## FORM 4

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

OMB APPROVAL						
OMB Number:	3235-0287					
Estimated average	burden					
nours per response	e 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

(Print or Ty	pe Response	s)														
Name and Address of Reporting Person * HENNER DENNIS				2. Issuer Name <b>and</b> Ticker or Trading Symbol RIGEL PHARMACEUTICALS INC [RIGL]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director X 10% Owner						
	M ASSET		(Middle) MENT, 111 ST FLOOR	3. Date of Earliest Transaction (Month/Day/Year) 05/24/2004					Office	er (give title belo	ow)	Other (specify	below)			
BOSTON, MA 02199				4. If Amendment, Date Original Filed(Month/Day/Year)							6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person					
(City	)	(State)	(Zip)		,	Table	I - N	on-De	rivative	Securiti	es Acq	uired, Disp	osed of, or l	Beneficially	Owned	
1.Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Yea			2A. Deemed Execution Date, if any (Month/Day/Year)		if Co	(Instr. 8)		4. Securities Acquir (A) or Disposed of (Instr. 3, 4 and 5)		d of (D)	Beneficia	nt of Securities ally Owned Following Transaction(s)		6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership	
				(			Code	V	Amour	(A) or (D)	Price	Price			or Indirect (I) (Instr. 4)	(Instr. 4)
Common	Stock		05/24/2004				S		3,300 (1)	D	\$ 17.35	3,532,9	32,958		I	See Footnote
Reminder:	Report on a s	separate line fo	or each class of secur	ities be	eneficially	owne	d dire			-	ond to	the colle	ction of inf	ormation	SEC	1474 (9-02)
								cor	itained i	in this f	orm ar	re not requ	uired to res	spond unle trol numbe	ss	( , ,
												ally Owned				
Security	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/	Execution Da	te, if	Code	of Der Sec Acc (A) Disj of (	ivativ uritie uired or posed	and Expiration Date (Month/Day/Year)  We Ss (4)		An Un Sec	str. 3 and (Instr. 5) B O F R T (I			Owners Form of Derivat Security Direct ( or Indir	Ownershi (Instr. 4) D) ect	
					Code V	(A)	(D		te ercisable	Expirati Date	ion Tit	Amount or Number of Shares				

## **Reporting Owners**

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

### **Signatures**

/s/ Dennis Henner	05/26/2004
**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).
- The shares were sold as follows: 185 by MPM BioVentures III, L.P. ("BVIII"); 2,747 by MPM BioVentures III-QP, L.P. ("BVIII QP"); 232 by MPM BioVentures III GmbH
- (1) & Co. Beteiligungs KG ("BVIII KG"); 83 by MPM Bioventures III Parallel Fund, L.P. ("BVIII PF"); and 53 by MPM Asset Management Investors 2003 BVIII LLC ("BVAM LLC"). MPM BioVentures III GP, L.P. ("BVIII GP") and MPM BioVentures III LLC ("BVIII LLC") are the direct and indirect partners of BVIII, BVIII QP, BVIII PF and BVIII KG.
- (2) The shares are held as follows: 197,740 by BVIII; 2,940,915 by BVIII QP; 248,544 by BVIII KG; 88,819 by BVIII PF; and 56,940 by BVAM LLC. The Reporting Person is a member of BVIII LLC and BVAM LLC. The Reporting Person disclaims beneficial ownership of the securities except to the extent of his pecuniary interest therein.

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.