FORM 4

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

OMB APPROV	/AL
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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 * Goodwin Bradford S				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) 05/13/2015						Officer (giv	e title below)	Othe	r (specify below	7)
(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 Person Form filed by More than One Reporting Person				
(City) (State) (Zip)				Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned										
1.Title of S (Instr. 3)	Security		2. Transaction Date (Month/Day/Year)	any	emed on Date, /Day/Yea	f Code (Inst	e (r. 8) (1. Securities Acq (A) or Disposed (Instr. 3, 4 and 5) (A) or (A) or (D)	of (D) Owr Tran		Securities Being Reporte	d (Ownership Form:	7. Nature of Indirect Beneficial Ownership Instr. 4)
Reminder:	Report on a s	separate line for each	class of securities t	Denencia	ily owner	directi	Persor	ns who respon					ed SEC 1	474 (9-02)
Reminder:	Report on a s	separate line for each	Table II -	Derivati	ive Secur	ities Ac	Persor in this display	ns who respon form are not r ys a currently osed of, or Bene	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 Secur ts, calls, v 5. N of E Secur Or E of (I	ities Activarran umber erivative rities nired (Aisposed D) r. 3, 4,	quired, Disp is, options, co 6. Date Ex Expiration (Month/Da	ns who respon form are not r ys a currently osed of, or Bend onvertible secur ercisable and Date	equired to valid OMB	respond control r ned	unless the number.	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(f 10. Ownersh Form of Derivativ Security: Direct (D or Indirec	11. Naturip of Indire Beneficise 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, value of E Security of	ities Acvarran umber erivativ rities uired (Aisposed) r. 3, 4,	quired, Disp is, options, co 6. Date Ex. Expiration (Month/Da) Date Exercisable	ns who respon form are not r ys a currently cosed of, or Bend convertible secur ercisable and Date ay/Year)	equired to valid OMB eficially Own ities) 7. Title and of Underly Securities	respond control r ned	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported	f 10. Ownersh Form of Derivativ Security: Direct (D or Indirec	11. Naturip of Indire Beneficise Ownersh (Instr. 4)

Reporting Owners

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

Signatures

/s/Dolly Vance (Attorney-in-Fact)	05/14/2015
**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 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.