FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	<b>OF CHANGES</b>	IN BENEFICIAL	<b>OWNERSHIP</b>

OMB APPROVAL										
OMB Number:	3235-028									
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0.5

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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).				ursuant to Section 16(a) or Section 30(h) of the I					934	<u> </u>	,	
1. Name and Address of Reporting Person*  Taylor Ian  (Last) (First) (Middle)  C/O ARVINAS, INC.  5 SCIENCE PARK, 395 WINCHESTER AVE.				Issuer Name and Ticker or Trading Symbol ARVINAS, INC. [ ARVN ]      Date of Earliest Transaction (Month/Day/Year) 09/30/2019						tionship of Reporting Person(s) to Issuer all applicable)  Director 10% Owner Officer (give title below)  Chief Scientific Officer		Owner (specify
(Street) NEW HAVEN (City)	CT (State)	06511 (Zip)		I. If Amendment, Date o	of Origin	al File	d (Month/Day/	Year)	6. Indi Line)	ridual or Joint/Group Form filed by Ond Form filed by Mod Person	e Reporting Pers	son
		Table I - No	n-Derivati	ve Securities Acc	quirec	l, Dis	sposed of,	or Be	neficially	Owned		
Date		2. Transaction Date (Month/Day/Yo	Execution Date,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) of (D) (Instr. 3, 4)  Amount (A) or (D) Prior			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	

## Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

**S**<sup>(1)</sup>

 $S^{(1)}$ 

			(e.g., p	uts, c	alis,	warr	ants,	options,	convertib	ie se	curities)				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code ( 8)		5. Nu of Deriv Secu Acqu (A) of Dispo of (D) (Instr	rative rities sired r osed )	6. Date Exerc Expiration D (Month/Day/\)	ate	7. Title Amou Securi Under Deriva Securi and 4)	nt of ties lying tive ty (Instr. 3	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

## **Explanation of Responses:**

Common Stock

Common Stock

1. The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on March 29, 2019.

09/30/2019

09/30/2019

- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$21.36 to \$22.28, inclusive. The reporting person undertakes to provide to the Issuer, any security holder of the Issuer or the Staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within such range.
- 3. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$22.39 to \$22.75, inclusive. The reporting person undertakes to provide to the Issuer, any security holder of the Issuer or the Staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within such range.

## Remarks:

/s/ Matthew Batters, as attorney-in-fact for Ian Taylor

D

D

8,700

1,300

\$21.76(2)

\$22.54(3)

76,796

75,496

D

D

10/02/2019

\*\* 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.