FORM 4

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

Washington, D.C. 20549

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

l	UIVIB APPRO	VAL						
l	OMB Number:	3235-0287						
l	Estimated average burden							
l	hours per response:	0.5						

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person*  Crews Craig Martin  (Last) (First) (Middle)  C/O ARVINAS, INC.  5 SCIENCE PARK, 395 WINCHESTER AVE.				<u>A</u> 	2. Issuer Name and Ticker or Trading Symbol ARVINAS HOLDING COMPANY, LLC [ ARVN ]  3. Date of Earliest Transaction (Month/Day/Year) 09/26/2018								Relationship of Reporting Person(s) to Issuer neck all applicable)  Director X 10% Owner  Officer (give title below)  Other (specify below)					
(Street) NEW HA	AVEN C		06511 (Zip)	4.	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. l Lin	Individual or Joint/Group Filing (Check Applicable te)  X Form filed by One Reporting Person Form filed by More than One Reporting Person					
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Trans Date			Fransactio	action 2A. Deemed Execution Date,		3. Transact Code (In	3. Transaction Code (Instr. 2)			ed (A) or	or 5. Amour		s For ally (D) ollowing (I) (	Form (D) or	m: Direct or Indirect Instr. 4)	7. Nature of Indirect Beneficial Ownership		
						Code	,	Amount	(A) or (D)		₹	Transactio	nsaction(s) tr. 3 and 4)			Instr. 4)		
	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. Conversion or Exercise Price of Derivative Security	3. Transaction Date Date (Month/Day/Year)   3. A. Deemed Execution Date, if any (Month/Day/Year)   5. Numb Derivativ Securitie (Month/Day/Year)   6. Numb Derivativ Securitie Acquired or Dispoor of (D) (in		Number of erivative ecurities (Month/Day/Year)  f (D) (Instr. 4 and 5)  6. Date Exercisable and Expiration Date (Month/Day/Year)  G Securities Underlying Derivative Securities (Instr. 3 and 4)					ies g Security	Derivative Security		9. Number of derivative Securities Beneficially Owned Following Reported	e s illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
				Code	v	(A)	(D)	Date Exercisable	Ex Da	piration te	Title	Amount or Number of Shares			Transacti (Instr. 4)	on(s)		
Stock Option (right to buy)	\$16	09/26/2018		J <sup>(1)</sup>		31,360		(2)	09/	/25/2028	Common Stock	31,360	:	\$0.00	31,36	0	D	
Stock Option (right to buy)	\$16	09/26/2018		J <sup>(1)</sup>		203,790		(2)	09/	/25/2028	Common Stock	203,790	) :	\$0.00	203,79	90	D	

## **Explanation of Responses:**

- 1. These option awards were granted to the Reporting Person under the Issuer's 2018 Stock Incentive Plan in consideration for consulting services. The Reporting Person beneficially owns more than 10% of the outstanding stock of the Issuer.
- 2. These option awards were granted on September 26, 2018 and the shares underlying the awards shall vest in equal quarterly installments following September 26, 2018 through September 26, 2021.

## Remarks:

/s/ Matthew Batters, as attorney-in-fact for Craig

09/28/2018

Martin Crews

\*\* 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.