FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 | |
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| 3 , | | | |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| | OMB APPROVAL | | | | | | | | | | | |
|-----|-------------------|-----------|--|--|--|--|--|--|--|--|--|--|
| | OMB Number: | 3235-0287 | | | | | | | | | | |
| | Estimated average | burden | | | | | | | | | | |
| - 1 | hours por rospons | 0. 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

| Name and Address of Reporting Person* Leibowitz Arthur S | | | | | 2. Issuer Name and Ticker or Trading Symbol Organogenesis Holdings Inc. [ORGO] | | | | | | | | (Ch | eck all app | | | 10% Ov | vner | |
|--|--|--|-------------------|------------------------------|---|---------------------|---------------------|-------|---|------------|--------------------|--|---|---|---|---|--|---|--|
| (Last) | (Fir | st) (N ESIS HOLDING | Middle) GS INC | 2. | 3. Date of Earliest Transaction (Month/Day/Year) 02/16/2021 | | | | | | | | | below | er (give title y) | Other (s below) | sреспу | | |
| 85 DAN ROAD | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable | | | | | | |
| (Street) | N M | A 0. | 2021 | | | | | | | | | | Line | X Form | | | | | |
| (City) | (Sta | ate) (Z | ip) | | | | | | | | | | | | | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transact Date (Month/Day | | | | Execution Date, | | Date, | | | ies Acquired (A) Of (D) (Instr. 3, 4 | | | Benefic | ties For cially (D) Following (I) (| | : Direct Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | | | | Code | v | Amount | (A) (D) | or | Price | Transac | ansaction(s) str. 3 and 4) | | | (mou. 4) | | |
| Class A Common Stock 02/16/2 | | | | | 2021 | | A ⁽¹⁾⁽²⁾ | | 6,318 | A | | \$ <mark>0</mark> | 36 | 36,825 | | D | | | |
| Class A Common Stock 02/16/2 | | | | 2021 | | A ⁽¹⁾⁽³⁾ | | 5,482 | A \$0 | | 42,307 | | | D | | | | | |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | if any | med on Date, Day/Year) | | nsaction of | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) 7. Titl Amot Secul Under Deriv: Secul 3 and | | | int of rities rlying ative rity (In: | 1 | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | y [| 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership t (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exercisa | able | Expiration Date | Title | Amor or Num of Share | ber | | | | | |

Explanation of Responses:

- 1. Represents a grant of restricted stock units ("RSUs") under the Organogenesis Holdings Inc. ("Organogenesis") 2018 Equity Incentive Plan. Each RSU represents the contingent right to receive, upon vesting of the unit, one share of Organogenesis Class A common stock.
- 2. The RSUs vest in full on April 1, 2022.
- 3. The RSUs vest in full on February 16, 2022.

Remarks:

/s/ Stacie S. Aarestad, 02/18/2021 Attorney-in-Fact

** 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 Number.