longer subject to

may continue. See

Instruction 1(b).

Section 16. Form 4 or Form 5 obligations

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

| OMB APPROVAL | | | | |
|--------------|--------|--|--|--|
| OMB Number: | 3235-0 | | | |

287 Estimated average burden 0.5 hours per response..

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 | P +P | / | | | | | | | | | | | | | | |
|--|---|------------------------|---|--|--|--|--|--|---|---|---------------------------------|--|--|---|---|-------------------------|
| 1. Name and Address of Reporting Person * RINGROSE PETER S | | | | 2. Issuer Name and Ticker or Trading Symbol RIGEL PHARMACEUTICALS INC [RIGL] | | | | | | CelationshipDirector | | ng Person(s) c all applicat | | | | |
| (Last) (First) (Middle) RIGEL PHARMACEUTICALS, INC., 1180 VETERANS BLVD. | | | | 3. Date of Earliest Transaction (Month/Day/Year) 06/01/2007 | | | | | | Officer (give | e title below) | Ot | her (specify belo | ow) | | |
| (Street) SOUTH SAN FRANCISCO, CA 94080 | | | | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | | _X_1 | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person _Form filed by More than One Reporting Person | | | | | | |
| (City | y) | (State) | (Zip) | | | Table | I - Non-Deri | vative Securitie | s Acquired, | , Disposed | of, or Bene | ficially Owi | ıed | | | |
| 1.Title of S (Instr. 3) | ecurity | | 2. Transaction Date (Month/Day/Year) | any | emed on Date, if /Day/Year | Code (Instr | (. | Securities Acq A) or Disposed of Instr. 3, 4 and 5) | of (D) Own Tran | | | Transaction(s) | | O Fo D | 6. Ownership Form: Direct (D) or Indirect | Beneficial Ownership |
| | | | | | | Co | de V A | (A) or (D) | Price | | | | (I) (Instr. 4) | | | |
| Reminder: | Report on a s | separate line for each | class of securities l | beneficial | ly owned | lirectly | Person in this | s who respon form are not r s a currently | equired to | respond | unless the | | ned SEC | 1474 (9-02) | | |
| | | | Table II - | Derivati | ve Securi | ies Acc | Person in this display quired, Dispo s, options, co | s who respon form are not r s a currently osed of, or Beno nvertible secur | equired to valid OMB eficially Own ities) | respond control r | unless the umber. | e form | | | | |
| 1. Title of Derivative Security | 2. Conversion | 3. Transaction | Table II - 3A. Deemed Execution Date, if | Derivati (e.g., put 4. Transaci Code | ve Securion (s., calls, we securion of De Securion Acqui | mber rivative ities red (A) posed | Person in this display quired, Dispos, options, co Expiration (Month/Da | s who respon form are not r is a currently osed of, or Bene envertible securer creisable and Date | equired to valid OMB eficially Own | respond control rened 1 Amount ing | unless the umber. | 9. Number Derivative Securities Beneficially Owned Following Reported Transaction | of 10. Owners Form of Derivati Security Direct (or Indirections) | 11. Nat of Indir Benefic Owners (Instr. 4 | | |
| 1. Title of Derivative Security | 2. Conversion or Exercise Price of Derivative | 3. Transaction Date | Table II - 3A. Deemed Execution Date, if any | Derivati (e.g., put 4. Transaci Code | ve Securities, calls, we securities of De Securities of Countries of C | ies Accarrants mber rivative ities red (A) posed | Person in this display quired, Disp s, options, co 6. Date Exe Expiration (Month/Da | s who respon form are not r s a currently osed of, or Bene nvertible secur creisable and Date y/Year) | equired to valid OMB eficially Own ities) 7. Title and of Underlying Securities | respond control rened 1 Amount ing | 8. Price of Derivative Security | 9. Number Derivative Securities Beneficially Owned Following Reported | of 10. Owners Form of y Derivati Security Direct (or Indire | 11. Nat of Indit Benefit Owners (Instr. 4 | | |

Reporting Owners

| | Relationships | | | | | |
|---|---------------|--------------|---------|-------|--|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | |
| RINGROSE PETER S 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.