FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

0	MB APF	PROVAL						
	OMB Number:							
Estimat	Estimated average burden							
hours p	er response	: 0.5						

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

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* <u>Paperboy Ventures</u> , <u>LLC</u>						2. Issuer Name and Ticker or Trading Symbol CORCEPT THERAPEUTICS INC [ CORT ]									neck all ap	nip of Reportir oplicable) ector	ng Person X	` ,	S Issuer S Owner
(Last) 1875 K S	(Fi	rst) (	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 01/09/2008										Officer (give title below)		Other below)	(specify
(Street) WASHINGTON DC 20006 (City) (State) (Zip)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Lin	e) X For For	ridual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person			
		Tabl	e I - No	n-Deriv	ative	Sec	curitie	s Acc	uired,	Dis	posed o	f, or	Bene	ficia	lly Owr	ed			
1. Title of Security (Instr. 3)  2. Transa Date (Month/D				Execution Date,			3. Transa Code ( 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)				Secu Bene	nount of rities ficially ed Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	nount (A) or		Price	Tran	saction(s) r. 3 and 4)			(111501.4)
Common Stock 01/0				01/09	/2008	2008			P		10,000	)	A	\$2.7	15 8	5 8,760,000			
Common Stock 01/10				/2008	2008			P		5,000		A	\$2.8	83 8,765,000		D			
		Та									sed of, onvertib				Owned	ı			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/D	Date,		Transaction Code (Instr.		of		exercision Date		7. Title and Amount of Securities Underlying Derivative Security (Inst and 4)		str. 3	8. Price of Derivative Security (Instr. 5)		Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	: t (D) direct	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)		Date Exercisa		Expiration Date	Title	Amo or Num of Shar	ber					

**Explanation of Responses:** 

Remarks:

Paperboy Ventures, LLC, By:

<u>/s/ Allen Andersson, Allen</u>

Andersson, Member

\*\* Signature of Reporting Person Date

01/11/2008

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.

<sup>\*</sup> If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).