Edgar Filing: CORCEPT THERAPEUTICS INC - Form 4

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	THERAPEUTIC	S INC									
Form 4	4										
May 12, 201								OMB AF	PROVAL		
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								OMB			
Washington, D.C. 20549								Number:	3235-0287		
	Check this box if no longer CTATENTE OF CHANCES IN DENEFLOIAL OWNEDSITID OF								January 31, 2005		
subject t Section	5 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF							Estimated average burden hours per			
Form 4 d		SECONITES							rs per 0.5		
Form 5	Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,										
	obligations may continue. See Instruction See										
See Instr	ruction	30(h) of the	e Investment	Company	Act	of 194	0				
1(b).											
(Print or Type	Responses)										
1. Name and Address of Reporting Person [*] _ 2. Issuer Name and Ticker or Trading 5. Relationship of Reporting Person(s) to											
COOK JOS	suer Name and ol	a ficker of f	rading	,	Issuer						
COOK JOSEPH C JK Symbol Issuer CORCEPT THERAPEUTICS INC							t all applicable)				
		[CO	RT]				(Check	ck all applicable)			
(Last)	(First) (te of Earliest T	ransaction			X Director Officer (give t		Owner er (specify		
			(Month/Day/Year) 05/08/2014				below) below)				
INCORPORATED, 149											
COMMON	WEALTH DRIV	Έ									
	(Street)	4. If <i>A</i>	Amendment, D	ate Original			6. Individual or Jo	int/Group Filin	g(Check		
Filed(Mc			(Month/Day/Yea					Applicable Line) _X_ Form filed by One Reporting Person			
MENI O PARK CA 94025 Form filed by More than One Reporting											
		(7:)					Person				
(City)	(State)					-	uired, Disposed of		-		
1.Title of Security	2. Transaction Date (Month/Day/Year)		3. if Transaction				5. Amount of Securities	6. Ownership	7. Nature of Indirect		
(Instr. 3)	(Wondie Duy) Four)	any	Code				Beneficially Form: Direc		Beneficial		
		(Month/Day/Ye	ar) (Instr. 8)				Owned Following	(D) or Indirect (I)	Ownership (Instr. 4)		
					(A)		Reported	(Instr. 4)	(Instr. I)		
					or		Transaction(s) (Instr. 3 and 4)				
			Code V	Amount	(D)	Price ¢	(
Common	05/09/2014		Р	100,000	А	\$ 1.79	1,940,826	D			
stock			-	,		<u>(1)</u>	.,,				

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

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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. Transactio Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exerce Expiration D (Month/Day/	ate	7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8 I S ()
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock option (right to buy)	\$ 1.74	05/08/2014		А	30,000	(2)	05/08/2024	Common Stock	30,000	

Reporting Owners

Reporting Owner Name / Address		Relationsh	ips				
	Director	10% Owner	Officer	Other			
COOK JOSEPH C JR C/O CORCEPT THERAPEUTICS INCORPORATED 149 COMMONWEALTH DRIVE MENLO PARK, CA 94025	Х						
Signatures							
/s/ Joseph K. Belanoff, CEO of Corcept Therapeutics Incorporated,							
attorney-in-fact.				05/12/2014			
**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) Represents the average price per share
- (2) Exercisable with respect to 8.3334% of the total option shares on each monthly anniversary of May 8, 2014, with the final vesting of all remaining shares to occur on or before the date of Corcept's 2015 Annual Meeting of Stockholders.

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.