

alzheimer's association®

AAIC>21

ALZHEIMER'S ASSOCIATION INTERNATIONAL CONFERENCE®

July 26-30, 2021 > DENVER, USA AND ONLINE

Heterobifunctional Degradar Molecules that lead to the clearance of Pathologic Proteins in Neurodegeneration

Angela Cacace, Ph.D.
VP Neuroscience & Platform Biology
Arvinas

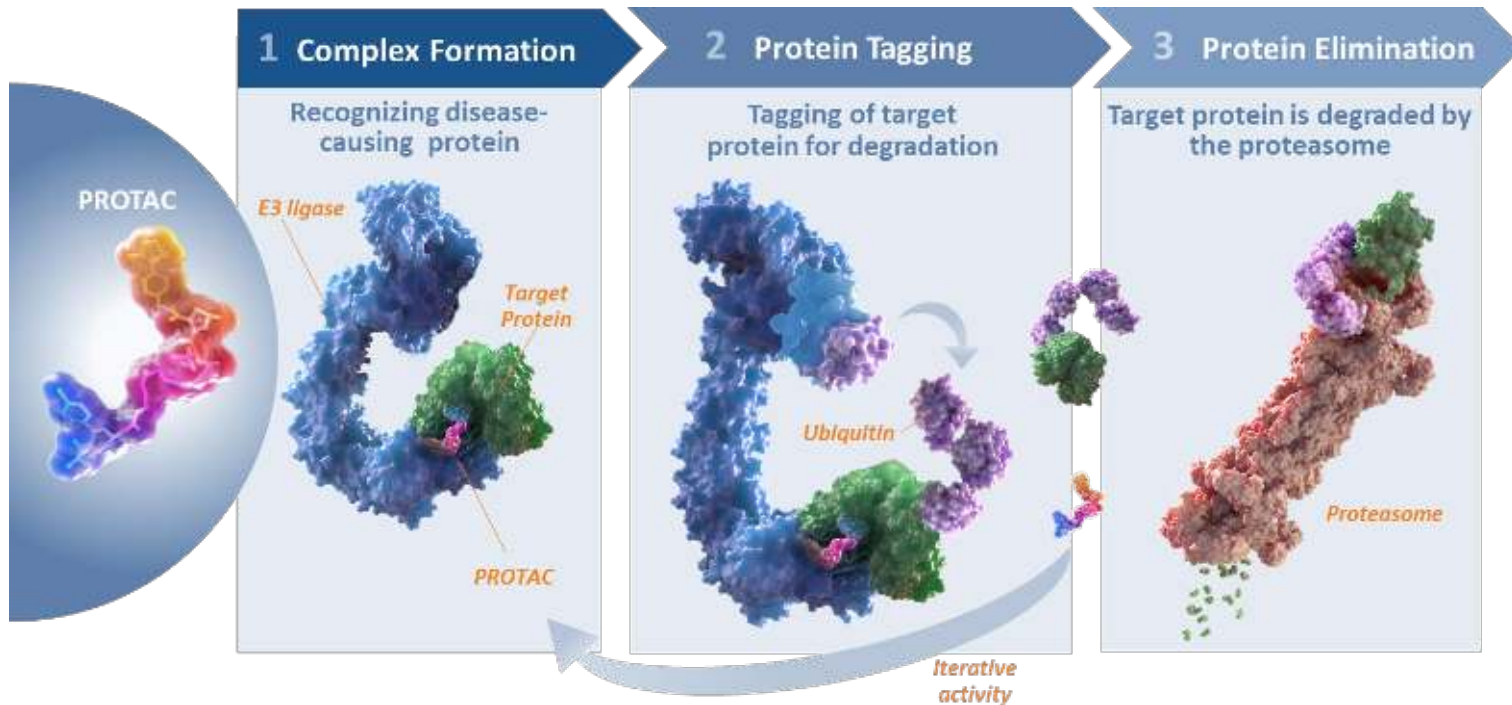
This presentation contains forward-looking statements within the meaning of The Private Securities Litigation Reform Act of 1995 that involve substantial risks and uncertainties, including statements regarding the development and regulatory status of our product candidates, such as statements with respect 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 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, initiate and 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 ubiquitin-proteasome system to induce the degradation of disease-causing proteins



