FORM 4

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

OMB APPRO	VAL
OMB Number:	3235-0287
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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

	pe Response													
1. Name and Address of Reporting Person * SHERWIN STEPHEN 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) C/O RIGEL PHARMACEUTICALS, INC., 1180 VETERANS BLVD.				3. Date of Earliest Transaction (Month/Day/Year) 05/20/2011						Officer (giv	e title below)	Othe	er (specify below	v)
(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 PersonForm filed by More than One Reporting Person				
(Cit		(State)	(Zip)	Table I - Non-Derivative Securities Acqu				es Acquired	uired, Disposed of, or Beneficially Owned					
1.Title of S (Instr. 3)	Title of Security 2. Transaction Date (Month/Day/Year		Execution Date, if Code		e tr. 8)	4. Securities Acq (A) or Disposed (Instr. 3, 4 and 5) (A) or Amount (D)	r Disposed of (D) Owned Foll- Transaction (Instr. 3 and		× /		Ownership Form:	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Reminder:	Report on a s	separate line for each	ciass of securities t	benencia.	ny owned	direct	Perso	ns who respon					ed SEC 1	474 (9-02)
Reminder:	Report on a s	eparate line for eacl	Table II -	Derivati	ive Secur	ities A	Perso in this displa	ns who respon form are not r ys a currently	equired to valid OMB	respond control r	unless the		ed SEC 1	474 (9-02)
1. Title of		3. Transaction	Table II - 3A. Deemed Execution Date, if	Derivati (e.g., put 4. Transac Code	ive Securits, calls, τ 5. N of Γ Security Acquired or Γ of (I	umber erivativarities uired (aisposed)	Perso in this displa cquired, Displacts, options, continuous (Month/D	ns who respond form are not represently a currently cosed of, or Bendenvertible security and and an Date	equired to valid OMB	o respond B control r wned d Amount ving	unless the number.	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(f 10. Ownersh Form of Derivativ Security: Direct (E or Indirec	11. Natur of Indire Beneficia 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., put 4. Transac Code	ive Securits, calls, ca	ities A varran umber erivativirities uired (A isposed D) r. 3, 4,	Perso in this displate, options, control of the Exercisab	ns who response form are not response form are not response of, or Benconvertible securiversiable and a Date any/Year)	equired to valid OMB eficially Ownities) 7. Title and of Underly Securities	o respond B control r wned d Amount ving	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported	f 10. Ownersh Form of Derivativ Security: Direct (Dor Indirect	11. Natur of Indire Beneficis Ownersh (Instr. 4)

Reporting Owners

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

Signatures

/s/ Dolly Vance (Attorney-In-Fact)	05/20/2011
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) The shares vest monthly for 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.