FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
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)

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 Person* Borisy Alexis				<u>Re</u>	2. Issuer Name and Ticker or Trading Symbol Revolution Medicines, Inc. [RVMD]								5. Re (Ched	k all applic	or		son(s) to Iss 10% Ov Other (s	ner	
(Last)	(Fi	rst)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 06/20/2024									below)	(give title		below)	pecily
C/O REVOLUTION MEDICINES, INC. 700 SAGINAW DR					4. If Amendment, Date of Original Filed (Month/Day/Year) 06/24/2024							Line)	6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person						
(Street) REDWO	OD C	A	94063		Rı	ule	10b5-	1(c)	Trans	sact	on Ind	ication			Form fi Person		e than	One Repor	ting
(City)	(S	tate)	(Zip)			Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.												to	
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transa Date (Month/D					Exe Day/Year) if an		2A. Deemed Execution Date, if any (Month/Day/Year)				ities Acquired (A) or d Of (D) (Instr. 3, 4 and			5. Amour Securitie Beneficia Owned F Reported	s Formally (D) of ollowing (I) (II)		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) or (D)		rice	Transacti (Instr. 3 a	tion(s)			(ilisti. 4)
Common Stock 06/20/				0/2024				A		4,248	18 A		\$ <mark>0</mark>	2,335,742(1)			D		
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Security (Instr. 3)	rivative Conversion Date Execution Date, curity or Exercise (Month/Day/Year) if any			ate,	4. Transaction Code (Instr. 8)		of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		!	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa		expiration Date	Title	Amo or Num of Shar	nber					
Stock Option (Right to Buy)	\$37.54	06/20/2024			A		15,955		(2)		06/19/2034	Common Stock	15,9	955	\$0	15,95:	5	D	

Explanation of Responses:

- 1. Includes 4,248 restricted stock units ("RSUs").
- 2. Shares subject to the Stock Option shall vest in full on the earlier of (i) the first anniversary of June 20, 2024 or (ii) immediately prior to the Issuer's annual meeting of stockholders following the date of grant, subject to the Reporting Person continuing in service through the vesting date.

Remarks:

On June 24, 2024, the Reporting Person filed a Form 4 that inadvertently reported incorrect amounts for the RSU and Stock Option awards granted to the Reporting Person on June 20, 2024. The correct amounts and footnote information are reflected in this amendment.

/s/ Jack Anders, as Attorney-in-06/28/2024 fact for Alexis Borisy

** Signature of Reporting Person

Date

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

- * 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.