## FORM 4

Check this box if no longer subject to

Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## OMB APPROVAL

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	Check this box to indicate that a transaction was made pursuant to a
-	contract, instruction or written plan for the

purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

10b5-1(c). See Instr	ruction 10.						
1. Name and Address Schorno Dean			2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>RIGEL PHARMACEUTICALS INC</u> [ RIGL ]		tionship of Reporting Perso all applicable) Director	n(s) to Issuer 10% Owner	
(Last) RIGEL PHARMA	(First) ACEUTICALS, INC	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 02/02/2024	x	Officer (give title below) EVP & Chief Fina	Other (specify below) ncial Officer	
611 GATEWAY BLVD, SUITE 900 (Street) SOUTH SAN DE NUTE SAN CA 94080		94080	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv X	idual or Joint/Group Filing Form filed by One Repo Form filed by More thar	orting Person	
(City)	(State)	(Zip)					

## Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Transaction Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership
			Code	v	Amount	(A) or (D)	Price	<ul> <li>Transaction(s) (Instr. 3 and 4)</li> </ul>		(Instr. 4)
Common Stock	02/02/2024		<b>S</b> <sup>(1)</sup>		5,601	D	\$1.1296(2)	409,918	D	
Common Stock	02/05/2024		<b>S</b> <sup>(1)</sup>		7,027	D	\$1.14	402,891	D	

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

	 3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transac Code (In 8)	tion	Derivat Securit Acquire or Disp	5. Number of Derivative Securities Acquired (A) or Disposed of D) (Instr. 3, 4 and 5)		ate	and 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
			Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)		

Explanation of Responses:

1. These shares were sold to cover tax withholding due upon vesting of Restricted Stock Units. Such "sales to cover" were automatically effected to satisfy tax withholding obligations and do not represent a discretionary trade by the Reporting Person.

2. The price reported in Column 4 is the weighted average price. These shares were sold in multiple transactions ranging from \$1.1228 to \$1.13. Upon request, the Reporting Person undertakes to provide to the Issuer, any security holder of the Issuer, or the Securities and Exchange Commission staff, full information regarding the shares sold at each such separate price.

/s/ Raymond Furey (Attorney-in-D2/06/2024

Fact) \*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

\* 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.