Edgar Filing: CORCEPT THERAPEUTICS INC - Form 4

		U	3			-0.		NO - 1 0111 4			
CORCEPT THERAPEUTICS INC Form 4 June 21, 2006											
FORM	OMB APPROVAL OMB APPROVAL										
. •	• • UNITED	STATES		STTIES A Shington,			NGE (COMMISSION	OMB Number:	3235-0287	
Check thi			vv as	sington,	D.C. 20	347				January 31,	
if no long subject to Section 1 Form 4 o Form 5		F CHANGES IN BENEFICIAL OWN SECURITIES						Expires: Estimated burden ho response.	urs per		
Form 5 obligations may continue. See Instruction 1(b). 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 F	Responses)										
			Symbol	2. Issuer Name and Ticker or Trading Symbol CORCEPT THERAPEUTICS INC				5. Relationship of Reporting Person(s) to Issuer			
			[CORT]			i i c s	INC	(Check all applicable)			
(Last) (First) (Middle) C/O CORCEPT				3. Date of Earliest Transaction (Month/Day/Year)				_X_ Director _X_ 10% Owner _X_ Officer (give title Other (specify below) below) Chief Executive Officer			
			06/20/2006								
THERAPEUTICS, 149											
		P									
	WEALTH DRIV	E				_					
COMMON	(Street)	E		ndment, Da hth/Day/Year	-	1		6. Individual or J Applicable Line) _X_ Form filed by	One Reporting I	Person	
COMMON	WEALTH DRIV	E			-	1		6. Individual or J Applicable Line)	One Reporting I	Person	
COMMON MENLO PA (City)	WEALTH DRIVI (Street) ARK, CA 94025 (State)	(Zip)	Filed(Mon	nth/Day/Year) Derivative	Secur		6. Individual or J Applicable Line) _X_ Form filed by Form filed by I Person quired, Disposed o	One Reporting I More than One F	Person Reporting ally Owned	
COMMON MENLO PA	WEALTH DRIVI (Street) ARK, CA 94025	(Zip) 2A. Dee: Executic any	Filed(Mon	nth/Day/Year e I - Non-E 3.) Derivative	Secur ties A	cquired d of	 6. Individual or J Applicable Line) _X_ Form filed by I Person quired, Disposed of Securities Beneficially Owned Following Reported Transaction(s) 	One Reporting I More than One F	Person Reporting ally Owned 7. Nature of	
COMMONY MENLO PA (City) 1.Title of Security	WEALTH DRIVI (Street) ARK, CA 94025 (State) 2. Transaction Date	(Zip) 2A. Dee: Executic any	Filed(Mon Table med on Date, if	e I - Non-E 3. Transactio Code (Instr. 8)) Derivative 4. Securi on(A) or D: (D)	Secur ties Ad ispose 4 and (A)	cquired d of	 6. Individual or J Applicable Line) _X_ Form filed by Form filed by Person quired, Disposed of 5. Amount of Securities Beneficially Owned Following Reported 	One Reporting I More than One F f, or Beneficia 6. Ownership Form: Direct (D) or Indirect (I)	Person Reporting ally Owned 7. Nature of Indirect Beneficial Ownership (Instr. 4)	
COMMONY MENLO PA (City) 1.Title of Security	WEALTH DRIVI (Street) ARK, CA 94025 (State) 2. Transaction Date	(Zip) 2A. Dee: Executic any	Filed(Mon Table med on Date, if	e I - Non-E 3. Transactio Code (Instr. 8)) Derivative 4. Securi on(A) or Di (D) (Instr. 3,	Secur ties Ad ispose 4 and (A) or	cquired d of 5)	 6. Individual or J Applicable Line) _X_ Form filed by I Person quired, Disposed of 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) 	One Reporting I More than One F f, or Beneficia 6. Ownership Form: Direct (D) or Indirect (I)	Person Reporting ally Owned 7. Nature of Indirect Beneficial Ownership	
COMMONY MENLO PA (City) 1.Title of Security (Instr. 3)	WEALTH DRIVI (Street) ARK, CA 94025 (State) 2. Transaction Date	(Zip) 2A. Dee: Executic any	Filed(Mon Table med on Date, if	e I - Non-E 3. Transactio Code (Instr. 8)) Derivative 4. Securi on(A) or Di (D) (Instr. 3,	Secur ties Ad ispose 4 and (A) or	cquired d of 5)	 6. Individual or J Applicable Line) _X_ Form filed by Form filed by I Person quired, Disposed of 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) 300,000 	One Reporting I More than One F f, or Beneficia 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Person Reporting ally Owned 7. Nature of Indirect Beneficial Ownership (Instr. 4) Custodian for a minor	
COMMONY MENLO PA (City) 1.Title of Security (Instr. 3) Common Stock Common	WEALTH DRIVI (Street) ARK, CA 94025 (State) 2. Transaction Date	(Zip) 2A. Dee: Executic any	Filed(Mon Table med on Date, if	e I - Non-E 3. Transactio Code (Instr. 8)) Derivative 4. Securi on(A) or Di (D) (Instr. 3,	Secur ties Ad ispose 4 and (A) or	cquired d of 5) Price	 6. Individual or J Applicable Line) _X_ Form filed by I Person quired, Disposed of 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) 300,000 	One Reporting I More than One F f, or Beneficia 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Person Reporting ally Owned 7. Nature of Indirect Beneficial Ownership (Instr. 4) Custodian for a minor daughter (1) Custodian for minor	

Edgar Filing: CORCEPT THERAPEUTICS INC - Form 4

4.75

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.

06/21/2006

Date

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)	4. Transactic Code (Instr. 8)	5. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			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	Х	Chief Executive Officer				

Signatures

Stock

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

**Signature of Reporting Person

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.

Edgar Filing: CORCEPT THERAPEUTICS INC - Form 4

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.