Arvinas' pipeline encompasses a range of validated and undruggable targets in oncology, I-O, and neuroscience

	ARVN Program	Indication	Exploratory	Research	IND Enabling	Phase 1	Phase 2	Phase 3
Oncology / Immuno-oncology	ARV-110	mCRPC						
	ARV-766	mCRPC						
	AR-V7	mCRPC						
	ARV-471	ER+/HER2- Breast Cancer						
	BCL6	B-cell Malignancies						
	KRAS	NSCLC, CRC, Pancreatic						
	Undisclosed	Solid Malignancies						
	Myc	Solid Malignancies						
	HPK1	Solid Malignancies						
Neuroscience	Tau	FTLD-TAU, PSP, AD						
	Alpha Synuclein	MSA, Parkinson's						
	mHTT	Huntington's						
	Undisclosed	Neurodegeneration						

ARV-471 and ARV-110: Proof-of-concept and opportunities to benefit patients in large areas of unmet need

ARV-471

Estrogen receptor-degrading
 PROTAC[®]

Breast Cancer



Potential best profile of any ER-targeting therapy:

- Tolerability
- **ER degradation**
- Clinical benefit



Potential future endocrine therapy of choice in both adjuvant and metastatic settings



Initiated Phase 2 VERITAC trial; while Phase 1 dose escalation continues



>200k patients[†] per year with high unmet need

ARV-110

Androgen receptor-degrading
 PROTAC[®]

Prostate Cancer



AR degradation and clear signals of efficacy observed in late-line mCRPC



Initiated Phase 2 ARDENT trial; two potential paths to registration: 3L molecularly defined, and broader 1L/2L



Extensive molecular profiling of tumors to understand drivers of resistance



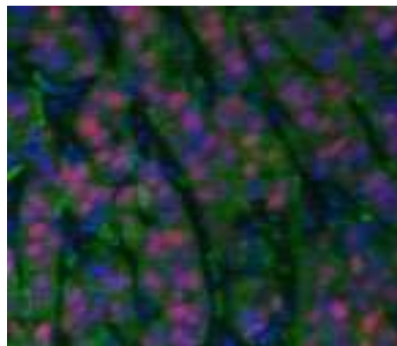
>250k patients[†] per year with high unmet need

[†] US incidence data from SEER database
 AR, androgen receptor; ER, estrogen receptor

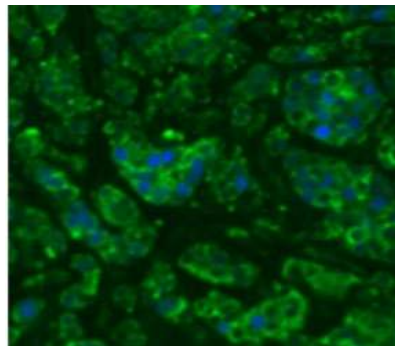
The Ultimate Platform Validation: PROTAC®s can be Drugs

ARV-471: ER Degradation & Confirmed RECIST Partial Response (cPR) in late-stage patients with extensive prior therapy

Baseline



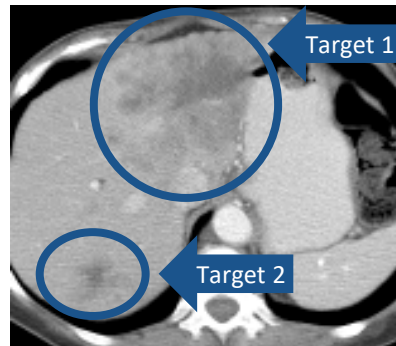
After treatment
60 mg ARV-471



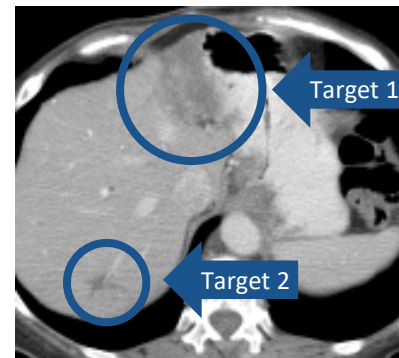
Estrogen
receptor Nuclei Cytokeratin

ER degradation tumor biopsies

Baseline CT Scan



After 4 Cycles



Data as presented 12/14/2020

51% reduction in target lesions (RECIST partial response)

