FORM 4

Check this box if no longer subject

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

wasinington,	D.C. 20049	

STATEMENT	OF CHA	NGES IN	BENEFICI	AL OW	NERSHIP

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

to Section 16. Form 4 or Form 5 obligations may continue. See Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 Instruction 1(b).

Name and Address of Reporting Person*     Rott Roland						2. Issuer Name and Ticker or Trading Symbol GE HealthCare Technologies Inc. [ GEHC ]								ck all app Direc	licable tor	ng Pe	rson(s) to Is	vner	
(Last) 500 W. N	(Fir MONROE S	,	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 04/01/2024							X	belov	er (give title v) CEO, U	Itras	Other (s below) ound	вреспу	
(Street)			0661		4. If <i>I</i>	If Amendment, Date of Original Filed (Month/Day/Year)									on				
(City) (State) (Zip)  Rule 10b5-1(c) Transaction Indication  Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.										an that is inter	nded to								
		Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired,	, Dis	posed of	, or E	3ene	ficial	ly Own	ed			
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day					Execution		Date,	3. Transaction Code (Instr.		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)				ties For cially (D) to Following (I)		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership		
							Code	v	Amount	(A) (D)	or P	rice	Transa	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)		
Common Stock, par value \$0.01 per share 04/01			04/01/2	2024				F		837(1)	D	\$	90.91	23	3,829		D		
		Tal	ole II -								osed of, convertib				Owne	d			
1. Title of Derivative Conversion or Exercise Price of Derivative Security  (Instr. 3)  2. Conversion Date Execution Date, if any (Month/Day/Year)			4. Transa Code ( 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 (Inst 3 and 4)		S (I	Price of erivative ecurity nstr. 5)		у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amor or Numl of Share	ber					

## **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

04/02/2024

Secretary, as attorney-in-fact

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.