

<b>OMB APPROVAL</b>	
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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**

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* <u>Stromberg William J</u>  (Last) (First) (Middle) 500 W. MONROE STREET  (Street) CHICAGO IL 60661  (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>GE HealthCare Technologies Inc. [ GEHC ]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input checked="" type="checkbox"/> Director 10% Owner  Officer (give title below) Other (specify below)
	3. Date of Earliest Transaction (Month/Day/Year) 05/23/2023	
4. If Amendment, Date of Original Filed (Month/Day/Year)		
Rule 10b5-1(c) Transaction Indication  <input type="checkbox"/> 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.		

**Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned**

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			
Common Stock, par value \$0.01 per share	05/23/2023		A		3,584 <sup>(1)(2)</sup>	A	\$0	3,584	D	
Common Stock, par value \$0.01 per share	05/23/2023		A		1,408 <sup>(2)(3)</sup>	A	\$0	4,992	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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		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 Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
						Date Exercisable	Expiration Date					

**Explanation of Responses:**

- Award of restricted stock units with respect to GE HealthCare Technologies Inc. ("GE HealthCare") common stock, of which 100% will vest on the earlier of: (i) the date of GE HealthCare's next annual meeting of stockholders and (ii) May 23, 2024. Settlement of vested restricted stock units may be deferred by the director, in which case, settlement will occur pursuant to the director's applicable deferral election in accordance with GE HealthCare's Non-Employee Director Compensation and Benefits Plan.
- Each restricted stock unit and deferred stock unit represents the right to receive, at settlement, one share of GE HealthCare common stock.
- Award of fully vested deferred stock units with respect to GE HealthCare common stock. The reporting person elected, in accordance with GE HealthCare's Non-Employee Director Compensation and Benefits Plan, to receive fully vested deferred stock units in lieu of 100% of the cash retainer awarded to the reporting person. Settlement will occur pursuant to the director's applicable deferral election.

**Remarks:**

/s/ Frank R. Jimenez, General Counsel and Corporate Secretary, as attorney-in-fact 05/25/2023

\*\* 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.