## Form **8937**(December 2017) Department of the Treasury Internal Revenue Service

## Report of Organizational Actions Affecting Basis of Securities

► See separate instructions.

OMB No. 1545-0123

Part I Reporting Issuer										
1	lssuer's	s name					2 Issuer's employer identification number (EIN)			
Gen	eral Ele	ectric Company					14-0689340			
					phone No. of contact		5 Email address of contact			
Investor Relations					617-443-3400		investor@ge.com			
6 Number and street (or P.O. box if mail is not delivered to street address) of contact						t	7 City, town, or post office, state, and ZIP code of contact			
5 No	oco St	troot					Poston MA 02210			
5 Necco Street  8 Date of action  9 Classification and description							Boston, MA 02210			
	30, 20				Reverse Stock Split of C					
10	CUSIP	number	11 Serial number(	(s)	12 Ticker symbol		13 Account number(s)			
	369	9604301	N/A		GE		N/A			
Pa	rt II						k of form for additional questions.			
14				applicable, the	date of the action or the	e date agair	st which shareholders' ownership is measured for			
	the a	ction ► <u>SEE AT</u>	TACHED							
15			tive effect of the orga age of old basis ► <u>S</u>			ecurity in th	e hands of a U.S. taxpayer as an adjustment per			
16		ribe the calculation		pasis and the	data that supports the ca	alculation, s	uch as the market values of securities and the			

Pa	rt II	rganizational Action (continued)		
17		oplicable Internal Revenue Code section(s) and subsection(s) upon which the tax treatment is base	ed ▶	SEE ATTACHED
18	Can an	esulting loss be recognized?  SEE ATTACHED		
	Oan an	Saliting 1033 be 1660g/m2cd: P		
19	Provide	ny other information necessary to implement the adjustment, such as the reportable tax year $ ightharpoonup$	E ATT	ACHED
	Und	penalties of perjury, I declare that I have examined this return, including accompanying schedules and stateme	ents, an	d to the best of my knowledge and
		t is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which p		
Sig	n		$\circ$	
Her	<b>′e</b> ∣ <sub>Sign</sub>	Date > 1	- 9	-2021
	3		<u></u>	_
	Print	ourname MICHAEL PSCHCESSIVER Title > V	P	TAX
Pai	-	Print/Type preparer's name Preparer's signature Date		neck if PTIN
	iu eparer			If-employed
		Firm's name	Fir	m's EIN ▶
Use Only		Firm's address ►		ione no.

Send Form 8937 (including accompanying statements) to: Department of the Treasury, Internal Revenue Service, Ogden, UT 84201-0054