#### Edgar Filing: RIGEL PHARMACEUTICALS INC - Form 3

#### RIGEL PHARMACEUTICALS INC

Form 3

March 14, 2016

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

**OMB APPROVAL** 

**OMB** Number:

3235-0104

Expires:

response...

January 31, 2005

0.5

Estimated average burden hours per

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF **SECURITIES** 

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting

Person \*

A Duliege Anne-Marie

(Last)

(First)

(Middle)

2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol

Statement

(Month/Day/Year)

03/07/2016

4. Relationship of Reporting

(Check all applicable)

Chief Medical Officer

Person(s) to Issuer

RIGEL PHARMACEUTICALS INC [RIGL]

5. If Amendment, Date Original

Filed(Month/Day/Year)

RIGEL PHARMACEUTICALS, INC., 1180 VETERANS

**BOULEVARD** 

(Street)

Director \_X\_\_ Officer (give title below) (specify below)

10% Owner Other

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, Â CAÂ 94080

(City)

(Instr. 4)

1. Title of Security

(State)

(Zip)

2. Amount of Securities

Beneficially Owned

(Instr. 4)

3. Ownership

Table I - Non-Derivative Securities Beneficially Owned

4. Nature of Indirect Beneficial

Ownership (Instr. 5)

Form: Direct (D) or Indirect (I)

(Instr. 5)

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

SEC 1473 (7-02)

4.

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

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)

2. Date Exercisable and **Expiration Date** (Month/Day/Year)

3. Title and Amount of Securities Underlying **Derivative Security** 

5. Conversion Ownership Form of or Exercise

6. Nature of Indirect Beneficial Ownership

(Instr. 4)

Date **Expiration Title** Exercisable Date

Amount or Number of

Derivative Price of Derivative Security: Security Direct (D)

(Instr. 5)

1

#### Edgar Filing: RIGEL PHARMACEUTICALS INC - Form 3

Shares

or Indirect (I) (Instr. 5)

## **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Chief Medical Officer Â

Duliege Anne-Marie

RIGEL PHARMACEUTICALS, INC. 1180 VETERANS BOULEVARD

SOUTH SAN FRANCISCO, CAÂ 94080

**Signatures** 

/s/ Dolly Vance (Attorney-in-Fact) 03/14/2016

\*\*Signature of Reporting Person Date

# **Explanation of Responses:**

No securities are beneficially owned

- \* If the form is filed by more than one reporting person, see Instruction 5(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).

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.

Reporting Owners 2