FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APF	OMB APPROVAL										
OMB Number:	3235-0287										
Estimated average burden											
hours per respons	e: 0.5										

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

defense	ed to satisfy the e conditions of ee Instruction 1	Rule 10b5-																	
Name and Address of Reporting Person* Arduini Peter J						2. Issuer Name and Ticker or Trading Symbol GE HealthCare Technologies Inc. [GEHC]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
Ardumi Peter J						8						1	✓ Director			10% Ov	ner		
(Last) 500 W. N	(Last) (First) (Middle) 500 W. MONROE STREET				3. Date of Earliest Transaction (Month/Day/Year) 09/01/2024							Officer (give title Other (specify below) President and CEO							
(Street) CHICAGO IL 60661					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person							
,														Form filed by More than One Reporting Person					
(City)	(City) (State) (Zip)																		
		Table	I - No	n-Deriva	tive S	Secui	rities	Acq	uired	Dis	posed of	, or E	3enef	iciall	y Own	ed			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day					y/Year) Execution		ution Date,					es Acquired (A Of (D) (Instr. 3,		4 and Secu Bend Own		cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership
									Code	v	Amount (A) or (D)		or Pi	rice	Transa	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)
Common Stock, par value \$0.01 per share 09/01/2					2024			F		5,859 ⁽¹⁾ D		\$	84.82	2 107,341		341 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)	ve Conversion Date Execution Date, or Exercise (Month/Day/Year)		ion Date,	4. Transaction Code (Instr. 8)		5. Nu of Deriv Secu Acqu (A) or Dispo of (D) (Instr	rities ired r osed) : 3, 4	Expiration (Month/Dayes d		te	7. Title and Amount of Securities Underlying Derivative Security (In 3 and 4)		De Se (In	Price of erivative ecurity 1str. 5)		Owner Form: Direct or Indi (I) (Ins	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
							Date Exercis	Expiration able Date		Title	Amou or Numb of Share	er							

Explanation of Responses:

1. Withholding of shares of GE HealthCare Technologies Inc. common stock to satisfy tax withholding obligations in connection with the vesting of restricted stock units.

Remarks:

/s/ Frank R. Jimenez, General Counsel and Corporate Secretary, as attorney-in-fact

09/04/2024

** 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.