#### Edgar Filing: CORCEPT THERAPEUTICS INC - Form 4

#### CORCEPT THERAPEUTICS INC

Form 4 May 12, 2014

### FORM 4

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

OMB 3235-0287

Check this box if no longer subject to

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

Number: January 31,

2005

**OMB APPROVAL** 

subject to Section 16. Form 4 or Form 5

SECURITIES

Estimated average burden hours per

Form filed by More than One Reporting

Person

obligations may continue.

See Instruction

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

response... 0.5

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \* 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading MAHONEY DAVID L Issuer Symbol CORCEPT THERAPEUTICS INC (Check all applicable) [CORT] (Last) (First) (Middle) 3. Date of Earliest Transaction \_X\_\_ Director 10% Owner \_ Other (specify Officer (give title (Month/Day/Year) C/O CORCEPT 05/08/2014 THERAPEUTICS, 149 **COMMONWEALTH DRIVE** (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check Filed(Month/Day/Year) Applicable Line) \_X\_ Form filed by One Reporting Person

MENLO PARK, CA 94025

(City)	(State)	(Zip) Ta	ble I - Non	-Derivative	Secur	ities Acqui	red, Disposed of	, or Beneficia	lly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactic Code (Instr. 8)	4. Securitie coor Disposec (Instr. 3, 4)	d of (E	<b>)</b> )	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	05/09/2014		P	100,000	A	\$ 1.8521	1,119,533	I	David L. Mahoney & Winnifred C. Ellis Trust Account

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)

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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)

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. Transactic Code (Instr. 8)	5. Number of orDerivative 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)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock option (right to buy)	\$ 1.74	05/08/2014		A	30,000	(2)	05/08/2024	Common stock	30,000

# **Reporting Owners**

Reporting Owner Name / Address	Keiationsnips					
	Director	10% Owner	Officer	Other		
MAHONEY DAVID L						
C/O CORCEPT THERAPEUTICS	X					
149 COMMONWEALTH DRIVE	Λ					
MENLO PARK, CA 94025						

### **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.

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