FORM 4

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

OMB APPROV	/AL
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Ty	pe Response	s)														
1. Name and Address of Reporting Person* MOOS WALTER H			2. Issuer Name and Ticker or Trading Symbol RIGEL PHARMACEUTICALS INC [RIGL]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner						
		3. Date of Earliest Transaction (Month/Day/Year) 06/03/2004								_Officer (give	title below)	Other	(specify below)			
			4. If Amendment, Date Original Filed(Month/Day/Year)						_X_	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person						
OAKLA (Cir	ND, CA 94	(State)	(Zip)				Tab	ole I - Non-De	rivati	ive Securities	Acquired	. Disposed o	of, or Benefi	icially Owned		
1.Title of S (Instr. 3)	Security		2. Transaction Date (Month/Day/Year	r) any	ution 1	ed Date, if ny/Year)	3. Too	Transaction de str. 8)	4. Sec (A) o	curities Acquir r Disposed of : 3, 4 and 5)	red 5. A (D) Owr Tran	mount of Se	ecurities Benng Reported	eficially 6 C F D o (I	wnership of B orm: B orm: O O O O O O O O O O O O O O O O O O O	eneficial wnership
Keminder:	Keport on a s	separate line for each		- Deriva	ative	Securit	ies A	Perso in this a curr	ns w forn ently	n are not rec valid OMB	quired to control n	respond u umber.		on contained form display		174 (9-02)
1. Title of Derivative Security (Instr. 3)		ion Date ise (Month/Day/Year) a	Date Execution Date, if	Code Derivat			ber 6. Date Exer Expiration I (Month/Day ed		rcisable and Date		1		Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Form of Derivative Security: Direct (D) or Indirect	(Instr. 4)
								Date		n : .:		Amount				
				Code	V	(A)	(D)	Exercisable		Expiration Date	Title	Number of Shares				

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
MOOS WALTER H 724 GRIZZLY TERRACE DRIVE. OAKLAND, CA 94611	X					

Signatures

James H. Welch (Attorney-in-Fact)	06/04/2004
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) Fully vested on 6/10/04.

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.