SEC F	orm 4
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

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

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

1. Name and Address of Reporting Ferson		1*	2. Issuer Name and Ticker or Trading Symbol CORCEPT THERAPEUTICS INC [CORT]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
BELANOFF JOSEPH K				X	Director	Х	10% Owner		
(Last) (First) (Middle)		(Middle)	3. Date of Earliest Transaction (Month/Day/Year)	x	Officer (give title below)				
			10/13/2006	Chief Executive Officer					
149 COMMONV	VEALTH DRIVE								
(Street)			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line)	idual or Joint/Group F	iling (Check Applicable		
MENLO PARK	СА	94025		X	Form filed by One F	Report	ing Person		
					Form filed by More	than C	One Reporting		
(City)	(State)	(Zip)							

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

2. Transaction									
Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Transaction Code (Instr.		4. Securities Disposed Of 5)			5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership
		Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)
							300,000	Ι	Custodian for a minor daughter ⁽¹⁾
							300,000	I	Custodian for minor son ⁽¹⁾
09/29/2006		S ⁽²⁾		2,300	D	\$0.71	2,181,895	D	
	(Month/Day/Year)	(Month/Day/Year) if any (Month/Day/Year)	(Month/Day/Year) if any (Month/Day/Year) Code (8) Code (Image: State Sta	(Month/Day/Year) if any (Month/Day/Year) Code (Instr. 8) Code V Code V Image: Code (Instr. 8) Image: Code (Instr. 8) Image: Code (Instr. 8) V Image: Code (Instr. 8) Image: Code (Instr. 8) Image: Code (Instr. 8) V Image: Code (Instr. 8) Image: Code (Instr. 8) Image: Code (Instr. 8) I	(Month/Day/Year) if any (Month/Day/Year) Code (Instr. 8) 5) Code V Amount Image: Code V Image: Code Image: Code Image: Code V Image: Code Image: Code V Image: Code Image: Code Image: Code Image: Code <td>(Month/Day/Year) if any (Month/Day/Year) Code (Instr. 8) 5) Code V Amount (A) or (D) Code V Amount (D) Image: Code V Image: Code V Image: Code Image: Code V Amount (D) Image: Code Image: Code V Image: Code Image: Code V Image: Code V Image: Code Image: Code V Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: C</td> <td>(Month/Day/Year) if any (Month/Day/Year) Code (Instr. 8) 5) Code V Amount (A) or (D) Price Image: Code (Instr. 8) Image: Code (Instr. 8)</td> <td>(Month/Day/Year) if any (Month/Day/Year) Code (Instr. 8) 5) Beneficially Owned Following (D) Beneficially Price Image: Code (Instr. 8) Image: Code (Instr. 8) 5) Price Beneficially Owned Following (Instr. 3 and 4) Image: Code (Instr. 8) Image: Code (Instr. 8) Image: Code (Instr. 8) 5) Price Beneficially Owned Following (Instr. 3 and 4) Image: Code (Instr. 8) Beneficially Owned Following (Instr. 3 and 4) Image: Code (Instr. 8) Image: Code (Instr. 8)</td> <td>$\begin{array}{ c c c c c c c c c c c c c c c c c c c$</td>	(Month/Day/Year) if any (Month/Day/Year) Code (Instr. 8) 5) Code V Amount (A) or (D) Code V Amount (D) Image: Code V Image: Code V Image: Code Image: Code V Amount (D) Image: Code Image: Code V Image: Code Image: Code V Image: Code V Image: Code Image: Code V Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: C	(Month/Day/Year) if any (Month/Day/Year) Code (Instr. 8) 5) Code V Amount (A) or (D) Price Image: Code (Instr. 8) Image: Code (Instr. 8)	(Month/Day/Year) if any (Month/Day/Year) Code (Instr. 8) 5) Beneficially Owned Following (D) Beneficially Price Image: Code (Instr. 8) Image: Code (Instr. 8) 5) Price Beneficially Owned Following (Instr. 3 and 4) Image: Code (Instr. 8) Image: Code (Instr. 8) Image: Code (Instr. 8) 5) Price Beneficially Owned Following (Instr. 3 and 4) Image: Code (Instr. 8) Beneficially Owned Following (Instr. 3 and 4) Image: Code (Instr. 8) Image: Code (Instr. 8)	$ \begin{array}{ c c c c c c c c c c c c c c c c c c c$

 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. Transa Code (8)		of Deriv Secu Acqu (A) or Dispo of (D) (Instr	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

1. The Reporting Person is the custodian for minor children and disclaims beneficial ownership of the shares, except to the extent of his pecuniary interest therein.

2. The sale on this Form 4 was effected pursuant to a Rule 10b5-1 sales plan adopted by the Reporting Person on October 28, 2005.

Remarks:

<u>s/s Fred Kurland, CFO of</u> <u>Corcept Therapeutics</u> <u>Incorporated attorney-in-fact</u>

** Signature of Reporting Person

10/13/2006

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.