

CORCEPT THERAPEUTICS INC
 Form 4
 July 31, 2006

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION
 Washington, D.C. 20549

OMB APPROVAL

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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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person *
 BELANOFF JOSEPH K

2. Issuer Name and Ticker or Trading Symbol
 CORCEPT THERAPEUTICS INC [CORT]

5. Relationship of Reporting Person(s) to Issuer
 (Check all applicable)

(Last) (First) (Middle)
 C/O CORCEPT THERAPEUTICS, 149 COMMONWEALTH DRIVE

3. Date of Earliest Transaction (Month/Day/Year)
 07/27/2006

Director 10% Owner
 Officer (give title below) Other (specify below)
 Chief Executive Officer

(Street)
 MENLO PARK, CA 94025

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)
 Form filed by One Reporting Person
 Form filed by More than One Reporting Person

(City) (State) (Zip)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (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	07/27/2006		S ⁽²⁾	1,251 D	\$ 4 2,208,531	D	
Common Stock	07/28/2006		S ⁽²⁾	668 D	\$ 3.9 2,207,863	D	

Stock

Common Stock	07/28/2006	S ⁽²⁾	1,668	D	\$ 3.85	2,206,195	D
Common Stock	07/31/2006	S ⁽²⁾	2,000	D	\$ 3.775	2,204,195	D

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

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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	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 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 Underlying Securities (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Owned Beneficially (Instr. 5)
				Code	V (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
BELANOFF JOSEPH K C/O CORCEPT THERAPEUTICS 149 COMMONWEALTH DRIVE MENLO PARK, CA 94025	X	X	Chief Executive Officer	

Signatures

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

07/31/2006

__Signature of Reporting Person

Date

Explanation of Responses:

- * 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).
- (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 September 15, 2004.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.