FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Last) C/O CONTINCORP	(F CEPT TH	irst) ERAPEUTICS	(Middle))	- <u>C(</u>	2. Issuer Name and Ticker or Trading Symbol CORCEPT THERAPEUTICS INC [CORT] 3. Date of Earliest Transaction (Month/Day/Year) 05/07/2018										Relationship of Reporting Person(s) Check all applicable) Director 1 X Officer (give title Cbelow) b Chief Medical Office					
149 COMMONWEALTH DRIVE						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) MENLO	PARK C	A :	94025												Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(S	tate)	(Zip)																		
		Tab	le I - N	Non-Deri	vative	Sec	uriti	ies Ad	cquire	d, D	isposed o	of, or B	eneficia	ally (Owned	I					
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye				Execut		Date,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an			Beneficially Owned Foll		es ially Following	Form (D) o	n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
									Code V		Amount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)						
Common Stock 05/07/201				018	18			M ⁽¹⁾		8,000	A	\$3.5	1 8,		,000		D				
Common Stock 05/07/201				018	18			S ⁽¹⁾		8,000	D	\$17.678	17.6785 ⁽²⁾		0		D				
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																				
Derivative Conversion D		Date Exe (Month/Day/Year) if ar	if any	emed tion Date, n/Day/Year)	4. Transa Code (8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price o Derivative Security (Instr. 5)		9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Owner Form: Direct or Indi (I) (Ins	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amount or Number of Shares								
Stock Option (Right to Buy)	\$3.51	05/07/2018			M ⁽¹⁾			8,000	(3)	09/29/2025	Common Stock	8,000	:	\$0.00	377,000	0	D			

Explanation of Responses:

- 1. These transactions were made pursuant to the terms of a 10b5-1 plan in effect at the time of sale of the shares.
- 2. Represents the weighted average sale price for the entire number of shares sold. The actual sale prices range from \$17.55 to \$17.775 per share. Detailed information on the exact number of shares sold at each sale price can be obtained from the issuer upon request.
- 3. Shares subject to this stock option vest and become exercisable at the rate of 25% of the total number at the first anniversary of September 28, 2015. Thereafter, 1/48th of the total number of shares subject to this option grant vests and becomes exercisable on each monthly anniversary, so that the total number of shares subject to this option becomes fully vested and exercisable on September 28, 2019.

Remarks:

/s/ G. Charles Robb, Attorneyin-Fact for Robert S. Fishman

05/08/2018

** 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.