FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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|---|--------------------------|-----------|--|--|--|--|--|--|--|
| | 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 securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1(c). See Instruction 10. 1. Name and Address of Reporting Person* | | | | | Issuer Name and Ticker or Trading Symbol | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer | | | | | | |
|---|---|--|----------|---------------------------------|---|------------------------|--|--------|--|--------|--------------------|---|--|--------------------|--|--|---|--|---|
| Aalders Cristina | | | | | TechnipFMC plc [FTI] | | | | | | | | (Chec | k all app Direc | , | | 10% Ov | vner | |
| | | | | | | | | | | | | | | X | | er (give title | | Other (s | |
| (Last) (First) (Middle) | | | | | | | | | | | | | | - | EV | P, Chief | | ŕ | |
| C/O TECHNIPFMC PLC | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 03/01/2024 | | | | | | | | | Leg | - C | | | | |
| HADRIAN HOUSE, WINCOMBLEE ROAD | | | | | | | | | | | | | | | icer & | | | | |
| (Street) | | | | | | | | | | | | | | | Sec | | | | |
| | NEWCASTLE UPON TYNE X0 NE6 3PI | | | L | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Indi Line) | · · | | | | | |
| (City) | City) (State) (Zip) | | | | | | | | | | | | | , A | Form filed by More than One Reporting Person Person | | | | |
| | | Table | I - No | n-Deriva | tive S | Secu | rities | Acq | uired, | Dis | posed of | , or E | Bene | ficially | / Own | ed | | | |
| 1. Title of Security (Instr. 3) 2. Transact Date (Month/Day | | | | | y/Year) Exec | | Deemed cution Date, ny nth/Day/Year) | | Transaction Disposed Code (Instr. 5) | | | es Acquired (A) Of (D) (Instr. 3, | | | | ties cially I Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership |
| | | | | | | Code | v | Amount | Amount (A) | | Price | | ted action(s) 3 and 4) | | [| (Instr. 4) | | | |
| Ordinary | 2024 | | | F | | 4,490 ⁽¹⁾ D | |) ; | \$22.58 | 33,785 | | | D | | | | | | |
| | | Tal | ble II - | | | | | | | | osed of, convertib | | | | Owne | d | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | if any | emed ion Date, /Day/Year) | 4. Transaction Code (Instr. 8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercis Expiration Dat (Month/Day/Ye | | te | 7. Title and Amount of Securities Underlying Derivative Security (In 3 and 4) | | De Se (In | Price of rivative curity str. 5) | 9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | y C | 0. Ownership Form: Direct (D) or Indirect I) (Instr. 4) | Beneficial Ownershi t (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercis | able | Expiration Date | Title | Amo or Num of Shar | ber | | | | | |

Explanation of Responses:

1. Represents Ordinary Shares withheld for payment of taxes on vesting of restricted and performance stock units granted on April 1, 2021.

Remarks:

/s/ Lisa P. Wang, Attorney-In-03/05/2024 **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.