Genetic Disease:

Protein is the cause of the disease



Translational Medicine:

Biomarkers support efficient path to assessing efficacy in humans

PK/PD Models:

Protein target engagement in vivo



**Neurodegeneration
Precision Medicine**
Genetic/
Proteinopathy
Target root cause
PROTAC
differentiator
Biomarker PoC

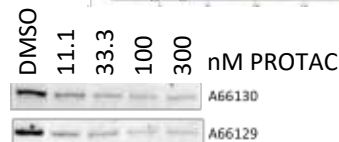
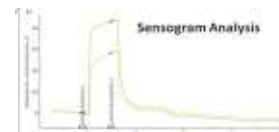


Discovery Engine:

Ligand ID-DEL, HTS, HT-chem/SAR
E3KnowledgeBASE, structure, AI

Discovery Engine:

Biophysics, Ternary, Mechanistic
Degradation, Proteomics

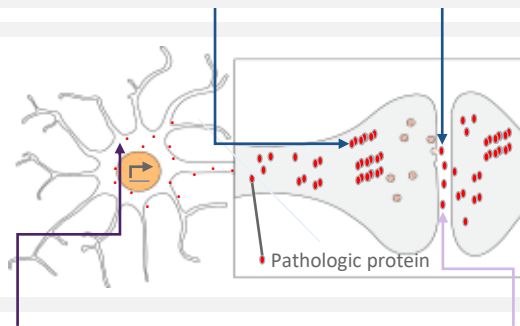


PROTAC® heterobifunctional degrader molecules create a strong opportunity in neuroscience compared to other modalities

PROTAC® degrader small molecules may overcome the limitations of other platforms

PROTAC Potential

- Reduce intra- and extracellular pathologic protein
- Discriminate between wild type and pathologic protein
- Oral administration with BBB biodistribution



