FORM 5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Machinaton	$D \subset$	205/10
Washington,	D.C.	20549

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	DVAL							
OMB Number:	3235-0362							
Estimated average burden								
hours per response:	1.0							

Form 3 Holdings Reported.

Instruction 1(b)

Eiled nursuant to Section 16(a) of the Securities Eychange Act of 1024

Form 4	Transactions F	eported.	FIR	or Section					ompany A									
1. Name and Address of Reporting Person*					2. Issuer Name and Ticker or Trading Symbol CORCEPT THERAPEUTICS INC [CORT]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner						
(Last) (First) (Middle) C/O CORCEPT THERAPEUTICS INCORPORATED					3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2016						/Year)	Officer (give title Other (spec below) below)						
149 COMMONWEALTH DRIVE				4. If Amen	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) MENLO									X Form filed by One Reporting Person Form filed by More than One Reporting Person									
(City)	(Sta	ate) (2	Zip)															
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Dispose Of (D) (Instr. 3, 4 and 5)				5. Amount of Securities Beneficially Owned at end o		es ally	6. Ownership Form: Direct (D) or	ership : Direct	7. Nature of Indirect Beneficial Ownership			
						Amoui	nt	(A) or (D)	r Price		Issuer's Fiscal Year (Instr. 3 and 4)		Indirect (I) (Instr. 4)		(Instr. 4)			
Common Stock		12/29/2016			G		33	,647	D	5 \$7.29		1,135,673			I	David L. Mahoney and Winnifred C. Ellis 1998 Family Trust		
	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)	of Deriv Secu Acqu (A) o Disp of (D	vative urities ulired or losed o); r. 3, 4 5)		Date Exercisable and piration Date on the post of the		Amo Secu Unde Deriv Secu and	le and unt of rities ritylying rative rity (Instr. 3 1) Amount or Number of Shares			9. Numbe derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e S Illy	10. Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership t (Instr. 4)	

Explanation of Responses:

Remarks:

/s/ Joseph K. Belanoff,

Attorney-in-Fact for David L. 02/14/2017

Mahoney

** Signature of Reporting Person

Date

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

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.

^{*} 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).