FORM 4

Check this box if no longer subject to

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL									
	OMB Number:	3235-0287								
	Estimated average burden									
ı	hours por rosponso:	0.5								

Section 16. Form 4 or Form 5 obligations may continue. See Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 Instruction 1(b).

1. Name and Address of Reporting Person*						2. Issuer Name and Ticker or Trading Symbol CORCEPT THERAPEUTICS INC [CORT]								5. Relationship of Report (Check all applicable) X Director		10%	Owner	
(Last) (First) (Middle) C/O CORCEPT THERAPEUTICS INCORPORATED						3. Date of Earliest Transaction (Month/Day/Year) 06/03/2019								Officer below)	(give title	Othe belov	r (specify v)	
149 COMMONWEALTH DRIVE					4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)				
(Street) MENLO PARK CA 94025														X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(S	State)	(Zip)															
		Tab	le I - No	n-Deri	vativ	e Se	curit	ties Ac	quired,	Dis	posed o	f, or Be	eneficial	ly Owned				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						ar) E	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.					nd Securities Beneficially Owned Followi		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) o (D)	Price	Reported Transacti (Instr. 3 a	on(s)		(Instr. 4)	
Common Stock 06/03/2					3/2019	9			M		50,000) A	\$0.96	50,0	000	D		
Common Stock														1,119),888	I	Held by David L. Mahoney and Winnifred C. Ellis 1998 Family Trust	
		-	Table II -								osed of,			Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	d 4. Date, Transa Code (5. Number		6. Date E. Expiratio (Month/D	n Dat	able and 7. Title and An		ties ng e Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Ownersi Form: Direct (I or Indire (I) (Instr.	Beneficial Ownership ct (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisal	ole	Expiration Date	Title	Amount or Number of Shares					
Stock Option (Right to Buy)	\$0.96	06/03/2019			М			50,000	(1)		06/11/2019	Common Stock	50,000	\$0.00	0	D		

Explanation of Responses:

1. Fully exercisable

Remarks:

/s/ G. Charles Robb, Attorneyin-Fact for David L. Mahoney ** Signature of Reporting Person

06/04/2019

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).

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.

^{**} Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).