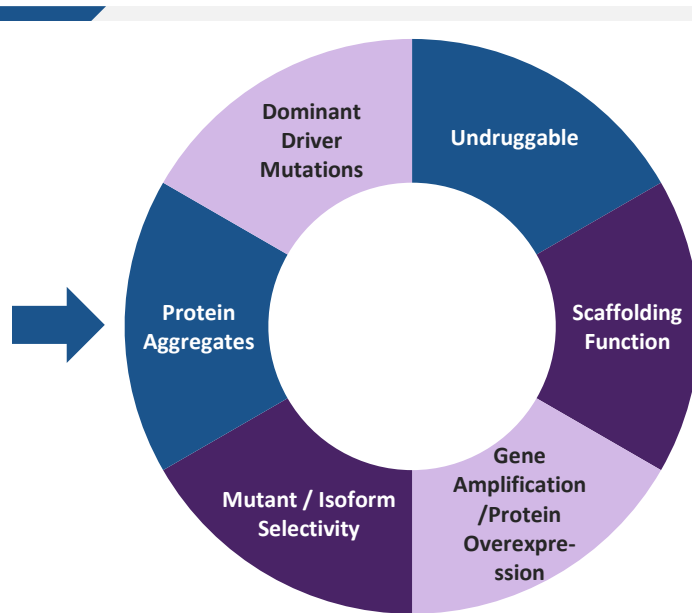
ASO

- Requires intrathecal dosing
- Does not discriminate wt from pathologic protein

Ab

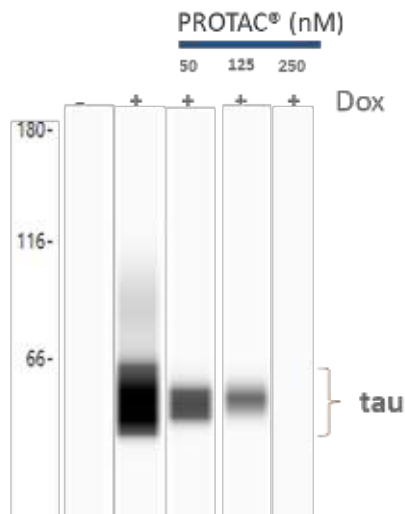
- Blocks only extracellular pathologic protein
- IV dosing results in only 0.5% in CSF

PROTAC Tenets -- Differentiation from small molecule inhibitors



PROTAC[®] small molecules can degrade tau P301L insoluble aggregates

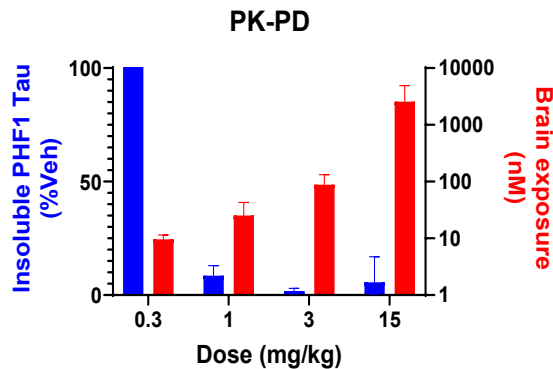
In vitro insoluble tau PROTAC degradation



*on mechanism

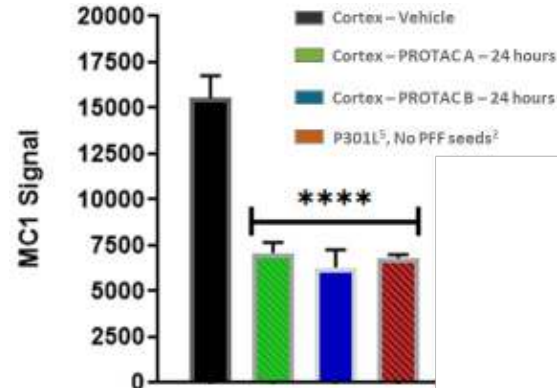
In vivo insoluble tau PROTAC degradation

Tg2508 24h post single PROTAC IV dose



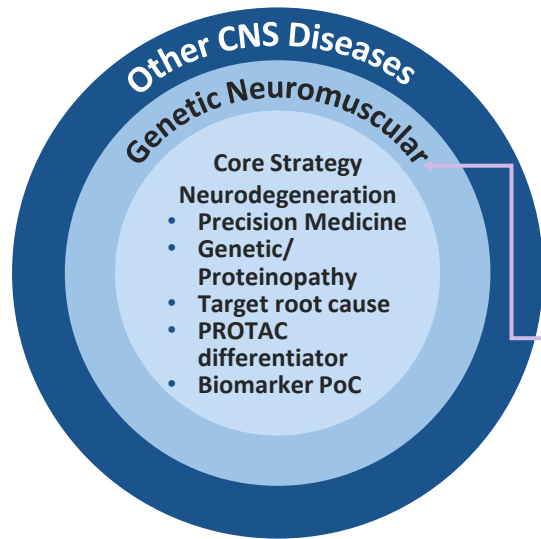
Reduced Seed Potential Ex vivo brain extracts

