| SEC Form 4 | |
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

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|------------------------|-----------|
| OMB Number: | 3235-0287 |
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| 1. Name and Addres | 1 0 | on* | 2. Issuer Name and Ticker or Trading Symbol CORCEPT THERAPEUTICS INC [CORT] | | tionship of Reporting all applicable) | Perso | n(s) to Issuer |
|-------------------------|--|-------|--|-------------------|--|---------|-----------------------|
| ANDERSSON ALLEN | | | [] | X | Director | Х | 10% Owner |
| (Last) 1875 K STREET | (First) (Middle) Γ, N.W., SUITE 700 | | 3. Date of Earliest Transaction (Month/Day/Year) 11/08/2007 | | Officer (give title below) | | Other (specify below) |
| | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Indiv Line) | idual or Joint/Group F | iling (| Check Applicable |
| (Street) WASHINGTON | DC | 20006 | | X | Form filed by One F | Report | ing Person |
| | DC | | | | Form filed by More Person | than C | Dne Reporting |
| (City) | (State) | (Zip) | | | | | |

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

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transaction Code (Instr. 8) | | | | | 5. Amount of Securities Beneficially Owned Following Reported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---------------------------------|--|---|---|---|--------|---------------|----------|---|---|---|
| | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (1150.4) |
| Common Stock | 11/08/2007 | | р | | 10,000 | A | \$2.7392 | 8,295,383 ⁽¹⁾ | Ι | By limited liability company |
| Common Stock | 11/08/2007 | | р | | 10,000 | A | \$2.77 | 8,305,383 ⁽¹⁾ | Ι | By limited liability company |
| Common Stock | 11/09/2007 | | Р | | 20,000 | A | \$2.7695 | 8,325,383 ⁽¹⁾ | I | By limited liability company |
| Common Stock | | | | | | | | 500,000 ⁽²⁾ | I | By limited liability company |

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) | | 5. Nu of Deriv Secu Acqu (A) or Dispo of (D) (Instr and 5 | ative rities ired osed . 3, 4 | 6. Date Exerc Expiration Da (Month/Day/Y | ate | 7. Title Amour Securi Under Deriva Securi and 4) | nt of ties lying tive ty (Instr. 3 | 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. Shares held by Paperboy Ventures, LLC for the benefit of the reporting person

2. Shared held by Anderieck Holdings, LLC for the benefit of the reporting person

Remarks:

/s/ Allen Andersson 11/12/2007

** 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.