FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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

					T -									1.						
1. Name and Address of Reporting Person* Milton Bryan W						2. Issuer Name and Ticker or Trading Symbol EXXON MOBIL CORP [XOM]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specifications)					
(Last) (First) (Middle) C/O EXXON MOBIL CORPORATION 5959 LAS COLINAS BOULEVARD						3. Date of Earliest Transaction (Month/Day/Year) 11/28/2018									X Officer (give the Offier (specify below) Vice President					
	COLINA	4. 11	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable								
(Street) IRVING TX 75039-2298				298										X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(St	ate) (Zip)																	
		Tab	le I - No	on-Deriv	ative/	Sec	curitie	s Ac	quired	, Dis	sposed o	f, or E	enet	icial	ly Own	ed				
Date			Date	Transaction ate lonth/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)					es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code V		Amount (A) or (D)		r Pr	ice	Reported Transaction(s) (Instr. 3 and 4)						
Common Stock					11/28/2018			 			37,400	A		(1)	225,418.0123		D			
Common	Stock														2	50	I		By Dependent Child 1	
Common Stock															2	50	I		By Dependent Child 3	
Common Stock														25		50	I		By Dependent Child 2	
Common Stock														4.0999		I		By Savings Plan		
		Ta	able II -								osed of,				Owned					
1. Title of Derivative Security (Instr. 3)	Title of 2. 3. Transaction 3A. Deemed Execution Date Execution Date, if any			4. Transa	4. 5. Number of Octobe (Instr. Derivative			6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8 E S (I	B. Price of Derivative Security Security Securities Beneficia Owned Following Reported Transacti (Instr. 4)		Ownership Form: Direct (D) or Indirect (I) (Instr. 4		11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	or Numb of Share	er						

Explanation of Responses:

1. Grant of restricted stock units to be settled in shares only.

/s/ C. K. Guild by Power of Attorney

11/30/2018

Date

** Signature of Reporting Person
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.