## FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

STATEMENT	OF CHANGES	S IN BENEFICIAL	. OWNERSHIP

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

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 1034

mon done	on 1(b).			1 110							npany Act of		1304							
1. Name and Address of Reporting Person*  WILSON JAMES N						2. Issuer Name <b>and</b> Ticker or Trading Symbol CORCEPT THERAPEUTICS INC [ CORT ]								(Ched	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner					
	CEPT TI	(First) HERAPEUTICS	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 09/01/2015							-	Officer (give title below)		Othe belo	er (specify w)			
149 COM	MONWI	EALTH DRIVE			4. If	Am	endme	ent, Date of	f Original	Filed	(Month/Day/	/Year)		6. Ind	lividual or J	loint/Group	Filing (Check	Applicable		
(Street) MENLO I	PARK (	CA	94025											X		iled by Mor	e Reporting Pe re than One Re			
(City)	(	(State)	(Zip)																	
		Tal	ole I - No	n-Deriv	ative	Se	curi	ties Acc	quired,	Dis	posed of,	, or Be	nefi	icially	Owned					
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)		ar)	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4				5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Ownership			
								Code	v	Amount	(A) o (D)	r <sub>P</sub>	rice	Transact (Instr. 3 a	tion(s)		(Instr. 4)			
Common s	stock			09/01	1/2015	5			М		10,000	A		\$1.51	1,58	8,396	I	James N. Wilson and Pamela D. Wilson Trust		
Common s	ommon stock		09/01/2015		5			S		10,000	10,000 D		\$4.9 <sup>(1)</sup>	1,578,396		I	James N. Wilson and Pamela D. Wilson Trust			
Common stock		09/01/	09/01/2015 <sup>(2)</sup>				S <sup>(2)</sup>		0	D <sup>(2</sup>	)	\$0.00	901,067		I	James and Pamela Wilson Family Partners				
			Table II -								osed of, convertible				Owned					
Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deem Execution if any (Month/Da	ed Date,	4. Transac Code (li B)	ction	5. N of Der Sec Acc (A) Dis of (	lumber rivative curities quired	6. Date E Expiratio (Month/D	xercis	able and 7	7. Title ai of Securi Underlyii Derivativ (Instr. 3 a	nd Am ties ng e Sec and 4)	urity	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported Transactie (Instr. 4)	Owners Form: Direct (I or Indire (I) (Instr	Beneficia O) Ownershi ect (Instr. 4)		
		1		- 1			1	1 1						-unt		4	1			

Date Exercisable

(3)

٧

Code

M

(D)

10,000

(A)

Expiration Date

05/18/2017

Title

Commor stock

## **Explanation of Responses:**

\$1.51

1. Represents the weighted average sale price for the entire number of shares sold.

09/01/2015

- 2. Not applicable as the line item was included to show all other indirect holdings of the Reporting Person.
- 3. Fully exerciseable.

## Remarks:

Stock option

/s/ Joseph K. Belanoff, CEO of **Corcept Therapeutics** Incorporated attorney-in-fact

or Number

of Shares

10,000

\$0.00

09/03/2015

190,000

D

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

 $<sup>^{\</sup>star}$  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.