Tg2508 brain extracts 24h post single IV dose



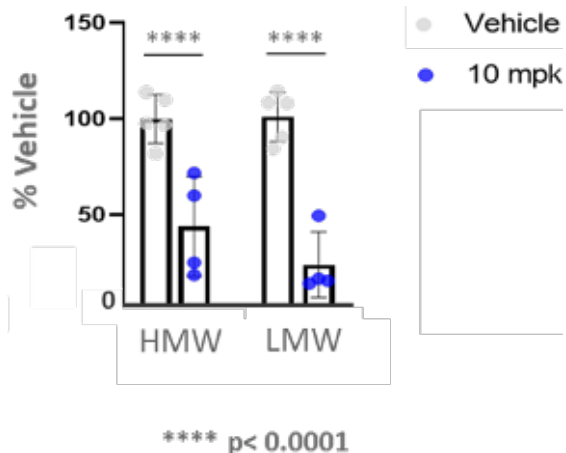
Neuromuscular Diseases: PROTAC[®]s degrade toxic aggregating protein within muscle cells

Fit with Neuroscience Strategy

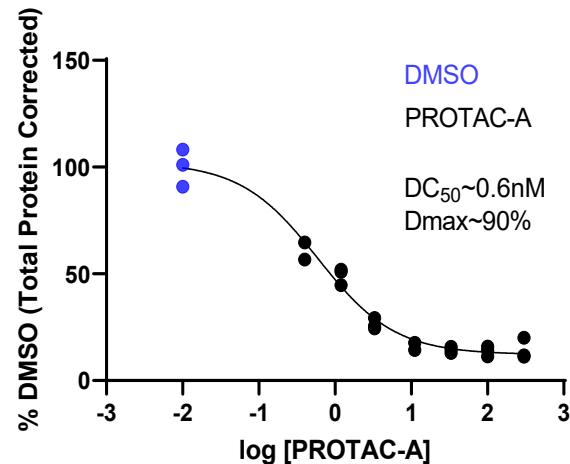


PROTAC degrades toxic aggregating protein in muscle following oral administration in a disease mouse model and in iPSC- myotubes from patients

Neuromuscular degeneration Mouse Model (3xQD PO)

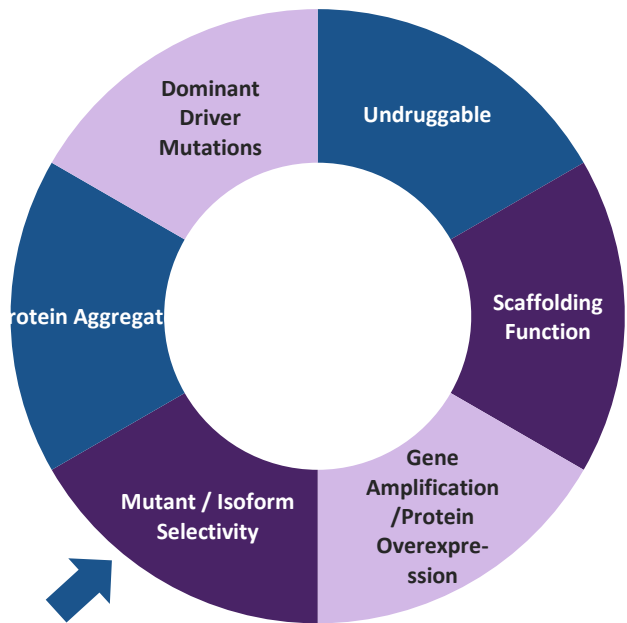


hiPSC-patient derived myotubes Potent Degradation of aggregate

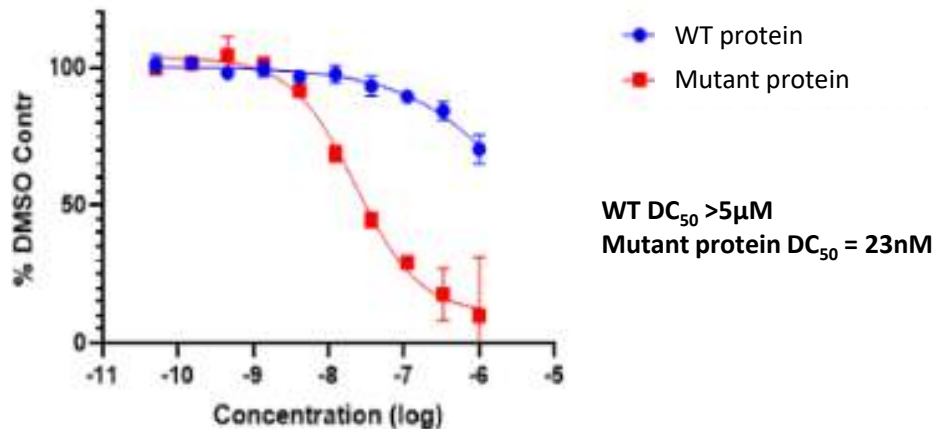


PROTAC[®] targets mutant and spares WT to tackle genetically defined disease target in CNS

