Edgar Filing: KANE ALICE - Form 4

KANE ALIC Form 4 November 19												
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								• · · · • · ·	OMB APPROVAL			
_	UNITED		SECURITIES AND EXCHANGE O Washington, D.C. 20549				COMMISSION	OMB Number:	3235-0287			
Check thi if no long subject to Section 1 Form 4 or	6.	IENT OF CH	ANGES IN SECUB		CIAL	NERSHIP OF	Expires: Estimated a burden hou response	ours 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)											
1. Name and Address of Reporting Person <u>*</u> KANE ALICE			2. Issuer Name and Ticker or Trading Symbol CORINTHIAN COLLEGES INC [COCO]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
(Last) (First) (Middle) 6 HUTTON CENTRE DRIVE, SUITE 400			3. Date of Earliest Transaction (Month/Day/Year) 11/17/2010				Officer (give title 10% Owner Officer (give title Other (specify below) below)					
			If Amendment, Date Original led(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person					
SANTA AN	A, CA 92707						Form filed by N Person					
(City)	(State)	(Zip)	`able I - Non-I	Derivative S	ecuriti	ies Acq	uired, Disposed of	f, or Beneficial	ly Owned			
1.Title of Security (Instr. 3)		Yransaction Date 2A. Deemed onth/Day/Year) Execution Date, if any (Month/Day/Year)			ies Acc sposed	quired of	Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)				
Common Stock (1)	11/17/2010		Code V A	⁷ Amount 15,000	(D) A	Price \$ 4.3	(Instr. 3 and 4) 18,000	D				

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.

 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. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Titl Amou Under Securi (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Relationships **Reporting Owner Name / Address** Director 10% Owner Officer Other KANE ALICE **6 HUTTON CENTRE DRIVE** X SUITE 400 SANTA ANA, CA 92707 Signatures Stan A. Mortensen, Attorney-in-Fact for Alice 11/19/2010 Kane **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).

Granted by the Issuer in the form of director stock units which vest one-fourth on each of the first four quarterly anniversary dates of the grant date such that the grant shall be fully vested on the one-year anniversary of the grant date, but for which the underlying shares of

(1) common stock will not be delivered until the earlier to occur of (1) three years after the date of grant, (2) the Reporting Person's separation from service on the Board, (3) the Reporting Person's death, (4) the Reporting Person's disability or (5) a change-in-control of the Issuer.

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.

Date