FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20	)549	

Check this box if no longer subject
to Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

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*     Kelsey Stephen Michael					2. Issuer Name and Ticker or Trading Symbol Revolution Medicines, Inc. [ RVMD ]									Relationship of Reporting Person(s) to Issuer (Check all applicable)      Director 10% Owner					
(Last)	(Fii	est) (I N MEDICINES,	Middl	,	3. Date of Earliest Transaction (Month/Day/Year) 01/02/2024								X Officer (give title Other (specify below)  See Remarks						
700 SAGINAW DRIVE					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) REDWOOD CITY CA 94063											X Form filed by One Reporting Person Form filed by More than One Reporting Person								
(City)	(St	ate) (2	Zip)		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 satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.									ended to					
		Table	I - I	Non-Deriva	tive	Secu	rities	Acc	quire	ed, Di	sposed o	f, or l	Benefici	ially	Own	ed			
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/You		ear) E	2A. Deemed Execution Date, if any (Month/Day/Year)		on Date,			4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 ar			nd 5) Secur Benef Owne		icially d Following	Forn (D) o Indir	n: Direct or rect (I)	7. Nature of Indirect Beneficial Ownership			
							c	ode	V A	Amount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)		(Inst	r. 4)	(Instr. 4)	
Common Stock 01/02/20			01/02/202	.4			S <sup>(1)</sup>		13,330	D	\$29.098	9.0986(2)		224,969 <sup>(3)</sup>		D			
		Tal	ble	II - Derivati (e.g., ρι							posed of, convertil				Owne	d			
1. Title of Derivative Security (Instr. 3)						of	ired r osed ) : 3, 4	Expiration Date (Month/Day/Year)			Amo Secu Unde Deriv	ele and unt of irities erlying vative irity (Instr. d 4)	8. Price o Derivative Security (Instr. 5)			y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	, v	(A)	(D)	Date	e ercisable	Expiration Date	Title	Amount or Number of Shares						

## **Explanation of Responses:**

- 1. Transaction made pursuant to a 10b5-1 trading plan adopted by the Reporting Person on December 14, 2022.
- 2. The transaction was executed in multiple trades in prices ranging from \$29.00 to \$29.37, 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 59,013 restricted stock units

## Remarks:

President, Research and Development

/s/ Jack Anders, as Attorneyin-fact for Stephen Michael

01/04/2024

**Kelsey** 

\*\* 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.