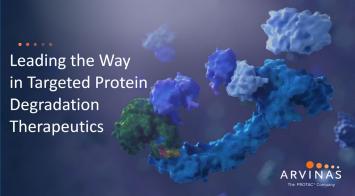


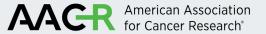
APRIL 10-15, 2021 AND MAY 17-21, 2021 * AACR.ORG * AACR.ORG/AACR2021

The Discovery of ARV-471, an Orally Bioavailable Estrogen Receptor Degrading PROTAC[®] for the Treatment of Patients with Breast Cancer

Lawrence B. Snyder, PhD Executive Director Medicinal Chemistry Arvinas Inc, New Haven, CT



Author Block: Lawrence B. Snyder, John J. Flanagan, Yimin Qian, Sheryl M. Gough, Monica Andreoli, Mark Bookbinder, Gregory Cadelina, John Bradley, Emma Rousseau, Julian Chandler, Ryan Willard, Jennifer Pizzano, Craig M. Crews, Andrew P. Crew, John Houston, Marcia Dougan Moore, Ron Peck, Ian Taylor. Arvinas, New Haven, CT, Yale, New Haven, CT



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Lawrence Snyder

I have the following financial relationships to disclose: Stockholder in: Arvinas Inc Employee of: Arvinas Inc

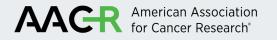
Safe Harbor and Forward Looking Statements

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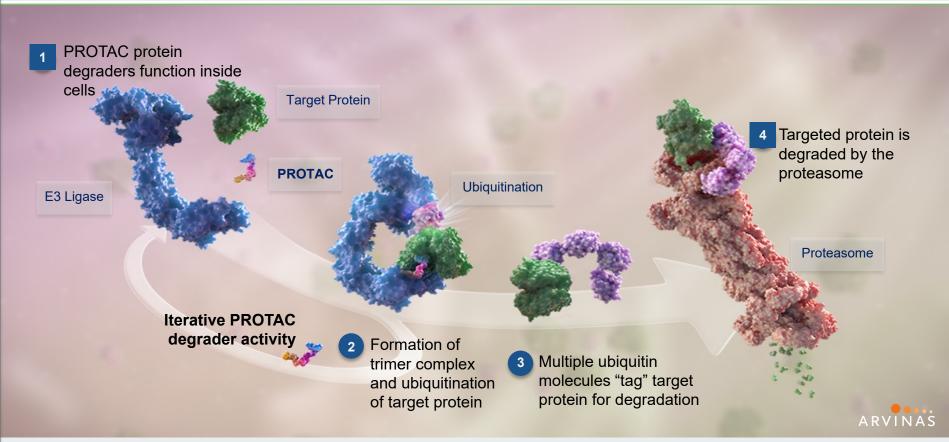
This presentation contains forward-looking statements within the meaning of The Private Securities Litigation Reform Act of 1995 that involve substantial risks and uncertainties, including statements regarding the development and regulatory status of our product candidates, such as statements with respect to our lead product candidates, ARV-110, ARV-471 and ARV-766 and other candidates in our pipeline, and the timing of clinical trials and data from those trials and plans for registration for our product candidates, and our discovery programs that may lead to our development of additional product candidates, the potential utility of our technology and therapeutic potential of our product candidates, the potential commercialization of any of our product candidates, the potential benefits of our arrangements with Yale University, our collaborative partnerships, and the Bayer joint venture, and the sufficiency of our cash resources. All statements, other than statements of historical facts, contained in this presentation, including statements regarding our strategy, future operations, future financial position, future revenues, projected costs, prospects, plans and objectives of management, are forward-looking statements. The words "anticipate," "believe," "estimate," "expect," "intend," "may," "might," "plan," "predict," "project," "target," "potential," "will," "would," "could," "should," "continue," and similar expressions are intended to identify forward-looking statements, although not all forward-looking statements contain these identifying words.

