# FORM 4

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

OMB APPE	KOVAL
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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 *  Katkin Keith			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.			G DIG 1100	3. Date of Earliest Transaction (Month/Day/Year) 05/17/2018						Officer (give	e title below)	Oth	er (specify below)		
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)						_X_ F	6. Individual or Joint/Group Filing(Check Applicable Line)  X Form filed by One Reporting Person  Form filed by More than One Reporting Person					
SOUTH SAN FRANCISCO, CA 94080 (City) (State) (Zip)				Table I - Non-Derivative Securities Acqu						canired.	ured, Disposed of, or Beneficially Owned				
1.Title of S (Instr. 3)				any	on Date, it	3. Tra Code (Instr	nsaction	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		ed 5. Ar D) Own Trans	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		eneficially d	6. 7 Ownership or Form: B	Nature f Indirect eneficial
				(Month	/Day/Year	Co	de V	`	.) or D) Pr	(Instr	(Instr. 3 and 4) Director Intercor (I)		or Indirect (I	Indirect (Instr. 4)	
Reminder:	Report on a	separate line for each	i class of securities	beneficia	ny owned	uncerry	Person in this	_	ot requ	uired to	respond	unless the	tion contain form	ned SEC 14	74 (9-02)
Reminder:	Report on a	separate line for each	i class of securities	Denencia	ily owned	directly		_	pond t	o the co	llection	of informat	tion contain	ed SEC 14	74 (9-02)
1. Title of Derivative Security	2. Conversion or Exercise	3. Transaction Date	Table II -  3A. Deemed Execution Date, if any	Derivati (e.g., pu 4. Transac Code	ive Securi ts, calls, w 5. Nu tion of De Secur	ties Acc	Person in this display quired, Display s, options, c d. Date Ex Expiration (Month/Date 1)	ns who res form are n ys a currer losed of, or i bovertible s ercisable and Date	Benefici ecuritie d 7.	uired to it id OMB ( ially Own es)  Title and Funderlyinecurities	respond control r red Amount	8. Price of Derivative Security	9. Number of Derivative Securities	of 10. Ownership Form of	11. Natu
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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	5. Nution of De Securior Di of (D	ties Accarrant amber crivative crities irred (A sposed ) . 3, 4,	Persoin this display unired, Display options, continued to the Expiration (Month/Date Exercisable Exercisable displayed to the Exerc	ns who rest form are n ys a currer cosed of, or a convertible s ercisable and Date ny/Year)	Benefici ecuritie d 7. of Se (In	uired to it id OMB ( ially Own es)  Title and Funderlyinecurities	respond control r red Amount	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported	of 10. Ownership Form of Derivative Security: Direct (D) or Indirect	11. Natu of Indire Benefici Ownersh (Instr. 4)

### **Reporting Owners**

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

## **Signatures**

/s/ Dolly Vance (Attorney-in-Fact)	05/18/2018
**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 one (1) year from the date of grant subject to the reporting person's continuous service on the Company's Board of Directors.

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.