FORM 4

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

OIVIB APPE	ROVAL
OMB Number:	3235-0287
Estimated average	burden
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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

Name and Address of Reporting Person * RINGROSE PETER S			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) 05/30/2008						Officer (give	e title below)	Oth	er (specify below)	
(Street) SOUTH SAN FRANCISCO, CA 94080				4. If Amendment, Date Original Filed(Month/Day/Year)					_X_	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) (State) (Zip)			Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially							ficially Own	ed			
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year		2A. Deemed Execution Date, if eny (Month/Day/Year) 3. Tra Code (Instr.		. 8)	1. Securities Acq A) or Disposed (Instr. 3, 4 and 5) (A) or (A) or (D)	Own Trai (Ins		Securities Beneficially wing Reported		Ownership Form: Direct (D)	. Nature f Indirect geneficial Ownership Instr. 4)			
			Table II -				display	form are not r ys a currently osed of, or Bene onvertible secur	valid OMB	control n				
	Conversion	ercise (Month/Day/Year) of ative	Transaction 3A. Deemed Execution Date, if	4. 5. Number of Derivati Securities (Instr. 8) Acquired (or Dispose of (D) (Instr. 3, 4,			s, options, co							
1. Title of Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative	Date	Execution Date, if any	Transac Code	of De Secur Acqu or Dis of (D (Instr	rivative ities (red (A) sposed 3, 4,	Expiration (Month/Da	ercisable and Date	7. Title and of Underly Securities (Instr. 3 an	ing		9. Number of Derivative Securities Beneficially Owned Following Reported	Ownershi Form of Derivative Security: Direct (D) or Indirect	Beneficia Ownersh (Instr. 4)
Derivative Security	Conversion or Exercise Price of Derivative	Date	Execution Date, if any	Transac Code	of De Secur Acqu or Dis of (D	rivative ities (red (A) posed 3, 4,	Expiration (Month/Da) Date Exercisable	ercisable and Date sy/Year) Expiration	7. Title and of Underly Securities	ing	Derivative Security	Derivative Securities Beneficially Owned Following	Ownershi Form of Derivative Security: Direct (D) or Indirec	of Indire Beneficie Ownersh (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)	05/30/2008
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 shall vest monthly over twelve (12) months from the date of grant.

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.