FORM 4

obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

C. 20549

Check this box if no longer subject to	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP
Section 16. Form 4 or Form 5	
abligations may continue Cos	

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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* COOK JOSEPH C JR						2. Issuer Name and Ticker or Trading Symbol CORCEPT THERAPEUTICS INC [CORT]									all app Dired		10)% O	wner	
(Last) C/O COF			r) (I RAPEUTICS	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 05/12/2014 Officer (give title below)												ther (: elow)	specify
149 COMMONWEALTH DRIVE					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) MENLO PARK CA 94025															X	X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)		(Stat	e) (2	Zip)																
			Table	e I - N	on-Deri\	ative	Sec	uritie	s Ac	quire	d, Di	sposed o	f, or B	enefic	ially	Owne	ed			
1. Title of Security (Instr. 3) 2. Transactic Date (Month/Day/					Execution D		ate,	3. Transaction Code (Instr. 8)					and 5) Sec Ber Ow		ount of ities icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common	stock				05/12/2	2014				P		99,824	A	\$1.84	443 ⁽¹⁾ 2,040,650 D					
Common	Common stock 05				05/13/2	2014)14		P		176	A	\$2.0	\$2.02(1)		2,040,826				
			Ta	ble II								osed of, convertib				wned				
Derivative Conversion Date Execu Security or Exercise (Month/Day/Year) if any			if any	emed ion Date, /Day/Year)	Code (Instr.		5. Nu of Deriv Secu Acqu (A) or Dispo of (D) (Instrand 5	ative rities ired osed	6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Exercisable Date			7. Title and Amount of Securities Underlying Derivative Security (Instr. : and 4) Amount or Number of Title Shares		nt er		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owners Form: Direct (or Indir (I) (Inst	D) ect	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

Explanation of Responses:

1. Represents the average price per share

Remarks:

/s/ Joseph K. Belanoff, CEO of **Corcept Therapeutics** 05/13/2014

Incorporated, attorney-in-fact.

** Signature of Reporting Person

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.