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

(OMB	APPROVAL

3235-0287 OMB Number: Estimated average burden 0.5 hours per response..

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

	I. 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_ Director 10% Owner						
(Last) (First) (Middle) RIGEL PHARMACEUTICALS, INC., 1180 VETERANS BLVD.		3. Date of Earliest Transaction (Month/Day/Year) 06/01/2007						Officer (giv	e title below)	Otl	er (specify below))			
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)					_X_ F	6. Individual or Joint/Group Filing(Check Applicable Line) X_ Form filed by One Reporting Person Form filed by More than One Reporting Person						
	SOUTH SAN FRANCISCO, CA 94080 (City) (State) (Zip)			Table I. Nan Derivative Securities Acqu					auired.	ured, Disposed of, or Beneficially Owned					
1.Title of S (Instr. 3)				2A. Deemed Execution Date r) any		3. Tra Code (Instr.	insaction 4	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		5. Ar Own Trans	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		eneficially d	6. 7 Ownership or Form: B	. Nature f Indirect eneficial
				(Month	/Day/Year	Coo	de V) or O) Prio		(Instr. 3 and 4)			Direct (D) Ownership or Indirect (I) (Instr. 4)	
Reminder:	Report on a s	separate line for each	1 class of securities	beneficia	lly owned	unectry	Persor in this	_	ot requi	ired to	respond	unless the	tion contai e form	ned SEC 14	174 (9-02)
Reminder:	Report on a	separate line for each	n class of securities	beneficia	ily owned	anecny		_						I and	15.4 (0.00)
1. Title of Derivative	2. Conversion	3. Transaction	Table II - 3A. Deemed Execution Date, if	Derivati (e.g., pu 4. Transac	ive Securi ts, calls, w 5. Nu tion of De	ies Acq arrants mber rivative	Person in this display quired, Display options, co	ns who res form are n ys a curren osed of, or l onvertible so ercisable and Date	ot requi tly valid Beneficia ecurities)	ired to it if OMB of the original of the origi	respond control r ned	8. Price of Derivative	9. Number Derivative	of 10. Ownership	11. Natur
1. Title of	2.	3. Transaction Date	Table II - 3A. Deemed Execution Date, if	Derivati (e.g., pu 4. Transac Code	ive Securi ts, calls, w 5. Nu tion of De Secur) Acqu	mber rivative ities ired (A) sposed	Persor in this display guired, Display options, co	ns who res form are n ys a curren osed of, or l onvertible so ercisable and Date	ot requitly valid Geneficia ecurities 7. Tof U	ired to a did omb	respond control r ned Amount	unless the number.	9. Number Derivative Securities Beneficially Owned Following Reported Transaction	Of 10. Ownership Form of Derivative Security: Direct (D) or Indirect (s) (I)	11. Natur p of Indire Beneficie Ownersh (Instr. 4)
1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	3. Transaction	Table II - 3A. Deemed Execution Date, if any	Derivati (e.g., pu 4. Transac Code	ive Securi ts, calls, w 5. Nu tion of De Secur or Di of (D (Instr	mber rivative ities irred (A) sposed)	Persor in this display display in this display in the person of the pers	ns who res form are n ys a curren osed of, or I onvertible so ercisable and Date hy/Year)	ot requitly valid Beneficia Becurities) 1 7. Tof U Sec (Ins	ired to a dome of OMB o	respond control r ned Amount	8. Price of Derivative Security	9. Number Derivative Securities Beneficially Owned Following Reported	Of 10. Ownership Form of Derivative Security: Direct (D) or Indirect	11. Natu p of Indire Benefici Ownersh (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)	06/01/2007
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) One thirty-sixth (1/36th) of the shares of Common Stock subject to the Option shall vest each month after the date of grant over a period of three (3)

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.