FORM 3

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

## Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0104

Estimated average burden

0.5

hours per response:

# INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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*     ORBIMED ADVISORS LLC			Requiring Stat	Date of Event equiring Statement Month/Day/Year) 9/26/2018  3. Issuer Name and Ticker or Trading Symbol ARVINAS HOLDING COMPANY, LLC [ ARVN ]						
(Last)	(First) (Middle) NGTON AVENUE, 54TH FLOOR				4. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director X 10% Owner			5. If Amendment, Date of Original Filed (Month/Day/Year)		
(Street) NEW YORK (City)		10022 (Zip)			Officer (give title below)	Other (spe below)	cify 6. Inc	Form filed by	//Group Filing (Check y One Reporting Person y More than One erson	
Table I - Non-Derivative Securities Beneficially Owned										
1. Title of Security (Instr. 4)					2. Amount of Securities Beneficially Owned (Instr. 4)			lature of Indirect Beneficial Ownership str. 5)		
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)										
1. Title of Derivative Security (Instr. 4)			2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise	5. Ownership Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
		Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Price of Derivative Security	Direct (D) or Indirect (I) (Instr. 5)			
Series B Prefer	red Stock		(1)	(1)	Common Stock	1,385,252	(1)	I	See Footnote <sup>(3)(4)</sup>	
Series C Prefer	red Stock		(2)	(2)	Common Stock	218,558	(2)	I	See Footnote <sup>(3)(4)</sup>	
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#### 1. Name and Address of Reporting Person ORBIMED ADVISORS LLC (Last) (Middle) (First) 601 LEXINGTON AVENUE, 54TH FLOOR (Street) **NEW YORK** 10022 NY (Citv) (State) (Zip) 1. Name and Address of Reporting Person OrbiMed Capital GP VI LLC (Last) (First) (Middle) 601 LEXINGTON AVENUE, 54TH FLOOR (Street) **NEW YORK** NY 10022 (City) (State) (Zip)

## **Explanation of Responses:**

- 1. The Series B Preferred Stock is convertible into Common Stock on a 3.25-for-one basis into the number of shares of Common Stock shown in Column 3 at any time at the holder's election and automatically upon the closing of the Issuer's initial public offering without payment of further consideration. The shares have no expiration date.
- 2. The Series C Preferred Stock is convertible into Common Stock on a 3.25-for-one basis into the number of shares of Common Stock shown in Column 3 at any time at the holder's election and automatically upon the closing of the Issuer's initial public offering without payment of further consideration. The shares have no expiration date.
- 3. These securities are held of record by OrbiMed Private Investments VI, LP ("OPI VI"). OrbiMed Capital GP VI LLC ("GP VI") is the sole general partner of OPI VI, and OrbiMed Advisors LLC ("Advisors") is the managing member of GP VI. By virtue of such relationships, GP VI and Advisors may be deemed to have voting and investment power with respect to the shares held by OPI VI and as a result may be deemed to have beneficial ownership of such shares. OrbiMed Advisors exercises investment and voting power through a management committee comprised of Carl L. Gordon, Sven H. Borho and Jonathan T. Silverstein.
- 4. This report on Form 3 is jointly filed by GP VI and Advisors. Each of the reporting persons disclaims beneficial ownership of the securities reported herein for purposes of Rule 16a-1(a) under the Securities Exchange Act of 1934, as amended (the "Exchange Act"), except to the extent of its pecuniary interest therein, if any. This report shall not be deemed an admission that any of the Reporting Persons is a beneficial owner of such securities for the purpose of Section 16 of the Exchange Act, or for any other purpose.

/s/ Carl L. Gordon, Authorized Signatory

09/26/2018

\*\* Signature of Reporting Person

Date

- $^{\star}$  If the form is filed by more than one reporting person, see Instruction 5 (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.