FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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 OMB Number: 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* SHANNON TIMOTHY M						2. Issuer Name and Ticker or Trading Symbol ARVINAS, INC. [ARVN]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
SHANNON TIMOTHY W											-			X	Direc	ctor		10% (Owner
(Last) 285 RIVI	•	rst) (Middle) /ENUE, SUITE 250				3. Date of Earliest Transaction (Month/Day/Year) 03/28/2019								Officer (give title below)				Other (specify below)	
,						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable					
(Street)						.,								Line)					
WESTPO	WESTPORT CT 06880													X 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/						Execution D			3. Transa Code (1 8)			s Acquired (A) or f (D) (Instr. 3, 4 ar		5. Amount of Securities Beneficially Owned Follo		ies cially Following	Form (D) o	wnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership
									Code	v	Amount	(A) or (D)	Price		Transa	ed ction(s) 3 and 4)			(Instr. 4)
Common Stock 03/28/20					019	19					3,500	A	\$14.6	885	58,898			D	
Common Stock													4,9		,989,554		I	See footnote ⁽¹⁾	
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. Conversio or Exercise Price of Derivative Security		3. Transaction Date (Month/Day/Year)	if any	emed ion Date, /Day/Year)		ransaction Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		e Exerc tion D h/Day/		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		Dei Sed (Ins	Price of rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transactions (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)
					Code	v	(A)	(D)	Date Exerci	sable	Expiration Date	Title	Amount or Number of Shares						

Explanation of Responses:

1. These shares are held directly by Canaan IX L.P. The Reporting Person is a non-managing member of Canaan Partners IX LLC, the general partner of Canaan IX L.P. The Reporting Person does not have voting, investment or dispositive power over any of the shares directly held by Canaan IX L.P. and disclaims beneficial ownership of the shares except to the extent of his pecuniary interest therein, if any, and this report shall not be deemed an admission that the Reporting Person is the beneficial owner of the shares for purposes of Section 16 of the Securities Exchange Act of 1934, as amended, or for any other purpose

Remarks:

/s/ Matthew Batters, as attorney-in-fact for Timothy M 04/01/2019 Shannon

** 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.