Patel Sunil Form 3 October 08, 2010 UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB APPROVAL FORM 3 Washington, D.C. 20549 OMB 3235-0104 Number: January 31, Expires:

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 Ac Person <u>*</u> Patel Suni	-	orting	2. Date of Event Requiring Statement (Month/Day/Year)	3. Issuer Name and Ticker or Trading Symbol LIGAND PHARMACEUTICALS INC [LGND]					
(Last)	(First)	(Middle)	10/07/2010	4. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner			5. If Amendment, Date Original Filed(Month/Day/Year)		
1277 ROSE .	AVENUE (Street)						6. Individual or Joint/GroupFiling(Check Applicable Line)		
MOUNTAIN VIEW, CA 94040				OfficerOther (give title below) (specify below)		_X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State)	(Zip)	Table I - N	Non-Derivat	ive Securiti	es Be	neficially Owned		
1.Title of Secur (Instr. 4)	ity		2. Amount o Beneficially (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Na Owne (Instr			
Common Sto	ck		10,000		D	Â			
Reminder: Repo owned directly o	or indirectly.		ch class of securities benefic	- S	EC 1473 (7-02)			
	inform require	ation conta ed to respo	nd unless the form disp AB control number.	t					
Т	able II - Der	ivative Secu	tities Beneficially Owned (e	.g., puts, calls.	warrants, onf	ions, c	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 (Instr. 4)		4. Conversion or Exercise Price of	5. Ownership Form of Derivative	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of	Derivative Security	Security: Direct (D) or Indirect	

2005

0.5

Estimated average burden hours per

response...

Shares

(I) (Instr. 5)

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
Patel Sunil 1277 ROSE AVENUE MOUNTAIN VIEW, CA 94040	ÂX	Â	Â	Â		
Signatures						
By: John P. Sharp For: Sunil Patel	10/08/2	2010				
**Signature of Reporting Person	Dat	e				

Explanation of Responses:

* 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.