FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

wasiiiigtoii, b.C. 20049	OMB APPROVAL			
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-		

OMB Number:	3235-028							
Estimated average burden								
houre por roeponeo:	0.1							

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* ROE ROBERT L				2. Issuer Name and Ticker or Trading Symbol CORCEPT THERAPEUTICS INC [CORT]									Check	all app	licable)			Owner		
(Last) (First) (Middle) C/O CORCEPT THERAPEUTICS 149 COMMONWEALTH DRIVE				3. Date of Earliest Transaction (Month/Day/Year) 10/31/2005									X	belov			Other (specify below) d Secretary			
(Street) MENLO P. (City)	PARK C	A 9	94025 (Zip)		4. If	Ame	ndment,	Date o	f Original	Filed	(Month/Da	ay/Yea	ar)		. Indiv ine) X	Form	r Joint/Group n filed by Ond n filed by Mod on	e Repor	ting Pers	on
		Tabl	le I - Nor	n-Deriv	ative	Sec	curitie	s Acc	quired,	Dis	posed o	f, or	Bene	eficia	ally (Owne	ed			
1. Title of Security (Instr. 3) 2. Transa Date (Month/Date)					Execution Date,		Transaction Disposed C			ties Acquired (A) d Of (D) (Instr. 3,			4 and Se Be Ov		Securities Beneficially		ership Direct ndirect r. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code			v	Amount		(A) or (D)	Price	.	Transaction(s) (Instr. 3 and 4)				(
Common Stock 10/31				1/2005				S ⁽¹⁾		617	D D		\$	\$5		177,640)		
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																				
Security (Instr. 3) or Exercise Price of Derivative Security (Month/Day/Year) if any (Month/Day/Year)			Code (8)	ransaction of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		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) Amoun or Numbe of Title Shares		ount nber	ıt r		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ow For Dire or I (I) (nership	11. Nature of Indirect Beneficial Ownership (Instr. 4)			

Explanation of Responses:

1. The sale reported in this Form 4 was effected pursuant to a Rule 10b5-1 sales plan adopted by the Reporting Person on September 27, 2004.

Remarks:

s/s Fred Kurland, CFO of 11/01/2005 **Corcept Therapeutics** 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.