FORM 4

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

OIVIB APPROV	AL
OMB Number:	3235-028
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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	5)														
1. Name and Address of Reporting Person *- LYONS GARY A				2. Issuer Name and Ticker or Trading Symbol RIGEL PHARMACEUTICALS INC [RIGL]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director10% Owner					
(Last) (First) (Middle) RIGEL PHARMACEUTICALS, INC., 1180 VETERANS BLVD. (Street) SOUTH SAN FRANCISCO, CA 94080 (City) (State) (Zip)				Date of Earliest Transaction (Month/Day/Year) 10/05/2005 4. If Amendment, Date Original Filed(Month/Day/Year) Table I - Non-Derivative Securities Acqui							6. Individual or Joint/Group Filing(Check Applicable Line) X_Form filed by One Reporting Person Form filed by More than One Reporting Person					
										X Fo						
										Acquired, l						
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Yes		2A. Deem Execution any (Month/D		Date, if	Cod (Ins	le (4. Securities Acquir (A) or Disposed of (Instr. 3, 4 and 5)					I I	Ownership Form:	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
							C	Code V	Amount		Price			\ \	nstr. 4)	
Reminder:					-			Persor						n contained orm display		474 (9-02)
Reminder:	•		Table I		vative			Persor in this	form arently val	re not rec lid OMB or Benefic	quired to re control nu- cially Owne	espond ui mber.				474 (9-02)
1. Title of	-	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if	4. Transac Code	vative puts, section (calls, wa 5. Numbe	er ative s (A) sed	Persor in this a curre cquired, Disputs, options, co 6. Date Exerc Expiration Da (Month/Day/	form arently valued of the content o	re not rec lid OMB or Benefic le securiti	quired to re control nu- cially Owne	espond unmber. d d Amount ing	8. Price of	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s	10. Ownersh Form of Derivativ Security: Direct (D or Indirect)	11. Natur of Indirec Beneficia e Ownershi (Instr. 4)
1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, if any	4. Transac Code	vative puts, section (calls, wa 5. Numboof Deriva Securities Acquired or Dispos of (D) (Instr. 3, and 5)	er ative s (A) sed	Persor in this a curre cquired, Disputs, options, co 6. Date Exerc Expiration Da (Month/Day/	form arently values of the control o	re not rec lid OMB or Benefic le securiti ad	cially Owne es) 7. Title and of Underly Securities	espond unmber. d d Amount ing	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported	10. Ownersh Form of Derivativ Security: Direct (D or Indirec	11. Natur of Indirec Beneficia e Ownershi (Instr. 4)

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
LYONS GARY A RIGEL PHARMACEUTICALS, INC. 1180 VETERANS BLVD. SOUTH SAN FRANCISCO, CA 94080	X					

Signatures

/s/Dolly Vance (Attorney-in-Fact)	10/05/2005
**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) The shares vest in equal monthly installments over three (3) years from the date of grant.

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

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