FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL									
	OMB Number:	3235-0287								
	Estimated average burden									
- 1	houre per reenonee	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 (City) (State) (Zip)						2. Issuer Name and Ticker or Trading Symbol ARVINAS, INC. [ARVN] 3. Date of Earliest Transaction (Month/Day/Year) 02/26/2021 4. If Amendment, Date of Original Filed (Month/Day/Year)								(Check	Chief Financial Officer 6. Individual or Joint/Group Filing (Check Applicable ine)					
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/				Execution Date,					s Acquired (A) or f (D) (Instr. 3, 4 and 5)			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				
										v	Amount					mount (A) or Price			(Instr. 4)	
Common Stock 03/02/20					/2021	21		M	П	4,792	A	(1	.)	160,470			D			
Common Stock 03/02/20				/2021)21			S		2,221(2)	D	\$77.4	7.4495 ⁽³⁾ 1		158,249		D			
			Table I								posed of, convertib				wned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deen Executio if any (Month/D	n Date,	4. Transa Code (8)				Expiration (Month/Day			7. Title and An of Securities Underlying Derivative Sec (Instr. 3 and 4)		S	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported	Own Forn Direc or In (I) (Ir	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Expiration Of Exercisable Date Title Shares		on(s)									
Stock Option (right to buy)	\$78.3	02/26/2021			A		68,000			(4)	02/25/2031	Commo Stock		000	\$0.00	0		D		
Restricted Stock Units	(1)	03/02/2021			M			4,792		(5)	(5)	Commo Stock		92	\$0.00	9,582		D		

Explanation of Responses:

- 1. Each Restricted Stock Unit represents a contingent right to receive one share of the Issuer's common stock.
- 2. This sale was made to cover withholding taxes following the vesting of previously granted Restricted Stock Units.
- 3. The broker sold shares of the Issuer's common stock for certain employees following the vesting of previously granted Restricted Stock Units, including the common stock reported on this Form 4 by the reporting person, at an average price of \$77.4495.
- 4. This option award was granted on February 26, 2021. 1/4 of the shares underlying the award shall vest on February 26, 2022, with the remainder of the shares vesting in equal monthly installments following February 26, 2022 through February 26, 2025.
- 5. On March 1, 2019, the reporting person was granted 19,165 Restricted Stock Units, vesting in four equal annual installments beginning March 1, 2020.

Remarks:

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

03/02/2021

Cassidy

Date

** Signature of Reporting Person

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.