We may not actually achieve the plans, intentions or expectations disclosed in our forward-looking statements, and you should not place undue reliance on our forward-looking statements. Actual results or events could differ materially from the plans, intentions and expectations disclosed in the forward-looking statements we make as a result of various risks and uncertainties, including but not limited to: whether we will be able to successfully conduct Phase 1/2 clinical trials for ARV-110 and ARV-471, complete other clinical trials for our product candidates, and receive results from our clinical trials on our expected timelines, or at all, whether our cash resources will be sufficient to fund our foreseeable and unforeseeable operating expenses and capital expenditure requirements, each party's ability to perform its obligations under our collaborations and/or the Bayer joint venture, our expected timeline and other important factors, any of which could cause our actual results to differ from those contained in the forward-looking statements, discussed in the "Risk Factors" section of the Company's quarterly and annual reports on file with the Securities and Exchange Commission. The forward-looking statements contained in this presentation reflect our current views as of the date of this presentation with respect to future events, and we assume no obligation to update any forward-looking statements except as required by applicable law. The Arvinas name and logo are our trademarks. We also own the service mark and the registered U.S. trademark for PROTAC[®]. The trademarks, trade names and service marks appearing in this presentation are the property of their respective owners. We have omitted the [®] and [™] designations, as applicable, for the trademarks named in this presentation.

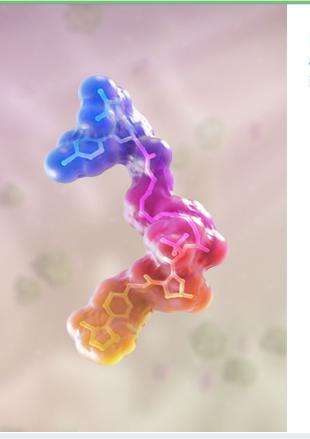
This presentation also contains estimates and other statistical data made by independent parties and by us relating to market size and other data about our industry. This data involves a number of assumptions and limitations, and you are cautioned not to give undue weight to such data and estimates. In addition, projections, assumptions and estimates of our future performance and the future performance of the markets in which we operate are necessarily subject to a high degree of uncertainty and risk. PROTAC[®] protein degraders harness the UPS to induce the degradation of disease-causing proteins



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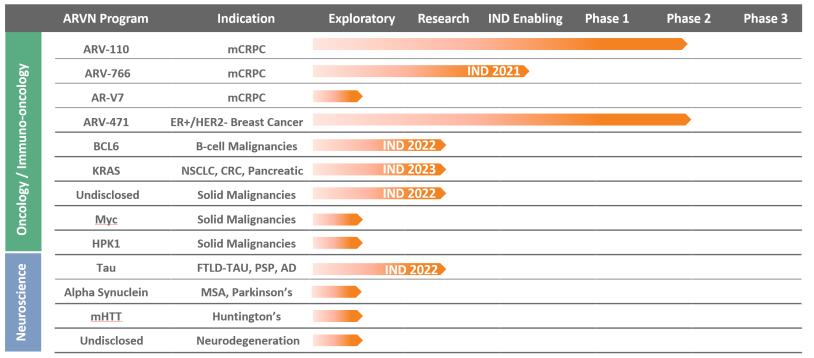
PROTAC[®] protein degraders combine the advantages of ACCR American Association for Cancer Research*



PROTAC protein degraders have distinct advantages over both small molecule inhibitors and gene-based medicines	PROTAC™ Protein Degraders	Small Molecule Inhibitors	Gene-Based Medicines
Eliminate pathogenic proteins	\checkmark	×	
Target scaffolding function	1	x	
Potential to treat "undruggable" proteins	\checkmark	×	
Iterative mechanism of action	~	×	×
Broad tissue penetration	\checkmark		×
Orally bioavailable	~		×
Ease of manufacturing	\checkmark		×

Arvinas' pipeline encompasses a range of validated and undruggable targets in oncology, I-O, and neuroscience AMERICAN American Association for Cancer Research*

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Note: Pipeline is non-exhaustive and IND dates are anticipated.

mCRPC, metastatic castration-resistant prostate cancer; ER+/HER2-, estrogen receptor+/human epidermal growth factor receptor 2-; NSCLC, non-small-cell lung carcinoma; CRC, colorectal cancer; FTLD-tau, frontotemporal lobar degeneration-tau; PSP, progressive supranuclear palsy; MSA, multiple systems atrophy

