☐ 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

OMB Number: 3235-0287 Estimated average burden hours per response... 0.5

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. Issuer Name and Ticker or Trading Symbol								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Falcione Aaron						Organon & Co. [OGN]								Director	,	100	/ Owman	
(Last) (First) (Middle)					3. Date of Earliest Transaction (MM/DD/YYYY)								X	Director10% Owner X Officer (give title below) Other (specify below)				
C/O ORGANON & CO., 30 HUDSON STREET, FLOOR 33						2/28/2024								Chief Human Resources Officer				
(Street)					4. If Amendment, Date Original Filed (MM/DD/YYYY)								6. Ir	6. Individual or Joint/Group Filing (Check Applicable Line)				
JERSEY CITY, NJ 07302 (City) (State) (Zip)														X_Form filed by One Reporting Person Form filed by More than One Reporting Person				
			Table I	- Non-De	eriva	ative Se	curities	Acquir	ed, I	Disp	osed of	, or Be	neficia	ılly Own	ed			
1. Title of Security (Instr. 3)				Trans. Date	2A. Deemed Execution Date, if any 3. Trait (Instr.			8) or Disposed of (D) F			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)				6. 7. Nature Ownership of Indirect Form: Beneficial Direct (D) Ownership			
							Code	e V	Am	ount	(A) or (D)	Price					or Indirect (I) (Instr. 4)	(Instr. 4)
Common Stock 2/28/202							M		11,	015	A	<u>(1)</u>		25,777			D	
Common Stock 2/28/202							F		3,	960	D	\$18.04				21,817	D	
	Ta	able II - Dei	rivative S	Securities	s Be	neficial	ly Owne	ed (<i>e.g.</i> ,	, put	s, ca	alls, war	rants,	option	ıs, conve	rtible seci	urities)		
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Trans. Date	3A. Deemed Execution Date, if any			5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date			7. Title and Ar Securities Und Derivative Sec (Instr. 3 and 4)		nderlying Derivative Security	Securities Beneficially Owned Following	10. Ownership Form of Derivative Security: Direct (D)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code	v	(A)	(D)	Date Exercisa	ible	Exp Dat	oiration te	tion Title		nount or imber of ares		Reported Transaction(s) (Instr. 4)	or Indirect (I) (Instr. 4)	
Restricted Stock Units	(1)	2/28/2024 (2)		M			11,015	12/31/20	7/31/2023 (4)[12/31/2023 (4)]		Comn Stoc	-	11,015	\$0	0	D		

Explanation of Responses:

- (1) Each Restricted Stock Unit converts into one share of Organon & Co. common stock.
- (2) As previously reported, these Restricted Stock Units vested on December 31, 2023, and shares of Organon & Co. common stock were distributed to the Reporting Person on February 28, 2024.

Reporting Owners

Reporting Owner Name / Address	Relationships								
Reporting Owner Name / Address	Director	10% Owner	Officer	Other					
Falcione Aaron									
C/O ORGANON & CO.			Chief Herry December Officer						
30 HUDSON STREET, FLOOR 33			Chief Human Resources Officer						
JERSEY CITY, NJ 07302									

Signatures

**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 control number.