Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, E	D.C. 20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL								
OMB Number: 3235-028								
Estimated average burden								
hours per response.	0.5							

1. Name and Address of Reporting Person* <u>Kelsey Stephen Michael</u>					2. Issuer Name and Ticker or Trading Symbol Revolution Medicines, Inc. [ RVMD ]							Check all a Dir	ationship of Reporting k all applicable) Director Officer (give title below)		10% O	wner	
(Last) (First) (Middle) C/O REVOLUTION MEDICINES, INC.					3. Date of Earliest Transaction (Month/Day/Year) 12/18/2023										Other ( below) rks	specify	
700 SAGINAW DRIVE				4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)							Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person					
(Street) REDWO	REDWOOD CA 94063												Form filed by More than One Reportin Person				
(City)	(St		Zip)	X	Rule 10b5-1(c) Transaction Indication  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.												
Table I - Non-Deriva  1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Ye			on (Year)	2A. Deemed Execution Date,		3. Tra	3. 4. Securities A Disposed Of (Code (Instr.			Acquire	d (A) or	5. A Sec Ben Owi	mount of urities eficially ned Following orted	For (D) ( Indi	m: Direct or rect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock		12/18/20	)23	23		_	(1)	-	2,088 <sup>(2)</sup>	(A) or (D)	<b>Price</b> \$25.901	(Ins	nsaction(s) tr. 3 and 4) 271,633 <sup>(4)</sup>		D		
		Tal	ole II - Deriva (e.g.,							oosed of, converti				ed			
1. Title of Derivative Security (Instr. 3)	erivative Conversion Date Execution Date, or Exercise (Month/Day/Year) if any Code (Inst					5. Num of Deriva Securi Acquii (A) or Dispos of (D) (Instr. and 5)	ative ities red sed	Expiration Date (Month/Day/Year)			Amo Secu Unde Deriv	le and unt of rities strlying vative rity (Instr. d 4)	8. Price of Derivativ Security (Instr. 5)		у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
							(D)	Date	ala ab!-	Expiration		or Number of					

## **Explanation of Responses:**

- 1. Transaction made pursuant to a Rule 10b5-1 instruction letter adopted on May 31, 2023 to satisfy the Reporting Person's tax withholding obligation upon the vesting of restricted stock units ("RSUs") after July 15, 2023.
- 2. Pursuant to an automatic sell-to-cover imposed by the terms of the RSUs award, the shares were sold following the vesting of the RSUs solely to cover applicable withholding taxes.
- 3. The transaction was executed in multiple trades in prices ranging from \$25.8901 to \$25.909, inclusive. The price reported in Column 4 above reflects the weighted average sale price. The reporting person hereby undertakes to provide to the Securities and Exchange Commission staff, the Issuer, or a security holder of the Issuer, upon request, full information regarding the number of shares sold at each respective price within the range set forth in this footnote.
- 4. Includes 59,013 RSUs.

## Remarks:

President, Research and Development

/s/ Jack Anders, as Attorneyin-fact for Stephen Michael 12/20/2023 <u>Kelsey</u>

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.