Fit with Tenets of PROTACs

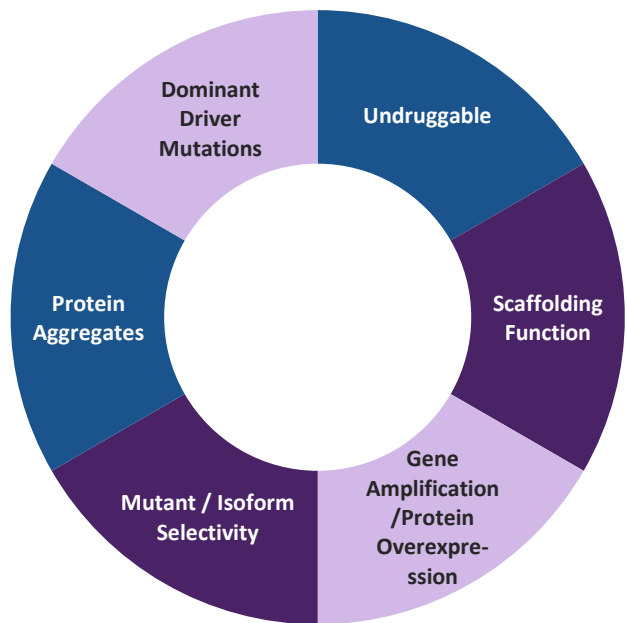


PROTAC selectively degrades mutant and spares WT protein

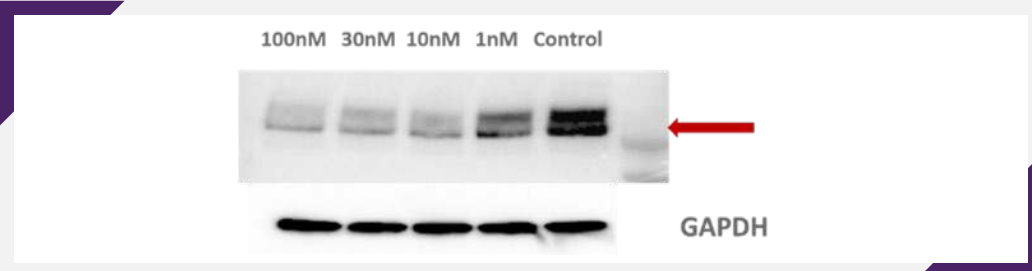


PROTAC®-B is on mechanism and degrades endogenous target in iPSC-derived microglia

