SEC Form 4	
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Washington, D.C. 20549

OMB APPROVAL

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

below)

Other (specify

to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).		Estimated average burden hours per response:		
I. Name and Address of Reporting Person* Ralston Dianne B.	or Section 30(h) of the Investment Company Act of 1940 2. Issuer Name and Ticker or Trading Symbol <u>SCHLUMBERGER LIMITED/NV</u> [SLB]	(Check all applicabl	,	
Raiston Diamic D.		Director	10% Owner	
		Officer (ai)	o title Other (speci	

Officer (give title below) Х 3. Date of Earliest Transaction (Month/Day/Year) (First) (Middle) (Last) 03/03/2023 Chief Legal Officer & Sec 5599 SAN FELIPE, 17TH FLOOR 4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable Line) (Street) HOUSTON TX 77056 X Form filed by One Reporting Person Form filed by More than One Reporting Person (City) (State) (Zip)

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. Transa Code (8)		Disposed Of (D) (Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following Reported	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	Transaction(s) (Instr. 3 and 4)		(
Common Stock, \$0.01 Par Value Per Share	03/03/2023		Α		11,190(1)	Α	\$ <mark>0</mark>	98,138	D	
Common Stock, \$0.01 Par Value Per Share	03/03/2023		F		4,404	D	\$55.17	93,734	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. Transa Code (8)		5. Nu of Deriv Secu Acqu (A) of Dispo of (D) (Instr and 5	rative rities ired r osed) : 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year)		e Amount of		amount of Derivative derivative iecurities Security Securities Inderlying (Instr. 5) Beneficially Derivative Following		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

1. The Company granted performance share units ("PSUs") to the reporting person on January 15, 2020. Vesting of the PSUs was based on three-year Company performance relative to select key competitors. Most of these competitors had not reported their 2022 audited financial results when the Company's compensation committee met in January 2023 to certify performance under the PSUs. As a result, the Company's compensation committee approved the issuance of 80% of the shares that the committee determined had been earned according to the information available to the committee at the time. As of March 3, 2023, all such competitors had reported their 2022 audited financial results. Shares of common stock reported hereunder represent shares finally determined to have been earned under the PSUs.

/s/ Samantha Blons, Attorney	- 02/07/2022
in-Fact	03/07/2023

** 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.

Check this box if no longer subject