### FORM 4

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

OMB APPR	ROVAL
OMB Number:	3235-0287
Estimated average	burden
houre por rosponso	0.5

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

	pe Response	~)													
1. Name and Address of Reporting Person * HENNER DENNIS			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  X_ 10% Owner						
(Last) (First) (Middle) C/O MPM ASSET MANAGEMENT, 111 HUNTINGTON AVE., 31ST FLOOR			3. Date of Earliest Transaction (Month/Day/Year) 06/10/2004						Officer (give	title below)		(specify below	)		
(Street)			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					
BOSTON, MA 02199 (City) (State) (Zip)				Table I - Non-Derivative Securities Acqu											
1.Title of S (Instr. 3)	Security		2. Transaction Date (Month/Day/Yea	r) any	ition	ed Date, if ny/Year)	3. T	Transaction 4.	Securities Acqui A) or Disposed of astr. 3, 4 and 5)	ired 5. A f (D) Own Tran	amount of Se ned Followir nsaction(s) str. 3 and 4)	curities Ben	eficially 6	o. Ownership Form:	7. Nature of Indirect Beneficial Ownership (Instr. 4)
							(	Code V A		Price				Ínstr. 4)	
1. Title of Derivative Conversion Date Conversion On Exercise (Month/Day/Year)  3A. Deemed Execution Date any			Code Derivative Securities Acquirect (A) or Disposed of (D)			in this f	s who respond orm are not re ntly valid OMB	quired to	respond u	8. Price of	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s	f 10. Ownersh Form of Derivativ Security: Direct (E or Indirects)	474 (9-02)		
Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, if	(e.g., p 4. Transac Code	tion	5. Num of Derivat Securiti Acquire (A) or Dispose of (D)	ber ive ies ed	Acquired, Dispo	sed of, or Benefinvertible securitable and	icially Own	nd Amount lying s	Derivative Security	Derivative Securities Beneficially Owned Following Reported Transaction(s	Ownersh Form of Derivativ Security: Direct (D or Indirects)	Beneficial Ownership (Instr. 4)
Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, if any	(e.g., p 4. Transac Code	tion	5. Num of Derivat Securiti Acquire (A) or Dispose	ber ive ies ed	Acquired, Dispo nts, options, co 6. Date Exercis Expiration Date	sed of, or Benefinvertible securitable and	7. Title at of Under Securities	nd Amount lying s	Derivative Security	Derivative Securities Beneficially Owned Following Reported	Ownersh Form of Derivativ Security: Direct (D or Indirect	of Indirect Beneficial Ownership (Instr. 4)
Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, if any	(e.g., p  4. Transac Code (Instr. 8)	vuts, (tion)	5. Num of Derivat Securiti Acquire (A) or Dispose of (D) (Instr. 3 and 5)	arra ber iive iies eed eed	Acquired, Disponts, options, colors, options, colors,	sed of, or Benefi evertible securit able and exar)	7. Title as of Under Securities (Instr. 3 a	ned Amount lying s and 4)  Amount or Number of Shares	Derivative Security	Derivative Securities Beneficially Owned Following Reported Transaction(s	Ownersh Form of Derivativ Security: Direct (D or Indirects)	of Indirect Beneficial Ownership (Instr. 4)

#### **Reporting Owners**

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
HENNER DENNIS C/O MPM ASSET MANAGEMENT 111 HUNTINGTON AVE., 31ST FLOOR BOSTON, MA 02199	X	X				

## **Signatures**

Dennis Henner	06/14/2004
**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.
- (2) Vests monthly over two years from the date of grant.

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.