FORM 4

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

☐ Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

OMB APPROVAL
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UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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 *				2. 1	2. Issuer Name and Ticker or Trading Symbol							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
Arjona Ferr	eira Juar	Camilo					Co. [C					Director		10%	ó Owner	
(Last) (First) (Middle)				3. I	3. Date of Earliest Transaction (MM/DD/YYYY)							X Officer (give title below) Other (specify below)				
C/O ORGANON &CO., 30 HUDSON STREET, FLOOR 33					11/7/2025							Head of R&I			(- -)	
5111221,11	(Stre			4. 1	f Amen	dmen	t, Date C	Origin	al Fil	ed (MM/D	D/YYYY)	6. Individual	or Joint/G	roup Filing	(Check Appl	icable Line)
JERSEY CI	TY, NJ 0	7302										_X _ Form filed by		ting Person One Reporting F	Parson	
(0	City) (Sta	te) (Zip)									Tomi med by	Wiore than C	one Reporting I	CISOII	
			Table I - N	Non-Der	ivative	Secu	rities Ac	quire	ed, Di	sposed o	f, or Be	neficially Owne	ed			
1. Title of Security (Instr. 3)			2. Tı	rans. Date	te 2A. Deemed Execution Date, if any		3. Trans. Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			Following Reported Transaction(s) Ownership Form: Ber Direct (D) Ownership Form: Direct (D)			Beneficial Ownership	
							Code	v	Amou	(A) or (D)	Price				or Indirect (I) (Instr. 4)	(Instr. 4)
Common Stock			11	/7/2025			M		6,4	16 A	\$0			31,223.355	D	
Common Stock 11/7/202				/7/2025			F		2,30	07 D	\$6.71			28,916.355	D	
	Tab	le II - Der	ivative Sec	curities]	Benefic	cially (Owned ((e.g.,	puts,	calls, wa	ırrants,	options, conver	tible secu	ırities)		
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Trans. Date	3A. Deemed Execution Date, if any	4. Trans. Code (Instr. 8)	Derivative Securit		Securities (A) or of (D)	6. Date Exercisable and Expiration Date			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following	Form of	11. Nature of Indirect Beneficial Ownership (Instr. 4)
	Security			Code	V (A	A)	(D)	Date Exerc	isable	Expiration Date	Title	Amount or Number of Shares		Reported Transaction(s) (Instr. 4)	or Indirect	
Restricted Stock Units	(1)	11/7/2025		M			6,446	11/7/2	024 (2)	11/7/2026	Commo Stock		\$0	6,447	D	

Explanation of Responses:

- (1) Each restricted stock unit represents a contingent right to receive one share of Organon & Co. ("Organon") common stock.
- (2) These restricted stock units vest and are distributed as shares of Organon common stock in three installments: 6,446 shares on November 7 2024; 6,446 shares on November 7, 2025; and 6,447 shares on November 7, 2026.

Reporting Owners

Reporting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Arjona Ferreira Juan Camilo C/O ORGANON &CO. 30 HUDSON STREET, FLOOR 33 JERSEY CITY, NJ 07302			Head of R&D & CMO					

Signatures

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 control number.