FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPRO	VAL								
l	OMB Number:	3235-0287								
l										
ı	Estimated average burden									
l	hours per response:	0.5								

	Check this box if no longer subject to								
)	Section 16. Form 4 or Form 5								
J	obligations may continue. See								
	Instruction 1(b).								

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* BELANOFF JOSEPH K						2. Issuer Name and Ticker or Trading Symbol CORCEPT THERAPEUTICS INC [CORT]									Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner							
(Last) (First) (Middle) C/O CORCEPT THERAPEUTICS 149 COMMONWEALTH DRIVE						3. Date of Earliest Transaction (Month/Day/Year) 10/27/2006									X Officer (give title Other (specifically below) Chief Executive Officer							
(Street) MENLO PARK CA 94025 (City) (State) (Zip)					- 4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									ne)	''						
		Tabl	e I - No	n-Deriv	ative	Sec	uritie	s Ac	quired	, Dis	posed o	f, or	Bene	ficia	ally O	wne	ed					
1. Title of Security (Instr. 3) 2. Transar Date (Month/Da				Execution Date,			3. Transa Code (I 8)		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4 s				d Se Be Ow	curiti nefici ned l	ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership				
									Code	v	Amount	(A)	or P	Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Common Stock																300,000			I	Custodian for a minor daughter ⁽¹⁾		
Common Stock																300,000			I	Custodian for minor son ⁽¹⁾		
Common Stock 10/27/2					2006	2006		S ⁽²⁾		5,000 D \$		\$0. <mark>8</mark>	1	2,174,195			D					
		Та									osed of, o				y Owi	ned						
Derivative Security (Instr. 3) Conversion or Exercise Price of Derivative Security Security Execution Date (Month/Day/Year) Execution Date, if any (Month/Day/Year) 8				4. Transa Code (8)		5. Nu of Deriv Secu Acqu (A) or Dispo of (D) (Instrand 5	6. Date Expiration (Month/Mont	on Da Day/Yo		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amount or Numbe of Shares		unt ber	8. Price of Derivative Security (Instr. 5)	tive ty	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly C	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)				

Explanation of Responses:

- 1. The Reporting Person is the custodian for minor children and disclaims beneficial ownership of the shares, except to the extent of his pecuniary interest therein.
- 2. The sale on this Form 4 was effected pursuant to a Rule 10b5-1 sales plan adopted by the Reporting Person on October 28, 2005.

Remarks:

s/s Fred Kurland, CFO of Corcept Therapeutics Incorporated attorney-in-fact

10/27/2006

** 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.