## Edgar Filing: MAHONEY DAVID L - Form 4

MAHONEY DA	VID L								
Form 4									
May 23, 2011									
FORM 4	UNITED	STATES					E COMMISSIO		PPROVAL 3235-0287
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. <i>See</i> Instruction 1(b).	STATEM Filed pu Section 17	Washington, D.C. 20549 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							January 31, 2005 average urs per . 0.5
(Print or Type Respo	nses)								
1. Name and Address of Reporting Person <u>*</u> MAHONEY DAVID L			2. Issuer Name <b>and</b> Ticker or Trading Symbol CORCEPT THERAPEUTICS INC [CORT]			5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) C/O CORCEPT THERAPEUTIC COMMONWEA	CS, 149	Middle) Æ		f Earliest Tr Day/Year) 2011	ransaction		X Director Officer (giv below)		% Owner her (specify
			4. If Amendment, Date Original Filed(Month/Day/Year)			Applicable Line) _X_ Form filed by Form filed by	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person		
(City)	(State)	(Zip)	Tah	le I - Non-I	Derivative	Securities	Acquired, Disposed	of, or Beneficia	lly Owned
	ansaction Date tth/Day/Year)		ed Date, if	3.	4. Securit nAcquired Disposed (Instr. 3, 4	ies (A) or of (D)	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
Reminder: Report on	n a separate lin	e for each cl	ass of sec	urities benef	ficially own	ned 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.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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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. 5. Number of TransactiorDerivative Code Securities (Instr. 8) Acquired (A or Disposed (D) (Instr. 3, 4, and 5)		Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8 1 5 (
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock option (right to buy)	\$ 4.42	05/19/2011		А	30,000	<u>(1)</u>	05/19/2021	Common stock	30,000	

## **Reporting Owners**

Reporting Owner Name / Address		Relationsh	ips		
1	Director	10% Owner	Officer	Other	
MAHONEY DAVID L C/O CORCEPT THERAPEUTICS 149 COMMONWEALTH DRIVE MENLO PARK, CA 94025	Х				
Signatures					
/s/ Joseph K. Belanoff, CEO of Cord attorney-in-fact	05/23/201	1			

\*\*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).
- Shares will vest at the rate of 8.3334% per month from the vesting base date, with the final vesting of all remaining shares to occur on or (1) before the date of Corcept's 2012 Annual Meeting.

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.

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Date