Edgar Filing: CORCEPT THERAPEUTICS INC - Form 4

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CORCEPT Form 4	THERAPEUTIC	S INC										
February 22	., 2006											
									OMB AF	OMB APPROVAL		
	UNITED	SECURITIES AND EXCHANGE COMMISSI Washington, D.C. 20549						OMB Number:	3235-0287 January 31,			
Check the if no lon subject to Section Form 4	so STATEN 16. or	STATEMENT OF CHAN				NGES IN BENEFICIAL OWNERSHIP OF SECURITIES						
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, 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 <u>*</u> MAHONEY DAVID L			2. Issuer Name and Ticker or Trading Symbol					5. Relationship of Reporting Person(s) to Issuer				
		CORCEPT THERAPEUTICS INC [CORT]					(Check all applicable)					
(Last) C/O CORC THERAPE	3. Date of Earliest Transaction(Month/Day/Year)02/17/2006					X_ Director 10% Owner Officer (give title Other (specify below) below)						
COMMON	WEALTH DRIV	Έ										
				endment, D nth/Day/Yea	-	1		6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
MENLO P.	ARK, CA 94025						i	Form filed by M Person	ore than One Re	porting		
(City)	(State)	(Zip)	Tab	le I - Non-l	Derivative	Secur	ities Acqu	ired, Disposed of,	or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	rity (Month/Day/Year) Execution Date, if			3. 4. Securities Acquired (A Transactionor Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or				 S. 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	02/17/2006			Code V P	Amount 10,700	(D) A	Price \$ 5.0741	(msu: 3 and 4) 40,700	Ι	By trust		
Common Stock	02/21/2006			Р	10,000	А	\$ 4.989	50,700	Ι	By trust		

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 (9-02) required to respond unless the form displays a currently valid OMB control number.

Reporting Owners

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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)	4. Transactic Code (Instr. 8)	of	Expiration D (Month/Day/ e	Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	9. Nu Deriv Secu Bene Owna 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

MAHONEY DAVID L C/O CORCEPT THERAPEUTICS 149 COMMONWEALTH DRIVE MENLO PARK, CA 94025

Signatures

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

**Signature of Reporting Person

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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).

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.

02/22/2006

Date