## FORM 4

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

Washington, D.C. 20549

,	OLOUINI ILO ANL	LYOUNING COMMISSION	
	Washington D.C.	20540	

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b)

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10. Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

IISTOCTION 10.																					
1. Name and Address of Reporting Person* Al Mogharbel Khaled							2. Issuer Name <b>and</b> Ticker or Trading Symbol SCHLUMBERGER LIMITED/NV [ SLB ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner					
																Other (s	· I				
(Last)		3. Date of Earliest Transaction (Month/Day/Year)										below) below)				, ,					
5599 SA		01/15/2025										EVP, Geographies									
3377 571	, TEEH E,																				
(Street)							4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) HOUSTON TX 77056																Form filed by One Reporting Person					
1100510N 1A //030															"	Form filed by More than One Reporting					
(City) (State) (Zip)																Person					
(City) (Citate) (LIP)																					
		Tab	le I - Non	n-Deriv	ative	e Se	curities	s Ac	qui	ired, I	Disp	osed o	of, or Be	enef	ficially	Owned	l				
1. Title of Security (Instr. 3) 2. Tran Date (Month						ear)	2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Dispo		Dispose	ities Acqui d Of (D) (Ir	red (A	A) or i, 4 and	5. Amou Securitie Beneficia Owned F	s	Form (D) o	: Direct r Indirect	7. Nature of Indirect Beneficial Ownership		
									Ė	Code	v	Amount	(A) or (D)		Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock, \$0.01 Par Value Per Share									T							247	7,699		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 I if any (Month/Day	Date, T	ransac Code (I		5. Numb of Derivati Securiti Acquire (A) or Dispose of (D) (li 3, 4 and	ive ies ed ed nstr.	Exp	Date Exe piration onth/Da	Date		7. Title a of Secur Underlyi Derivativ (Instr. 3 a	ities ng e Sec	curity	8. Price of Derivative Security (Instr. 5)	ative derivative ity Securities F 5) Beneficially Cowned control		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				c	Code	v	(A)	(D)	Dat Exe	te ercisabl		xpiration ate	Title	or Nu of	nount imber iares						
RSU (Restricted Stock Unit)	(1)	01/15/2025			A		24,826			(2)		(2)	Common Stock, \$0.01 Par Value Per Share		1,826	\$0	24,82	6	D		

## **Explanation of Responses:**

- 1. Each restricted stock unit represents the right to receive, at settlement, one (1) share of common stock.
- 2. The restricted stock unit award was granted January 15, 2025 and vests 100% on January 15, 2028.

/s/ Samantha Blons, Attorney-

in-Fact

\*\* Signature of Reporting Person

01/17/2025

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.