FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APF	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)

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

Name and Address of Reporting Person* <u>Cislini Jeff</u>				2. Issuer Name and Ticker or Trading Symbol Revolution Medicines, Inc. [RVMD]										all app Direc	licable) tor	g Person(s) to I		wner	
(Last)	(Last) (First) (Middle) C/O REVOLUTION MEDICINES, INC.				3. Date of Earliest Transaction (Month/Day/Year) 06/17/2024								V	below	cer (give title w) General Co		Other (specify below)		
700 SAGINAW DRIVE				4. If Amendment, Date of Original Filed (Month/Day/Year)							· .	6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person							
(Street) REDWO	REDWOOD CA 94063												Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(St	rate) (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 to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.												nded to		
		Table	I - Nor	n-Derivat	tive	Secur	rities <i>A</i>	cqu	uired	l, Dis	posed o	f, or l	Benefic	ially	Own	ed			
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye				Execution		n Date,		Transaction Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 ar			nd 5) S B		5. Amount of Securities Beneficially Owned Following		n: Direct or ect (I)	7. Nature of Indirect Beneficial Ownership	
						Cod	de V	A	mount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)		(Instr. 4)		
Common Stock 06/17/2024				06/17/2024	:4		5		1)		1,757	D	\$37.387	74(2)	51,487(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)	ive Conversion Date y or Exercise (Month/Day/Year) if any			tion Date,	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expiration Date (Month/Day/Year)		Amo Secu Unde Deriv Secu	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		rice of evative urity tr. 5)	derivative Securities		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code V		(A) (I		Date) Exercisab		Expiration Date	Title	Amount or Number of Shares						

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. This transaction was executed in multiple trades in prices ranging from \$37.3845 to \$37.3904, 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 370 shares acquired under the Issuer's Employee Stock Purchase Plan on May 31, 2024.
- 4. Includes 44,217 RSUs.

/s/ Jack Anders, as Attorneyin-fact for Jeff Cislini

06/20/2024

** 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.