FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

|        | Check this box if no longer subjec |
|--------|------------------------------------|
| $\neg$ | 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(b) of the Investment Company Act of 1940

|  |   |       |        |                 | 0. 000                             |  | 00(11) 0   |                                      | 11400011101           | 11 00  | inpany Act C                                 | 71 10-1                   |   |  |   |  |  |   |      |  |
|--|---|-------|--------|-----------------|------------------------------------|--|--|--------------------------------------|-----------------------|--|--|---------------------------|---|--|---|--|--|---|------|--|
| Name and Address of Reporting Person*     Rott Roland  |   |       |        |                 |                                    | 2. Issuer Name and Ticker or Trading Symbol GE HealthCare Technologies Inc. [ GEHC ]   |  |                                      |                       |  |  |                           |   | (Ched  | ck all app<br>Direc   | olicable)  |  | erson(s) to I<br>10% Ov<br>Other (s                               | wner |  |
| (Last) (First) (Middle) 500 W. MONROE STREET   |   |       |        |                 |                                    | 3. Date of Earliest Transaction (Month/Day/Year) 08/03/2023  |  |                                      |                       |  |  |                           |   |  | X Officer (give title Officer (shelow) below)  CEO, Ultrasound                                    |  |  |   |      |  |
| (Street)   |   |       |        |                 |                                    | 4. If Amendment, Date of Original Filed (Month/Day/Year)   |  |                                      |                       |  |  |                           |   | Line)  | Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person |  |  |   |      |  |
| CHICAGO IL 60661   |   |       |        |                 |                                    |  |  |                                      |                       |  |  |                           |   | Form filed by More than One Reporting Person   |   |  |  |   |      |  |
| (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 intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10. |  |                                      |                       |  |  |                           |   |  |   |  |  |   |      |  |
|  |   | Table | I - No | n-Deriva        | tive S                             | ecur   | ities  | Acq                                  | uired,                | Dis  | posed of                                     | , or                      | Bene  | ficial   | ly Owr  | ned  |  |   |      |  |
| 1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day)   |   |       |        | Execution Date, |                                    | ution Date,  |  | Transaction Disposed Code (Instr. 5) |                       | Disposed (   | ies Acquired ( <i>A</i><br>Of (D) (Instr. 3, |                           |   | Securi<br>Benefi<br>Owned<br>Follow  | cially<br>d<br>ving   | 6. Ownership<br>Form: Direct<br>(D) or<br>Indirect (I)<br>(Instr. 4) |  | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |      |  |
|  |   |       |        |                 |                                    |  | Code   | v                                    | Amount                | (A)  | ) or P                                       | rice                      |   | ted<br>action(s)<br>3 and 4)   |   |  |  |   |      |  |
| Common Stock, par value \$0.01 per share 08/03/20  |   |       |        |                 |                                    | 023  |  | F                                    |                       | 1,630(1)   | ]  | D \$                      | 576.19                                      | 2  | 20,705  |  | D  |   |      |  |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |   |       |        |                 |                                    |  |  |                                      |                       |  |  |                           |   |  |   |  |  |   |      |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)  | tive Conversion Date Execution Date, Ty or Exercise (Month/Day/Year) if any |       |        |                 | Transaction Number Code (Instr. of |  | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |                                      |                       | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>Security<br>(Instr. 3 and |  | 4) De Se (In              | Price of<br>crivative<br>curity<br>estr. 5) | 9. Number<br>derivative<br>Securities<br>Beneficiall<br>Owned<br>Following<br>Reported<br>Transactio<br>(Instr. 4) | Owner<br>Form:<br>Direct<br>or Indi<br>(I) (Ins   | Ownership  | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |   |      |  |
|  |   |       |        |                 | Code                               | le V (A) (D)   |  | Date<br>Exercisa                     | Expiration sable Date |  | Title  | or<br>Numb<br>of<br>Share |   |  |   |  |  |   |      |  |

## 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 08/07/2023 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.

- \* 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.