FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington,	D.C. 20549	
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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).

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

Name and Address of Reporting Person*     Goff Gregory James				2. Issuer Name <b>and</b> Ticker or Trading Symbol EXXON MOBIL CORP [ XOM ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner						
		L CORPORATI				ate of E 21/202		Trans	saction	(Mont	h/Day/Year)			Officer (give title Other (specify below) below)					
5959 LAS COLINAS BOULEVARD						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) IRVING	TX	7	5039-	2298										X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(Sta	ate) (Z	Zip)																
		Table	I - No	on-Deriva	tive	Secu	rities	Ac	quire	d, Di	sposed of	, or B	enefic	ally Own	ed				
Date			2. Transaction Date (Month/Day/	Execution Da /Year) if any			Execution Date,		action (Instr.				Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount	(A) or (D)	Price	Reported Transacti (Instr. 3 a	on(s)			(Instr. 4)		
Common Stock 06/21/2			06/21/20	)21				A		8,000	A	(1)	18,04	1.21	Ι	)			
Common Stock													18	182		[	By Trust- Beneficiary 1		
Common Stock													23	239		9 I		By Trust- Beneficiary 2	
	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 Onte (Month/Day/Year)  3. Transaction Date Execution Date, (Month/Day/Year)  (Month/Day/Year)			4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expir	te Exer ation E th/Day/		7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numl derivati Securiti Benefic Owned Followi Reporte Transac (Instr. 4	ve ies ially ng ed ction(s)	10. Owners Form: Direct ( or Indir (I) (Inst	Beneficial Ownership ect (Instr. 4)			
					Code	v	(A)	(D)	Date Exerc	isable	Expiration Date		Amount or Number of Shares						

## Explanation of Responses:

1. Restricted stock grant.

/s/ Cynthia K. Guild by Power of Attorney

06/23/2021

\*\* 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.