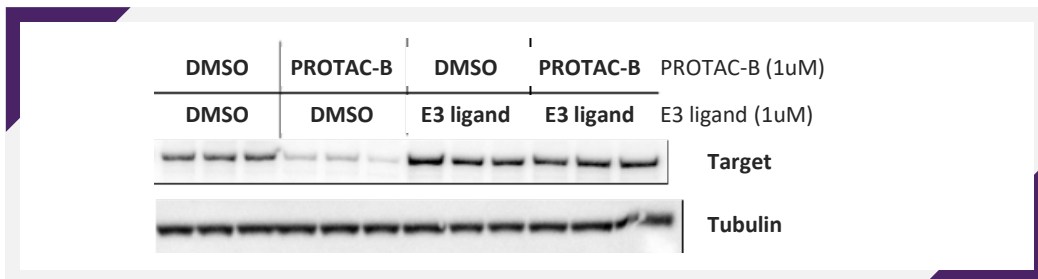
Fit with Tenets of PROTACs



PROTAC-B degrades endogenous target in iPSC-derived microglia

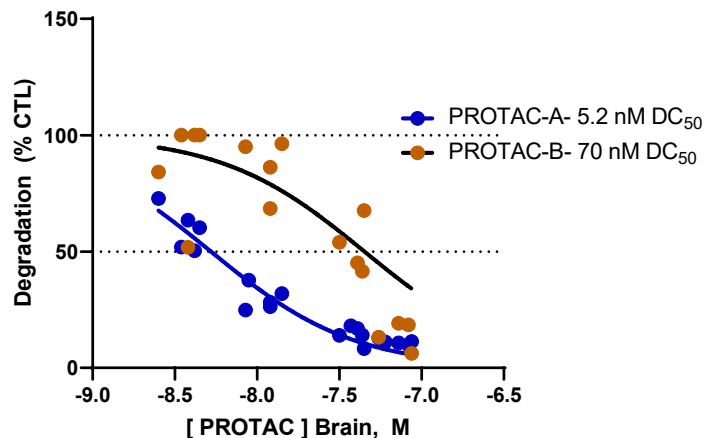


PROTAC-B degrades endogenous target and is on Mechanism

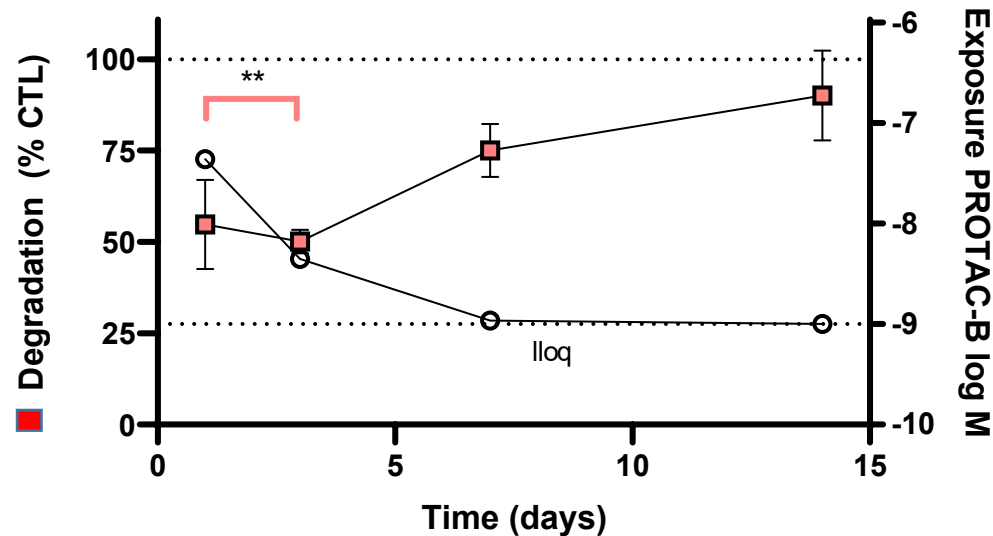


PROTAC[®]-B dose-dependently and durably degrades target in brain 24h following single oral administration

PROTAC-A and B Dose-Response PK/PD In Cortex 24h post dose



PROTAC-B PK/PD In Cortex following time-course



Building and accelerating exciting high potential neurology bifunctional degrader small molecule pipeline

Opportunity: No Approved Disease Modifying Therapies in Neurodegenerative Diseases

		Pre-Exploratory	Exploratory	Lead Optimization	Clinical Candidate
Neurology	Tauopathies	e.g., FTLT-tau, PSP ¹ , Alzheimer's Disease [Tau]			
	Synucleinopathies	e.g., MSA ² , Parkinson's [a-synuclein]			
	Huntington's	Huntington's Disease (mHTT)			
	Undisclosed Indications				

1- Progressive Supranuclear Palsy

2- Multiple Systems Atrophy

Thank you to the fantastic team at Arvinas!!!

