FORM 3

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

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL OMB Number 3235-0104 Estimated average burden

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934								hours per res	sponse:	0.5
1. Name and Addres Walthall How	ss of Reporting Person [*] r <u>ard</u>		2. Date of Event Requi (Month/Day/Year) 12/10/2018							
(Last) (First) (Middle) C/O ORGANOGENESIS HOLDINGS INC. 85 DAN ROAD (Street) CANTON MA 02021				4. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X Officer (give title below)	10% Owner Other (specify below)		5. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person			
				Exec. VP, Strat. & Mk	.kt Dev.		Form filed by More than One Reporting Person			
(City)	ty) (State) (Zip)									
			Tal	le I - Non-D	erivative Securities Beneficially Owned					
1. Title of Security (Instr. 4)					2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (I) or Indirect (I) (Instr. 5)		ature of Indirect Beneficial Ownership (Instr. 5)		
					vative Securities Beneficially Owned warrants, options, convertible securitie	s)				
···· · · · · · · · · · · · · · · · · ·			2. Date Ex Expiration (Month/Date)		3. Title and Amount of Securities Underlying Deri (Instr. 4)	ivative Security	4. Conversion or Exercise Price of Derivative		6. Nature of Indirect Beneficial Ownership (Instr. 5)	al
			Date Exercisat	Expiration Date	Title	Amount or Number of Shares	- Security			

Explanation of Responses:

Remarks:

No securities are beneficially owned.

<u>/s/ Stacie S. Aarestad, Attorney-in-Fact</u> ** Signature of Reporting Person

12/12/2018 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 5 (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.

POWER OF ATTORNEY

KNOW ALL BY THESE PRESENTS, that the undersigned hereby authorizes Lori Freedman, William R. Kolb and Stacie S. Aarestad, each acting singly, to execute and cau This Power of Attorney shall remain in full force and effect until revoked by the undersigned in a signed writing delivered to the foregoing attorney-in-fact. IN WITNESS WHEREOF, the undersigned has caused this Power of Attorney to be executed as of this 10th day of December, 2018.

/s/ Howard Walthall

Name: Howard Walthall