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 b	urden								
hours ner resnonse.	0.5								

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

1. Name and Address of Reporting Person* MAHONEY DAVID L						2. Issuer Name and Ticker or Trading Symbol CORCEPT THERAPEUTICS INC CORT								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
MAHONE I DAVID L													_ 2	Director	r		10% Owner		
	RCEPT TH	First) HERAPEUTICS					3. Date of Earliest Transaction (Month/Day/Year) 03/25/2008							Officer below)	(give title		Other (sp below)	pecify	
149 COMMONWEALTH DRIVE						4. If Amendment, Date of Original Filed (Month/Day/Year)							6. In	6. Individual or Joint/Group Filing (Check Applicable					
Street) MENLO PARK CA 94025					(Line	Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(State)	(Zip)											. 6.66					
		Та	ble I - Noi	n-Deriv	vativ	ve Se	ecurities	Acc	quired,	Dis	posed of	, or Be	neficially	/ Owned					
1. Title of Security (Instr. 3) 2. Transa Date (Month/D						action 2A. Deemed Execution Date, if any (Month/Day/Year)			Transaction Disposed C		ies Acquired (A) or Of (D) (Instr. 3, 4 and		Beneficia Owned F	s ally ollowing	Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) o	Price	Price Reported Transacti (Instr. 3 a			0	(Instr. 4)	
Common Stock 03/25						5/2008		P		70,6090	1) A	\$2.77	636	,547	I B		By Trust		
			Table II -				curities A							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 Da if any (Month/Day/	ate, T	Code (action Instr.			6. Date Exercise Expiration Date (Month/Day/Yea		te of Securitie		ties ng e Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported	lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)	
				c	Code	v	(A)	(D)	Date Exercisa	sable	Expiration Date	Title	Amount or Number of Shares		Transactio (Instr. 4)	ion(s)			
Stock Option (right to buy)	\$5								(2)		07/20/2014	Common Stock	60,000		60,000)	D		
Stock Option (right to buy)	\$4.95								(3)		03/02/2016	Common Stock	10,000		10,000)	D		
Stock option (right to buy)	\$2.7								(4)		06/11/2017	Common Stock	30,000		30,000		D		
Warrants	\$2.77	03/25/2008	03/25/200	08	P		35,304 ⁽¹⁾		03/25/20	800	03/24/2015	Common	35,304	\$0.125	35,304	4	I	By trust	

Explanation of Responses:

- 1. Acquired from the issuer pursuant to a Common Stock Purchase Agreement dated March 14, 2008.
- 2. Immediately exercisable subject to a right of repurchase by Corcept Therapeutics Incorporated that shall lapse at the rate of 20% of the total option shares on 7/20/2005 and an additional 1.67% of the total option shares on each monthly anniverary of 7/20/2005.
- 3. Exercisable with respect to 25% of the total number of Option Shares one year after 3/2/2006 and with respect to an additional 2.0834% of the total number of Option Shares on the monthly anniversary of 3/2/2006 each month thereafter.
- 4. Exercisable with respect to 8.3334% of the total option shares on each monthly anniversary of June 11, 2007 so that the entirety of the option grant will vest in one year.

Remarks:

/s/ Joseph K. Belanoff, CEO of **Corcept Therapeutics**

03/27/2008

Incorporated attorney-in-fact ** 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.