1 NAMES OF REPORTING PERSONS		
CUSIP NO. 766559 10 8	13G	PAGE 2 OF 6 PAGES
The information required in the remain deemed to be "filed" for the purpose of Sec Act of 1934 (the "Act") or otherwise subject of the Act but shall be subject to all other the Notes).	tion 18 of t to the la	the Securities Exchange iabilities of that section
1 The remainder of this cover page sh person's initial filing on this form with r securities, and for any subsequent amendmen alter the disclosures provided in a prior c	espect to t t containin	the subject class of
[ ] Rule 13d-1(b) [X] Rule 13d-1(c) [ ] Rule 13d-1(d)		
Check the appropriate box to designat Schedule is filed:	e the rule	pursuant to which this
(Date of Event Which Requires	Filing of	this Statement)
December 4,	2000	
(Name, Address and Telephone Number of Per and Communic		ized to Receive Notices
Morton A. Pier Dewey Ballant 1301 Avenue of t New York, New Yor Telephone: (212	ine LLP he America: k 10019-60	
with a cop	y to:	
Jeff Benjami Novartis Corp 608 Fifth A New York, New Y Telephone: (212	oration venue ork 10020	
(CUSIP Num		
766559 1	0 8	
(Title of Class of	Securitie	s)
Common Stock, par valu	e \$.001 pe:	r share
	suer)	
RIGEL PHARMACEUT	ICALS, INC	
(AMENDMENT NO		) 1
INFORMATION TO BE INCLUDED IN TO RULES 13d-1(b), (c) AND (d) A PURSUANT TO RUL	ND AMENDMEI	
SCHEDULE (RULE 13d-		
SECURITIES AND EXCHA WASHINGTON, D.		SION

I.R.S. IDENTIFICATION NO. OF ABOVE PERSONS (ENTITIES ONLY)

Novartis Pharma AG

\_\_\_\_\_ CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP 2 (a) |\_| (b) |\_|

3 SE	C USE ONLY		
4 CI	TIZENSHIP OR	PLA	ACE OF ORGANIZATION
Sw	vitzerland		
 NUMB	BER OF		
SHA	ARES	5	SOLE VOTING POWER
BENEFI	CIALLY		3,428,571
OWNE	D BY	6	SHARED VOTING POWER
EA	VCH		0
REPO	- DRTING	7	SOLE DISPOSITIVE POWER
PER	RSON		3,428,571
WI	-	8	SHARED DISPOSITIVE POWER
			0
9 AG	GREGATE AMOUN	1T H	SENEFICIALLY OWNED BY EACH REPORTING PERSON
3,	428,571		
10 CH	IECK BOX IF TH	HE A	AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES  _
 11 PE	RCENT OF CLAS	SS B	REPRESENTED BY AMOUNT IN ROW 9
9.	5%		
12 TY CO	PE OF REPORTI	NG	PERSON

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ITEM 1(a). NAME OF ISSUER:

Rigel Pharmaceuticals, Inc.

ITEM 1(b). ADDRESS OF ISSUER'S PRINCIPAL EXECUTIVE OFFICE:

240 East Grand Avenue South San Francisco, California 94080

ITEM 2(a). NAME OF PERSON FILING:

Novartis Pharma AG

ITEM 2(b). ADDRESS OF PRINCIPAL BUSINESS OFFICE OR, IF NONE, RESIDENCE:

CH-4002 Basel Switzerland

ITEM 2(c). CITIZENSHIP:

Novartis Pharma AG ("Novartis") is a company incorporated under the laws of Switzerland.

ITEM 2(d). TITLE OF CLASS OF SECURITIES:

Common Stock, par value \$.001 per share

766559 10 8

Page 3 of 6

ITEM 3. Not Applicable

- ITEM 4. OWNERSHIP:
  - (a) AMOUNT BENEFICIALLY OWNED: 3,428,571
  - (b) PERCENT OF CLASS: 9.5%
  - (c) NUMBER OF SHARES AS TO WHICH SUCH PERSON HAS:
    - (i) Sole power to vote or to direct to vote: 3,428,571
    - (ii) Shared power to vote or to direct to vote: 0
    - (iii) Sole power to dispose or to direct the disposition of: 3,428,571

0

- (iv) Shared power to dispose or to direct the disposition of:
- ITEM 5. OWNERSHIP OF FIVE PERCENT OR LESS OF A CLASS: Not Applicable
- ITEM 6. OWNERSHIP OF MORE THAN FIVE PERCENT ON BEHALF OF ANOTHER PERSON: Not Applicable
- ITEM 7. IDENTIFICATION AND CLASSIFICATION OF THE SUBSIDIARY WHICH ACQUIRED THE SECURITY BEING REPORTED ON BY THE PARENT HOLDING COMPANY:

Not Applicable

ITEM 8. IDENTIFICATION AND CLASSIFICATION OF MEMBERS OF THE GROUP:

Not Applicable

Page 4 of 6

ITEM 9. NOTICE OF DISSOLUTION OF GROUP:

Not Applicable

ITEM 10. CERTIFICATION:

By signing below I certify that, to the best of my knowledge and belief, the securities referred to above were not acquired and are not held for the purpose of or with the effect of changing or influencing the control of the issuer of the securities and were not acquired and are not held in connection with or as a participant in any transaction having that purpose or effect.

Page 5 of 6

## SIGNATURE

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

NOVARTIS PHARMA AG

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By: /s/ A. Egloff
______
Name: Dr. A. Egloff
Title: Senior Legal Counsel
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