FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number: 3235-028								
Estimated average burden								
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* Cassidy Sean A (Last) (First) (Middle) C/O ARVINAS, INC. 5 SCIENCE PARK, 395 WINCHESTER AVE. (Street) NEW HAVEN CT 06511							2. Issuer Name and Ticker or Trading Symbol ARVINAS, INC. [ARVN] 3. Date of Earliest Transaction (Month/Day/Year) 11/09/2020 4. If Amendment, Date of Original Filed (Month/Day/Year)								6. I Line	S. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify below) Chief Financial Officer 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person Person					
(City)	(Si	tate) ((Zip)																		
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned Title of Security (Instr. 3) 2. Transaction 3. Transaction 4. Securities Acquired (A) or Transaction 5. Amount of Transaction 5. Amount of Transaction 7. Nature																				
1. Title of Security (Instr. 3) 2. Trans Date (Month/						ar) l	2A. Deemed Execution Date, if any (Month/Day/Year			Code (Ins					Securitie Benefici	curities neficially ned Following		n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership		
							Code	v	Amount	(<i>A</i>	() or ()	Price	Transact	Transaction(s) (Instr. 3 and 4)			(Instr. 4)				
Common Stock 11/0					/2020	/2020			M		3,00	3,006 A		\$16	154	154,784		D			
	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 (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	Date,	4. Transaction Code (Instr. 3)					Date Exe piration onth/Day	Date	Ame Sec Und Der		7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e s ally	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Dat Exe	te ercisable		xpiration ate	Title	or No of	umber						
Stock Option (right to buy)	\$16	11/09/2020			М			650		(1)	09	9/25/2028	Comm Stock		650	\$0.00	1,517	,	D		
Stock Option (right to buy)	\$16	11/09/2020			M			2,356		(2)	09	9/25/2028	Comm Stock		2,356	\$0.00	22,696	6	D		

Explanation of Responses:

- 1. This option award was granted on September 26, 2018. 1/4 of the shares underlying the award vested as of January 1, 2019, with the remainder of the shares vesting in equal monthly installments following January 1, 2019 through January 1, 2022.
- 2. This option award was granted on September 26, 2018. 1/4 of the shares underlying the award vested as of June 28, 2019, with the remainder of the shares vesting in equal monthly installments following June 28, 2019 through June 28, 2022.

Remarks:

/s/ Matthew Batters as attorney-in-fact for Sean

11/12/2020

Cassidy

** 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.