FORM 4

Check this box if no longer subject

to Section 16. Form 4 or Form 5 obligations may continue. See

Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	$D \subset$	20549	
vasilligion,	D.C.	20349	

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* Miller Vincent A.						2. Issuer Name and Ticker or Trading Symbol Revolution Medicines, Inc. [RVMD]										tionship of Reporting all applicable) Director		10% Own		wner
(Last) (First) (Middle) C/O REVOLUTION MEDICINES, INC. 700 SAGINAW DRIVE						3. Date of Earliest Transaction (Month/Day/Year) 09/28/2020										Office	ficer (give title low)		Other (below)	specify
(Street) REDWC					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Indiv _ine) X	vidual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Trai			2. Transaction	2A. Deemed Execution Da		ned on Date	e, 3	3. Transaction Code (Instr		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 ar				5. Am Secu Bene		nount of 6. Frities (Control of Control of C		n: Direct or rect (I)	7. Nature of Indirect Beneficial Ownership	
								-	Code	v	Amount	(A (I	A) or D)	Price		Transa	action(s) . 3 and 4)		r. 4)	(Instr. 4)
Common Stock				09/28/2020					S ⁽¹⁾		5,300		D	\$34.10	08(2)	26,833(3)			D	
Common Stock			09/29/202	20				S ⁽¹⁾		450		D	D \$34.07		26	6,383 ⁽³⁾		D		
		Tal	ole	II - Derivati (e.g., pu)wne	d			
1. Title of Derivative Conversion Date Execution Date, Security or Exercise (Month/Day/Year) if any				ransaction code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		piration	ercisable and		7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		Deri Sec (Ins	rice of vative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	/ D O (I	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
		Code	v	(A)	(D)	Dat Exe	te ercisabl	Expira le Date	tion	Title	Amount or Number of Shares									

Explanation of Responses:

- 1. Transaction made pursuant to a 10b5-1 trading plan adopted by the Reporting Person.
- 2. The transaction was executed in multiple trades in prices ranging from \$34.00 to \$34.38, 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.
- 3. Includes 1,808 Restricted Stock Units.
- 4. The transaction was executed in multiple trades in prices ranging from \$34.00 to \$34.09, 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.

/s/ Jack Anders, as Attorneyin-fact for Vincent A. Miller

09/30/2020

** 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.