FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549
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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(h)

## 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 ]									Check	all app Direc	licable)	ng Person(s) to 10% ( Other			
(Last) (First) (Middle) C/O REVOLUTION MEDICINES, INC. 700 SAGINAW DRIVE				3. Date of Earliest Transaction (Month/Day/Year) 06/17/2021									See Remarks						
(Street) REDWOOD CITY CA 94063				4. If Amendment, Date of Original Filed (Month/Day/Year)								, I	i. Indiv ine) X	fividual 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. Transaction Date (Month/Day/Yea				2A. Deem Execution		ned 3		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an			5. Am Secur Benef		ount of ities icially d Following	Forr (D) ( Indi	m: Direct or rect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	V	Amount	(A) or (D)	Price		Transa	nsaction(s) str. 3 and 4)			(111341. 4)
Common Stock 06/17/2023				1		5		<b>S</b> <sup>(1)</sup>		324	D	\$34.12	35 <sup>(2)</sup>	252,493(3)(4)			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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	tion Date,		ransaction of Code (Instr. Derivative			Expiration Date (Month/Day/Year)				Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		rice of ivative urity tr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	Code V (A) (D)		(D)	Date Exercisabl		Expiration Date	Title	Number of Shares						

## **Explanation of Responses:**

- 1. Pursuant to an automatic sell-to-cover imposed by the terms of the initial grant of the restricted stock units ("RSUs") awards, the shares were sold upon the vesting of the RSUs solely to cover applicable withholding taxes.
- 2. This transaction was executed in multiple trades in prices ranging from \$33.60 to \$34.13, 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 744 shares acquired under the Issuer's Employee Stock Purchase Plan on May 31, 2021.
- 4. Includes 14,063 RSUs.

## Remarks:

President, Research and Development

/s/ Jack Anders, as Attorneyin-fact for Stephen Michael 06/22/2021 **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.