FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

snington, D.	.C. 20549		

OMB APPROVAL									
OMB Number:	3235-028								
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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

1. Name and Address of Reporting Person*						2. Issuer Name and Ticker or Trading Symbol CORCEPT THERAPEUTICS INC [CORT]									check a	ionship of Reportii all applicable) Director Officer (give title		10% (Owner	
(Last) (First) (Middle) C/O CORCEPT THERAPEUTICS					3. Date of Earliest Transaction (Month/Day/Year) 07/25/2005										X	below				эреспу	
275 MIDDLEFIELD ROAD, SUITE A (Street) MENLO PARK CA 94025						4. If Amendment, Date of Original Filed (Month/Day/Year)								Individ ne) X	ividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				on		
(City)		(State	,	Zip)			_								<u></u>						
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transar Date (Month/Date)					ction 2A. Deemed Execution Date,		3. Transa Code (3. 4. Securi Transaction Code (Instr. 8) 5.		ities Acquired (A) d Of (D) (Instr. 3,		(A) or	or Securi Benef Owner Repor Transa		unt of ies cially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
Common Stock 07/25.									A 0 00 11	S ⁽¹⁾		1,250 D sed of, or Beneficia		\$5			3,257	D			
			ıa									sea or, o onvertib				y Ow	nea				
1. Title of Derivative Conversion or Exercise Price of Derivative Security (Instr. 3) 2.			Date,	4. Transaction Code (Instr. 8)		of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		str. 3		rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4)	Owners Form: Direct (or Indir (I) (Inst	hip D) ect	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
						Code	v	(A)		Date Exercisal		Expiration Date	Title	Amo or Num of Shai	nber						

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 Corcept Therapeutics Incorporated attorney-in-fact

07/26/2005

** 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.