FORM 4

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

OWR APPR	OVAL
OMB Number:	3235-0287
Estimated average	burden
hours per recognice	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. Name and Address of Reporting Person * RINGROSE PETER S			2. Issuer Name and Ticker or Trading Symbol RIGEL PHARMACEUTICALS INC [RIGL]						Relationship		ng Person(s) to all applicab			
	*	(First) MACEUTICAL D.		3. Date of Earliest Transaction (Month/Day/Year) 05/15/2013				Officer (giv	e title below)	Oth	er (specify below)		
SOUTH	SAN FRA	(Street) NCISCO, CA 94		4. If Ame	endment,	Oate Or	iginal Filed(M	Ionth/Day/Year)	_X_	Form filed by	One Reporting	p Filing(Check Person Reporting Persor)
(Cit	у)	(State)	(Zip)	Table I - Non-Derivative Securities Acquired,					red, Disposed of, or Beneficially Owned					
1.Title of S (Instr. 3)	ecurity		2. Transaction Date (Month/Day/Year)	any	emed on Date, i /Day/Yea	f Code (Instr	(. 8)	A. Securities Acqual A) or Disposed of Instr. 3, 4 and 5) (A) or (D)	of (D) Own Train		Securities Being Reported	d	Ownership of Form:	Beneficial Ownership
Reminder:							Person	s who respon	d to the co	ollection (of informat	tion contair	ed SEC 1	474 (9-02)
			Table II -				in this display	s who respond form are not read to read of, or Bene	equired to valid OMB ficially Ow	respond control r	unless the		ed SEC 1	474 (9-02)
1. Title of	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if	4. Transac Code	5. No of D Secular Acquired or D of (I	mber erivative rities hired (A sposed 9) r. 3, 4,	quired, Dispos, options, co 6. Date Excee Expiration (Month/Da	form are not reverse a currently versed of, or Bene onvertible security ercisable and Date	equired to valid OMB ficially Ow	respond control r red d Amount	unless the number.		f 10. Ownershi Form of Derivativ Security: Direct (D or Indirec	11. Natu p of Indire Benefici e Ownersh (Instr. 4)
1. Title of Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, if any	4. Transac Code	5. Notion of D Secution of D Acquior D of (I (Inst	warrant imber erivative rities iired (A isposed b) c. 3, 4,	in this display quired, Display 6. Date Exe Expiration (Month/Da) Date Exercisable	form are not researched to see a currently wood of, or Bene onvertible securior created and Date y/Year) Expiration	ficially Own of Underly Securities	respond control r red d Amount	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported	f 10. Ownershi Form of Derivativ Security: Direct (D or Indirec	11. Nature of Indire Beneficie Owners! (Instr. 4)

Reporting Owners

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

Signatures

/s/ Dolly Vance (Attorney-in-Fact)	05/28/2013
**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.