          |                                                     |                                                                   |                                       |
| Stock<br>Option<br>(Right to<br>Buy)                          | \$21.45                                                               | 05/26/2021                                 |             |                | A                                                                             |                                                           | 20,000                                                                                                         |                                      | (1)                                                            | (                                          | 05/25/2031             | Common<br>Stock                                                                               | 2                                                        | 0,000                   | \$0.00                                              | 20,000                                                                                                                   | 0                                                   | D                                                                 |                                       |

## Explanation of Responses:

 $1.\ Exercisable\ ratably\ in\ equal\ installments\ on\ each\ monthly\ anniversary\ of\ May\ 26,\ 2021\ over\ a\ one-year\ period.$ 

## Remarks:

/s/ Joseph Douglas Lyon, Attorney-in-Fact for David L. 05/28/2021 <u>Mahoney</u>

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.