FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

OMB APPROVAL									
OMB Number: 3235-0287									
Estimated average burden									
hours por rosponso	. 0.5								

Instruc	tion 1(b).			Filed	pursua or Se	ant to S ection 3	ection 16(a) 0(h) of the l	) of the Investm	Secur ent Co	ities Exchang ompany Act o	e Act of : f 1940	1934		lioura	рег гезропзе.	0.5	
1. Name and Address of Reporting Person* <u>Wainwright Julie</u>					2. Issuer Name <b>and</b> Ticker or Trading Symbol TheRealReal, Inc. [ REAL ]								heck all ap Dire	plicable) ctor		10% Owner	
	(Fii EREALREA	AL	(Middle)				3. Date of Earliest Transaction (Month/Day/Year) 06/15/2020							Officer (give title Other (specification)  CEO, President and Chairperson			
(Street) SAN FRANCISCO CA 94133					4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Lir	ne) X Forn Forn	idual or Joint/Group Filing (Check A Form filed by One Reporting Perso Form filed by More than One Repo Person				
(City)	(St		Zip)														
		Table	I - No	n-Deriva	tive	Secur	ities Acc	quirec	d, Dis	sposed of	, or Be	enefici	ally Owr	ned			
Date			2. Transacti Date (Month/Day	Execution (Year) if any		2A. Deemed Execution Date, f any (Month/Day/Year)				4. Securities Acquired (A) on Disposed Of (D) (Instr. 3, 4			ount of ities ficially d Following	6. Ownership Form: Direct (D) or Indirec (I) (Instr. 4)	of Indirect t Beneficial Ownership		
								Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)	
Common Stock				06/15/2020				S <sup>(1)</sup>		58,941	D	\$12.4	B <sup>(2)</sup> 4,0	648,024	D		
Common Stock 0			06/15/20	.020			S <sup>(1)</sup>		61,059	D	\$13.0	2 <sup>(3)</sup> 4,	586,965	D			
		Та	ble II -							oosed of, o				d			
1. Title of Derivative Conversion or Exercise Price of Derivative Security (Instr. 3)  3. Transaction Date (Month/Day/Year) (Month/Day/Year)  3. Transaction Date (Month/Day/Year) if any (Month/Day/Y		tion Date,	4. Transaction Code (Instr. 8) Securities Acquired (A) or Disposed		Expiration Date			Amount of Der Securities Sec		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported	Ownersh Form: y Direct (Dor Indire (I) (Instr.	Beneficial Ownership ct (Instr. 4)				

## **Explanation of Responses:**

1. The sales reported on this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on May 11, 2020, as amended.

Code

2. Represents the weighted average sales price. The shares were sold in multiple transactions at prices ranging from \$11.87 to \$12.8699. Reporting Person undertakes to provide TheRealReal, Inc., any security holder of TheRealReal, Inc., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in this Form 4.

Exercisable

of (D)

(A)

(Instr. 3, 4 and 5)

(D)

3. Represents the weighted average sales price. The shares were sold in multiple transactions at prices ranging from \$12.87 to \$13.8699. Reporting Person undertakes to provide TheRealReal, Inc., any security holder of TheRealReal, Inc., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in this Form 4.

> By: Matt Gustke For: Julie Wainwright

Title

Expiration

Date

Amount Number

Shares

(Instr. 4)

Transaction(s)

06/17/2020

\*\* 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.