FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APE	PROVAL
OMB Number:	3235-028
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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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

37 Estimated average burden hours per response: 0.5

1. Name and Address of Reporting Person* ROE ROBERT L (Last) (First) (Middle) C/O CORCEPT THERAPEUTICS					3. D	Issuer Name and Ticker or Trading Symbol CORCEPT THERAPEUTICS INC [CORT] Date of Earliest Transaction (Month/Day/Year) 01/30/2006										all app Direct Office below	olicable) etor er (give title	1 C b	Person(s) to Issuer 10% Owner Other (specification) Secretary	
149 COMMONWEALTH DRIVE (Street) MENLO PARK CA 94025					4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting					
(City)	(State) ((Zip)													Pers	OII			
		Tab	le I - Nor	ı-Deriv	ative	Se	curitie	s Acq	juired,	Disp	oosed o	f, or	Bene	ficia	lly (Dwne	ed			
1. Title of Security (Instr. 3) 2. Transa Date (Month/D						Execution Date,		Transaction Disposed O Code (Instr. 5)			ties Acquired (A) d Of (D) (Instr. 3,			4 and Sec Ben Owr		cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) or D)	Price	. 1	Reported Transaction(s) (Instr. 3 and 4)				(111511.4)
Common Stock 01/30					0/2006	5			S ⁽¹⁾		300		D \$5		5 174,165		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)	vative Conversion Date Execution or Exercise (Month/Day/Year) if any		Date,	4. Transaction Code (Instr. 8)			ative rities ired osed	Expiration (Month/Da	Date Exercisable and xpiration Date Month/Day/Year) Tate Expiration Date Expiration Date			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amount or Numbe of Title Shares		t		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owner Form: Direct or Indi (I) (Inst	(D) rect	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

Explanation of Responses:

1. The sale reported in this Form 4 was effected pursuant to a Rule 10b5-1 sales plan adopted by the Reporting Person on September 27, 2004.

Remarks:

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

01/31/2006

** 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.