FORM 4

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

OMB APP	ROVAL
OMB Number:	3235-0287
Estimated average	burden
houre par raenones	0.5

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

	1 1	/														
	Name and Address of Reporting Person * Grossbard Elliott B				2. Issuer Name and Ticker or Trading Symbol RIGEL PHARMACEUTICALS INC [RIGL]						5. Re	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
RIGEL F	(Last) (First) (Middle) RIGEL PHARMACEUTICALS, INC., 1180 VETERANS BLVD.				3. Date of Earliest Transaction (Month/Day/Year) 02/01/2011						X	X Officer (give title below) Other (specify below) EVP, CMO				
SOUTH	SAN FRA	(Street) NCISCO, CA 94		4. If Ame	endme	nt, Date	e Orig	ginal Filed(M	onth/Day/Year)		_X_ F	Form filed by	One Reporting	p Filing(Checl Person Reporting Person	**	ne)
(Cit	y)	(State)	(Zip)			Ta	ble I	- Non-Deri	vative Secur	ities A	Acquired,	Disposed	of, or Bene	ficially Own	ed	
1.Title of S (Instr. 3)				2A. Deemed Execution D r) any (Month/Day/		Date, if C		(4	4. Securities Acqu (A) or Disposed o (Instr. 3, 4 and 5)		(D) Own Trans	5. Amount of Securities Be Dwned Following Reported Fransaction(s) Instr. 3 and 4)		-	6. Ownership Form: Direct (D) or Indirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)
							Cod	le V A	mount (A)		rice	(I) (Instr. 4)			,	
Reminder:	•							Person in this		ot req	uired to	respond	unless the	ion contair form	ed SEC	1474 (9-02)
				Derivati	ive Se	curities	Acq	Person in this t display uired, Dispo	s who resp form are no	ot required to the control of the co	uired to lid OMB cially Ownes)	respond control r	unless the			1474 (9-02)
1. Title of		3. Transaction	Table II - 3A. Deemed Execution Date, if	Derivati (e.g., pu 4. Transac Code	ive Sects, call 5 tion of S 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	curities ls, warr . Numb f Deriva ecuritie acquirec r Dispo f (D) Instr. 3,	er ative es d (A)	Person in this display uired, Disposoptions, co	s who responds a current osed of, or Bun or and osed of and other and other osed of the current	enefic curitie	uired to lid OMB	respond control rend ned Amount ing	unless the umber.	9. Number of Derivative Securities Beneficially Owned Following Reported	f 10. Owners Form of Derivat Security Direct (or Indir	11. Natur of Indire Beneficia ve Ownersh (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., pu 4. Transac Code	ive Sects, call 5 tion of S 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	curities ls, warr . Numb f Deriva ecuritie acquirec r Dispo f (D)	er ative es d (A)	Person in this display uired, Disposoptions, co	s who responds a current of section of sections of sec	ot requirements of the senefic curities of Section (In	lid OMB (cially Ownes) Title and f Underlyi ecurities	respond control rend ned Amount ing	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following	f 10. Owners Form of Derivat Security Direct (or Indir	11. Natur of Indire Beneficis Ownersh (Instr. 4)

Reporting Owners

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Grossbard Elliott B RIGEL PHARMACEUTICALS, INC. 1180 VETERANS BLVD. SOUTH SAN FRANCISCO, CA 94080			EVP, CMO				

Signatures

/s/Dolly Vance (Attorney-in-Fact)	02/02/2011
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) Vests monthly over one (1) year from January 1, 2011.

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.