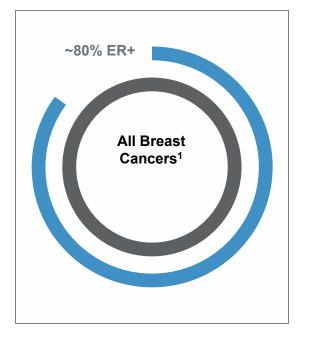


Breast Cancer is the Second Leading Cause of Cancer Death in Women



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Breast cancer is the second leading cause of cancer death in women



Types of Breast Cancer

- Breast cancer is the second most common cancer in women
- ~268,000 women are expected to be diagnosed with invasive breast cancer in the US in 2019²
- Metastatic breast cancer accounts for ~6% of newly diagnosed cases³

Targeted Approaches to Treat ER+ Breast Cancer

- Fulvestrant has validated the value of ER degradation
- After 6 months of fulvestrant treatment, up to 50% of ER baseline levels remain⁴

A superior ER degrader is needed

1 National Cancer Institute, Hormone Therapy for Breast Cancer 2. American Cancer Society; 3 Malmgren, J.A., Breast Cancer Res Treat (2018) 167:579–590; 4 Gutteridge et. Al., Breast Cancer Res Treat 2004;88 suppl 1:S177;

locally advanced or metastatic breast cancer E Petential as both a single agent and in combination with CDK4/6

Potential as both a single agent and in combination with CDK4/6 inhibitors

ARV-471 is in development for the treatment of women with ER+

Orally bioavailable estrogen receptor-targeted PROTAC

ARV-471 Degrades ER in ER+ Breast Cancer Cell Lines

- ARV-471 induces ER degradation in multiple ER+ breast cancer cell lines, including MCF-7 cells and ESR1-mutant lines¹
- **DC**₅₀ = **1.8 nM** in MCF7 cells²

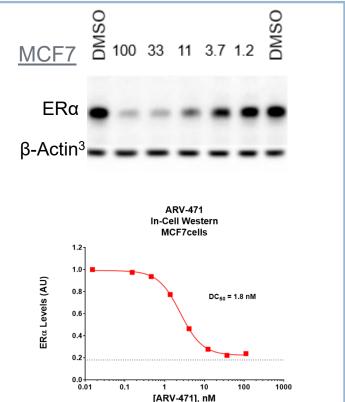
protein degrader

¹ Also tested: MB-134-VI, T47D, D538G, Y537S, ZR-75-1, BT474, CAMA-1

 2 DC₅₀ = Half-maximal degradation concentration

³ Beta-actin is a protein ARV-471 and fulvestrant are not targeted to degrade, and is included as a loading control

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ARV-471 is a Potent Degrader of ER in multiple cell lines

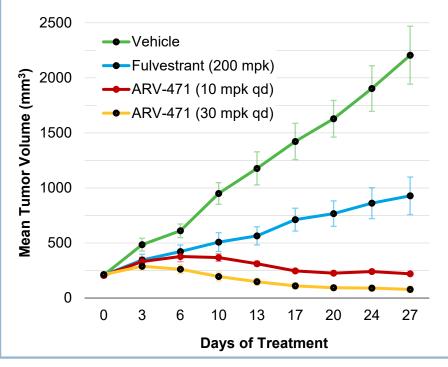
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ARV-471 Exhibits Superior TGI vs Fulvestrant in a Y537S (ER Gene Mutation) PDX Model

ARV-471 *In Vivo* Preclinical Development

- Oral, daily dose of ARV-471 inhibited tumor growth by 99% at 10 mpk and 106% at 30 mpk in an ESR1 mutant PDX model (*at right*)
- Superior inhibitor of tumor growth compared to fulvestrant¹
- In corresponding quantitative western blots, ER is reduced by 79% and 88% in the 10 mpk and 30 mpk arms, respectively, vs. 63% for fulvestrant

Tumor Growth Inhibition in Patient Derived Xenograft Model with a Y537S ESR1 Mutation



