(City)

(State)

**ALTA EMBARCADERO BIOPHARMA** 

1. Name and Address of Reporting Person\*

(Zip)

FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

ct to	STATEMENT OF CHANG

## GES IN BENEFICIAL OWNERSHIP

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

> > 7. Nature of Indirect Beneficial Ownership (Instr. 4)

By Side

Fund(5)

11. Nature of Indirect

Beneficial Ownership (Instr. 4)

By Side Fund<sup>(5)</sup>

Section obligation	this box if no long 16. Form 4 on the tions may contiction 1(b).		STA			oursua	nt to Section	16(a)	) of the S	Securi	NEFICIA ties Exchangompany Act o	ge Act of 19		ΗP	Estin	Numbe nated av s per res	erage burde	3235-0 en
1. Name and Address of Reporting Person*  ALTA BIOPHARMA PARTNERS II LP					2. Issuer Name and Ticker or Trading Symbol CORCEPT THERAPEUTICS INC [ CORT ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director X 10% Owner  Officer (give title Other (specify					
(Last) (First) (Middle) ONE EMBARCADERO CENTER SUITE 3700					3. Date of Earliest Transaction (Month/Day/Year) 10/16/2009								below)	gro auc		below)		
(Street) SAN FRANCISCO CA 94111				4. If Amendment, Date of Original Filed (Month/Day/Year) 10/20/2009  6. Individual or Joint/Group Filing (C Line) Form filed by One Reportin X Form filed by More than Or Person										rting Perso	on .			
(City)	(\$	State)	(Zip)															
			able I - No	_		_			1	, Dis	<del>i</del>					_		
1. Title of Security (Instr. 3)  2. Transa Date (Month/D						2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)					Owned Fo	ecurities eneficially wned Following eported		nership : Direct r Indirect str. 4)	7. Natu Indirec Benefic Owner: (Instr. 4	
C	Ctl-			10	/1.0/00	200			Code	V	Amount	(A) or (D)	Price \$1.38 <sup>(2)</sup>	Transactio	nd 4)	╀.	<b>)</b> (3)(4)	_
Common					/16/20				P		337,245	<del> </del>				1 1		By Si
Common Stock 10/16/200				009		P		12,406	A <sup>(1)</sup>	\$1.38(2	180,204				Fund			
			Table II								osed of, convertib			Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day)	ate, Transa Code (			5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and of Securiti Underlying Derivative (Instr. 3 and	es g Security	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Ben Owr
					Code V		(A)	(D)	Date Exercisable		Expiration Date	Title	Amount or Number of Shares			Transaction(s) (Instr. 4)		
Warrants (right to buy)	\$1.66	10/16/2009			P		118,036 <sup>(1)</sup>		10/16/2	:009	10/16/2012	Common Stock	118,036	\$0.125	640,	996	D <sup>(3)</sup>	
Warrants (right to buy)	\$1.66	10/16/2009			P		4,342 <sup>(1)</sup>		10/16/2	:009	10/16/2012	Common Stock	4,342	\$0.125	10,9	949	I	By S Fun
1		f Reporting Person*  RMA PARTN		LΡ														
(Last) ONE EN		(First) ERO CENTER	(Midd	lle)														
(Street)	ANCISCO	CA	9411	.1														
(City)		(State)	(Zip)															
1		Reporting Person*		IT II	LLC	2												
(Last) ONE EM		(First) ERO CENTER	(Midd	lle)														
(Street)	ANCISCO	CA	9411	1														

PARTNERS II L	<u>.LC</u>	
(Last) ONE EMBARCADI SUITE 3700	(First) ERO CENTER	(Middle)
(Street) SAN FRANCISCO	CA	94111
(City)	(State)	(Zip)
1. Name and Address of <u>ALTA PARTNE</u>	· ·	
(Last) ONE EMBARCADE SUITE 3700	(First) ERO CENTER	(Middle)
(Street) SAN FRANCISCO	CA	94111
(City)	(State)	(Zip)
1. Name and Address of DELEAGE JEA	· ·	
(Last) ONE EMBARCADE SUITE 3700	(First) ERO CENTER	(Middle)
(Street) SAN FRANCISCO	CA	94111
(City)	(State)	(Zip)
1. Name and Address of CHAMPSI FAR		
(Last) ONE EMBARCAD SUITE 4050	(First) ERO CENTER	(Middle)
(Street) SAN FRANCISCO	CA	94132
(City)	(State)	(Zip)

## Explanation of Responses:

- $1.\ Acquired\ from\ the\ Issuer\ pursuant\ to\ the\ Securities\ Purchase\ Agreement\ dated\ October\ 12,\ 2009.$
- 2. This price is the result of \$1.43 per share, pursuant to Securities Purchase Agreement dated October 12, 2009, less the cost of warrants.
- 3. These securities are held of record by Alta BioPharma Partners II, L.P. ("ABPII"). Alta BioPharma Management II, LLC ("ABMII") is the General Partner of ABPII. Jean Deleage and Farah Champsi are managing directors and Edward Penhoet is a director of ABMII and they exercise shared voting and investment power with respect to the shares owned by ABPII. Each of the reporting persons disclaims beneficial ownership of such securities, except to the extend of his or her proportionate pecuniary interest therein.
- 4. Mr. Edward Penhoet is a director of the Issuer and files separate reports pursuant to Section 16 of the Securities Exchange Act of 1934, as amended.
- 5. These securities are held of record by Alta Embarcadero BioPharma Partners II, LLC ("AEBPII"). Alta Partners II, Inc. ("APII") provides investment advisory services to ABPII and AEBPII. Jean Deleage and Farah Champsi are managers of AEBPII and exercise shared voting and investment power over the shares held by AEBPII. Each of the reporting persons disclaims beneficial ownership of all such shares except to the extend of his or her proportionate pecuniary interest therein.

## Remarks:

 $This form \ 4 \ is \ amended \ to \ correct \ the \ warrants \ purchased \ by \ Alta \ Embarcadero \ BioPharma \ Partners \ II, \ LLC \ listed \ under \ table \ II \ column \ 7.$ 

Dr. Alta Dia Dharma	
By Alta BioPharma	
Management II, LLC, /s/ Jean	10/20/2009
Deleage, Managing Director	
/s/ Jean Deleage, Managing Director	10/20/2009
/s/ Jean Deleage, Manager	10/20/2009
/s/ Jean Deleage, President	10/20/2009
/s/ Jean Deleage	10/20/2009
/s/ Farah Champsi	10/20/2009
** Signature of Reporting Person	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).

 $Note: File \ three \ copies \ of \ this \ Form, \ one \ of \ which \ must \ be \ manually \ signed. \ If \ space \ is \ insufficient, \ see \ Instruction \ 6 \ for \ procedure.$