<b>FORM</b>	4
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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).

(Print or Type Pa

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

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response... 0.5

#### 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 I RODRIGUEZ RAUL R	2. Issuer Name RIGEL PHA			0.			5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last) (First) RIGEL PHARMACEUTICA VETERANS BLVD.	3. Date of Earliest Transaction (Month/Day/Year) 06/09/2022						X_Officer (give title below)         Other (specify below)           CEO, President					
(Street) SOUTH SAN FRANCISCO,	4. If Amendment, Date Original Filed(Month/Day/Year)						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)	1	fable I - N	on-E	Perivative Sec	uritie	es Acquir	ired, Disposed of, or Beneficially Owned				
1.Title of Security (Instr. 3)	Date H (Month/Day/Year) a	Execution Date, if	Code	on	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		· · ·	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	Ownership Form: Bo Direct (D) O	7. Nature of Indirect Beneficial Ownership		
			Code	v	Amount	(A) or (D)	Price		or Indirect (I) (Instr. 4)	(Instr. 4)		
Common Stock	06/09/2022		Р		1,000,000	А	\$ 0.6884 (1)	1,391,776	D			

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information SE contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1474 (9-02)

### Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(e.g., puts, calls, warrants, options, convertible securities)															
1. Title of	2.	3. Transaction	3A. Deemed	4.	5			6. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transactio	n N	Jumb	er	and Expiration	on Date	Amou	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code	0	f		(Month/Day	/Year)	Unde	rlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	D	Deriva	ative			Secur	rities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative				S	lecuri	ties			(Instr	. 3 and		Owned	Security:	(Instr. 4)
	Security				А	Acquir	red			4)			Following	Direct (D)	
						A) or							1	or Indirect	
						Dispos							Transaction(s)	· /	
						f(D)							(Instr. 4)	(Instr. 4)	
					(Instr. 3,										
					4	, and	5)								
											Amount				
								Date	Expiration		or				
								Exercisable		Title	Number				
								Exercisable	Date		of				
				Code V	/ (	(A)	(D)				Shares				

# **Reporting Owners**

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
RODRIGUEZ RAUL R RIGEL PHARMACEUTICALS, INC. 1180 VETERANS BLVD. SOUTH SAN FRANCISCO, CA 94080	Х		CEO, President				

### **Signatures**

/s/ Dolly Vance (Attorney-in-Fact)	06/13/2022
**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).
- The price reported in Column 4 is the weighted average price. These shares were purchased in multiple transactions ranging from \$0.67 to \$0.70. Upon request, the reporting (1) person undertakes to provide the Issuer, any security holder of the issuer, or the Securities and Exchange Commission, full information regarding the shares purchased at each such separate price.

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.