¹ Fulvestrant schedule: 2x weekly x2 / q7dx2



In Combination with Palbociclib, ARV-471 Exhibits Superior Tumor Shrinkage Versus Fulvestrant

ARV-471 *In Vivo* Preclinical Development

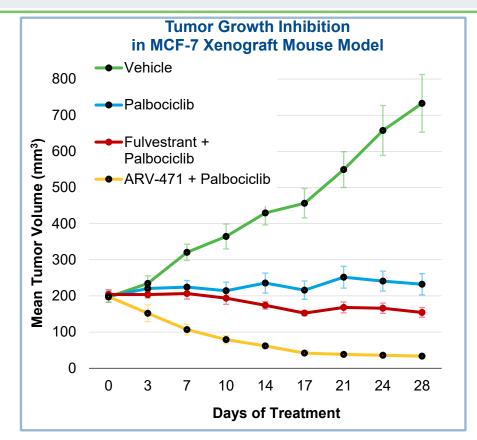
- Achieved significant tumor shrinkage in combination with palbociclib (131% TGI)
 - In all 10 mice in experiment, tumors reduced by >80%
- Superior tumor shrinkage (in combination with palbociclib) compared to fulvestrant (108% TGI)

-Palbociclib arm: 60 mpk po qd; 94% TGI.

-Fulvestrant + Palbociclib arm: Fulvestrant 200 mpk sc biwx 2, qwx 3 + palbociclib 60 mpk po qd; 108% TGI

-ARV-471 + Palbociclib arm: ARV-471 30 mpk po qd + palbociclib 60 mpk po qd; 131% TGI



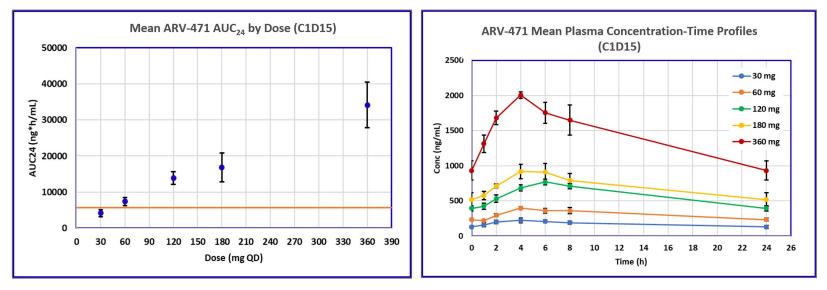




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ARV-471's PK is dose proportional; exposures far exceed preclinical efficacy thresholds

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The orange line represents the efficacious exposure for tumor regression in preclinical models⁺

Effective half-life $(T_{1/2}) \approx 28$ hours

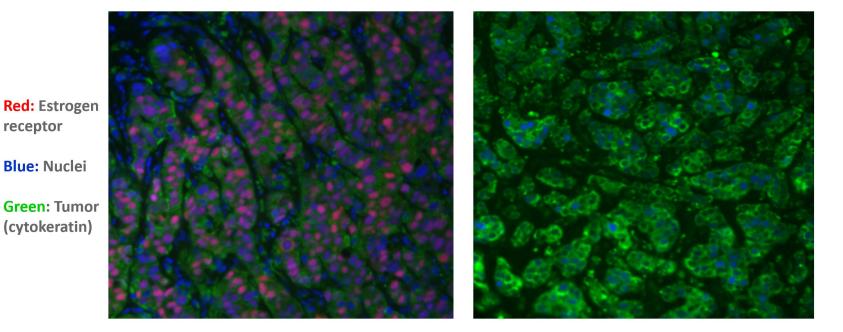
⁺ AUC24=5717 ng*h/mL for preclinical effective exposure in preclinical model (mice@30mpk). AUC, area under the curve; SE, standard error



