## FORM 4

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

OMB APPR	OVAL			
OMB Number:	3235-0287			
Estimated average burden				
hours per response.	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

(Print or Ty	pe Response	s)														
1. Name and Address of Reporting Person * Grossbard Elliott B				2. Issuer Name and Ticker or Trading Symbol RIGEL PHARMACEUTICALS INC [RIGL]							5.	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner X Officer (give title below) Other (specify below)  EVP, CMO				
(Last) (First) (Middle) RIGEL PHARMACEUTICALS, INC., 1180 VETERANS BLVD.			3. Date of Earliest Transaction (Month/Day/Year) 01/26/2015													
(Street) SOUTH SAN FRANCISCO, CA 94080			4. If Amendment, Date Original Filed(Month/Day/Year)							6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting PersonForm filed by More than One Reporting Person						
(City) (State) (Zip)					Т	able	I - Non-D	erivativ	e Securiti	es Acquire	d, Disposed	of, or Benef	icially Owne	d		
1.Title of S (Instr. 3)	Title of Security nstr. 3)  2. Transaction Date (Month/Day/Yes		Execution Date, if Code			(A) or Disposed (Instr. 3, 4 and 5		Own Tra	Owned Following Reported Transaction(s) (Instr. 3 and 4)			Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership			
Reminder:	Report on a s	separate line for each	n class of securities b	- Deriva	ative	Securities	s Acq	Perso in this a cur	ons wh s form rently v	are not r valid OMI	equired to B control : eficially Ow	respond ι number.		on containe form displa		1474 (9-02)
1. Title of Derivative Security (Instr. 3)	Conversion Date Execution Date or Exercise (Month/Day/Year) any		Execution Date, if	4. Transaction Code (Instr. 8)		5. Number of		6. Date Expiration	convertible secur xercisable and n Date Day/Year)		7. Title an of Underly Securities (Instr. 3 ar	ring		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s	Ownersh Form of Derivati Security Direct (I or Indire	Beneficial Ownershi (Instr. 4)
				Code	v	(A)	(D)	Date Exercisal		iration e	Title	Amount or Number of Shares		(Instr. 4)	(Instr. 4	)
Stock Option (Right to Buy)	\$ 2.14	01/26/2015		A		175,000		(1)	01/	26/2025	Common	<sup>1</sup> 175,000	\$ 0	175,000	D	

### **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)	01/28/2015
**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 over two (2) years from January 1, 2015.

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 no	ot required to respond unless the form displays a currently valid OMB number.