FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| <b>STATEMENT</b> | OF CHANGES | S IN BENEFICIAL | <b>OWNERSHIP</b> |
|------------------|------------|-----------------|------------------|

| OMB APPROVAL             |     |  |  |  |  |  |  |
|--------------------------|-----|--|--|--|--|--|--|
| OMB Number: 3235-0287    |     |  |  |  |  |  |  |
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| 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

| Name and Address of Reporting Person*     LeDoux Anne M                 |                                                            |              |                                                             | - 1                                                         | 2. Issuer Name and Ticker or Trading Symbol  CORCEPT THERAPEUTICS INC [ CORT ] |              |         |                                                                |                                                  |                                                                                               | [Che                                                         | eck all applic                                        | able)                                                                                                        | erson(s) to Issu<br>10% Ov<br>Other (s                            | vner                                                               |
|-------------------------------------------------------------------------|------------------------------------------------------------|--------------|-------------------------------------------------------------|-------------------------------------------------------------|--------------------------------------------------------------------------------|--------------|---------|----------------------------------------------------------------|--------------------------------------------------|-----------------------------------------------------------------------------------------------|--------------------------------------------------------------|-------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|--------------------------------------------------------------------|
| (Last) (First) (Middle) C/O CORCEPT THERAPEUTICS 149 COMMONWEALTH DRIVE |                                                            |              |                                                             | 3. Date of Earliest Transaction (Month/Day/Year) 04/16/2007 |                                                                                |              |         |                                                                |                                                  |                                                                                               | X Officer (give title Other (specify below)  VP & Controller |                                                       |                                                                                                              |                                                                   |                                                                    |
| (Street) MENLO (City)                                                   | PARK C                                                     | CA<br>State) | 94025<br>(Zip)                                              | 4.                                                          | If Ame                                                                         | endment, [   | Date of | f Original Fil                                                 | ed (Month/D                                      | ay/Year)                                                                                      | Line                                                         | )<br><mark>X</mark> Form fil                          | ed by One Re                                                                                                 | ng (Check App<br>porting Persor<br>an One Repor                   | 1                                                                  |
| (0.5)                                                                   |                                                            |              | ble I - Non-D                                               | erivati                                                     | ve Se                                                                          | ecurities    | s Ac    | quired, D                                                      | isposed (                                        | of, or Be                                                                                     | neficially                                                   | / Owned                                               |                                                                                                              |                                                                   |                                                                    |
| Date                                                                    |                                                            |              |                                                             | 2A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) |                                                                                | Code (Instr. |         | ed (A) or<br>str. 3, 4 and 5                                   | 5. Amour<br>Securities<br>Beneficia<br>Owned For | s Form<br>ally (D) o<br>ollowing (I) (Ir                                                      | rm: Direct<br>) or Indirect<br>(Instr. 4)                    | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |                                                                                                              |                                                                   |                                                                    |
|                                                                         |                                                            |              |                                                             |                                                             |                                                                                |              | Code    | Amount                                                         | (A) o<br>(D)                                     | Price                                                                                         | Transacti<br>(Instr. 3 a                                     | on(s)                                                 |                                                                                                              | (iiisti. 4)                                                       |                                                                    |
|                                                                         |                                                            |              | Table II - Der<br>(e.g                                      |                                                             |                                                                                |              |         |                                                                | posed of                                         |                                                                                               |                                                              | Owned                                                 |                                                                                                              |                                                                   |                                                                    |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)                     | Conversion Date Execution Exercise (Month/Day/Year) if any |              | 3A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) | rate, Transaction Code (Instr.                              |                                                                                | Derivative   |         | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |                                                  | 7. Title and Amount<br>of Securities<br>Underlying<br>Derivative Security<br>(Instr. 3 and 4) |                                                              | 8. Price of<br>Derivative<br>Security<br>(Instr. 5)   | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s) | Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |
|                                                                         |                                                            |              |                                                             | Code                                                        | v                                                                              | (A)          |         | Date<br>Exercisable                                            | Expiration<br>Date                               | Title                                                                                         | Amount<br>or<br>Number<br>of Shares                          |                                                       | (Instr. 4)                                                                                                   | 3,                                                                |                                                                    |
| Stock<br>option<br>(right to<br>buy)                                    | \$1.5                                                      | 04/16/2007   |                                                             | A                                                           |                                                                                | 125,000      |         | (1)                                                            | 04/16/2017                                       | Common<br>Stock                                                                               | 125,000                                                      | \$1.5                                                 | 125,000                                                                                                      | D                                                                 |                                                                    |

## **Explanation of Responses:**

 $1.\ Exercisable\ with\ respect\ to\ 2.0834\%\ of\ the\ total\ number\ of\ Option\ Shares\ on\ the\ monthly\ anniversary\ of\ 4/16/2007\ each\ month\ thereafter.$ 

## Remarks:

/s/ Joesph K. Belanoff, CEO of **Corcept Therapeutics** 

Incorporated, attorney-in-fact

\*\* Signature of Reporting Person Date

04/18/2007

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.