ER degradation observed in patient tumor biopsies



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Baseline

After treatment with 60 mg ARV-471

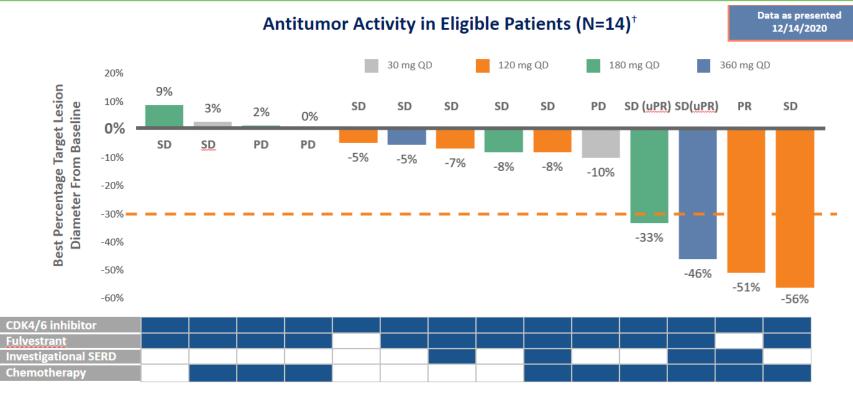
Method: ER immunoreactivity analyzed by quantitative immunofluorescence (QIF) using the automated quantitative analysis (AQUA) method



ARV-471 demonstrates promising anti-tumor activity in late line patients

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+ 7 patients out of 21 are excluded from graph due to no measurable disease at baseline (n=4), discontinuation of treatment without post-treatment target lesion measurements (n=2), and discontinuation after 2 doses due to non-compliance (n=1).



Confirmed RECIST Partial Response in a patient with extensive prior therapy and an ESR1 mutation at 120 mg

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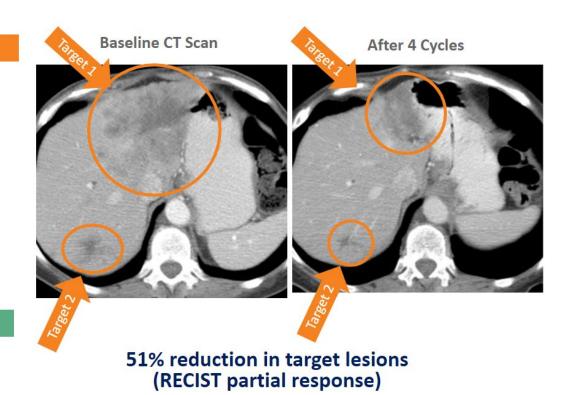
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Extensive prior therapy

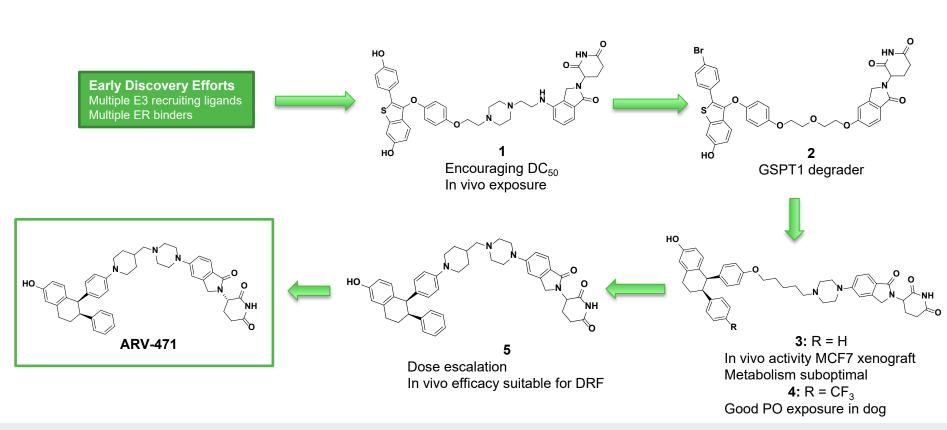
- CDK4/6 inhibitor: Palbociclib
- Endocrine therapies: 6 Agents
 - Aromatase inhibitors x 3
 - Tamoxifen
 - Investigational SERDs X 2⁺
- Other targeted agents: Everolimus
- Chemotherapy: 2 Regimens
 - 1 neoadjuvant + 1 metastatic

ESR1 mutations

• D538G



Medicinal Chemistry Driven Evolution Leading AACER American Association for Cancer Research^{*} to ARV-471



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Drug Discovery and Development is a Team Sport

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