FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APE	PROVAL						
OMB Number:	3235-0287						
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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).

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*  Miller Vincent A.						2. Issuer Name and Ticker or Trading Symbol Revolution Medicines, Inc. [ RVMD ]									(Ch	eck all appli	ionship of Reportin all applicable) Director Officer (give title		10% Ov	ner
	,	N MEDICINES,	(Middle) INC.			3. Date of Earliest Transaction (Month/Day/Year) 03/22/2021								below			Other (s	вреспу		
(Street) REDWC CITY (City)	C.	tate)	94063 (Zip)		-							(Month/D			Lin	X Form Form Perso	filed by One filed by Mo	e Rep	g (Check Ap orting Perso n One Repo	n
		Tab	le I - No	n-Deri	vative	e Se	curit	ies Ad	cqu	uired,	Dis	posed o	of, or	Ben	eficial	ly Owne	t			
Date			2. Tran: Date (Month		- 1	2A. Deemed Execution Date, if any (Month/Day/Year		·	Code (Ins		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)		(A) or . 3, 4 and	Benefic Owned	es ially Following	Form (D) o	n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount		(A) or (D)	Price	Transac	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)	
Common	Stock			03/2	2/202	/2021			М		3,20	0	A	\$4.7	3 23,	23,333(1)		D		
Common	Stock		03/22/2021 s 3,200 D \$49 20,133 <sup>(1)</sup>					D												
		7										osed of onverti				Owned			,	•
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,	4. Transaction Code (Instr. 8)				Ex	6. Date Exercisa Expiration Date (Month/Day/Year			Amo Secu Unde Deriv	7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)
					Code	v	(A)	(D)	Da Ex	ate cercisabl		xpiration ate	Title	0 N 0	Amount or Number of Shares					
Stock Option (Right to Buy)	\$4.73	03/22/2021			M			1,600		(2)	0	8/08/2029	Com		1,600	\$0.00	16,39	7	D	
Stock Option (Right to	\$4.73	03/22/2021			M			1,600		(3)	0	8/08/2029	Com		1,600	\$0.00	12,78	5	D	

## Explanation of Responses:

- 1. Includes 1,808 Restricted Stock Units.
- 2. The option is early exercisable. One twenty-fourth (1/24th) of the shares initially subject to the option will vest on each monthly anniversary measured from August 9, 2019 (the "Vesting Commencement Date"), so that 100% of the shares subject to the option will be fully vested and exercisable as of the second anniversary of the Vesting Commencement Date, subject to the Reporting Person's continued service through each vesting date.
- 3. The option is early exercisable. One twelfth (1/12th) of the shares initially subject to the option will vest on each monthly anniversary measured from September 27, 2019 (the "Vesting Commencement Date"), so that 100% of the shares subject to the option will be fully vested and exercisable as of the first anniversary of the Vesting Commencement Date, subject to the Reporting Person's continued service through each vesting date.

/s/ Jack Anders, as Attorney-in-03/24/2021 fact for Vincent A. Miller

\*\* 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.