FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Washington, D.C. 20049

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

l	OMB APPROVAL									
	OMB Number:	3235-0287								
l	Estimated average bu	ırden								
l	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 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 <b>and</b> Ticker or Trading Symbol  CORCEPT THERAPEUTICS INC [ CORT ]									Check X	all app Direc		g Pers	10% C	wner		
(Last) (First) (Middle) C/O CORCEPT THERAPEUTICS					3. Date of Earliest Transaction (Month/Day/Year) 06/17/2005									X Officer (give title Other (specify below)  Chief Executive Officer							
275 MIDDLEFIELD ROAD, SUITE A  (Street)  MENLO PARK CA 94025  (City) (State) (Zip)					4. If Amendment, Date of Original Filed (Month/Day/Year) 06/20/2005									Individual or Joint/Group Filing (Check Applicable ine)  X Form filed by One Reporting Person  Form filed by More than One Reporting Person							
			Tabl	e I - Noi	n-Deriv	ative	Sec	curitie	s Ac	quired	, Dis	posed o	f, or	r Ben	eficia	ally	Owne	ed			
1. Title of Security (Instr. 3)  2. Transact Date (Month/Date						Execution Date,		Transaction D		Disposed	4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			and Sec Ber Ow		ecurities I eneficially (		nership : Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
											v	Amount		(A) or (D)	Price		Transa	Transaction(s) (Instr. 3 and 4)			(
Common Stock 06/17/2					/2005	2005			S		3,997	1)	D	\$4.465		55 2,324,195			D		
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  1. Transaction Date (Month/Day/Year)  2. Conversion Date (Month/Day/Year)  3. Transaction Date (Month/Day/Year)  6. Conversion Oate (Month/Day/Year)  7. Conversion Oate (Month/Day/Year)  8. Conversion Oate (Month/Day/Year)  9. Conversion Oate (Month/Day/Year)  1. Transaction Date (Month/Day/Year)		Date, ay/Year)	4. Transaction Code (Instr. 8)		5. Nu of Deriv Secul Acqu (A) or Dispo of (D) (Instrand 5	ative rities ired osed	Expiration (Month/Da)		te	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)  Amoun or Numbe of Title Shares		ount mber	8. Price of Derivative Security (Instr. 5)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		). wnership orm: irect (D) r Indirect (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			

## **Explanation of Responses:**

1. The Reporting Person is amending the Form 4 originally filed to report this sale, for the purpose of reflecting the correct number of shares sold.

## Remarks:

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

06/24/2005

\*\* 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.