FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPRO	OVAL							
	OMB Number:	3235-0287							
l	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

1. Name and Address of Reporting Person* Greenlee Stephen M						2. Issuer Name and Ticker or Trading Symbol EXXON MOBIL CORP [XOM]										k all app Dired Offic	olicable) ctor er (give title	ng Person(s) to Iss 10% O Other (wner specify
(Last) (First) (Middle) C/O EXXON MOBIL CORPORATION 5959 LAS COLINAS BOULEVARD				3. Date of Earliest Transaction (Month/Day/Year) 12/09/2014										Vice President						
(Street) IRVING TX 75039-2298				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)										i. Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(St		Zip)	Doriv	ativo		ouriti	ος Λ ο	nuirod	Dici	accad o		r Pon	ofic	vially	Own				
1. Title of Security (Instr. 3) 2. Tra				2. Transa Date	Transaction ate		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transa	ction) or 5. Amo 4 and Securi Benefi Owned		ount of ties cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership
									Code	v	Amount	(A) or (D) Pr		Pri	ce	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common	Stock			12/09/2014					G	V	383		D	(1)		26	267,786)	
Common Stock					12/10/2014				G	V	2,368		D	(1)		265,418		D		
Common	Stock				584 I							By Spouse								
Common Stock														14,184.4633]		By Savings Plan		
		Та	ble II - C								sed of, onvertib					wned				
1. Title of Derivative Security (Instr. 3)	rivative Conversion Date Execution Date, Tracurity or Exercise (Month/Day/Year) if any Co				Transa Code (ansaction ode (Instr.		of E		xercis n Date ay/Yea	r) Amour Securii Underl Derivat		Amount of Securities Underlying Derivative Security (Instr. 3		Der Sec (Ins	rice of ivative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owi For Dire or Ii (I) (I	nership m: ect (D) ndirect nstr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v			Date Exercisa	Date E Exercisable D		Titl	Nu	mbe: ares								

Explanation of Responses:

1. No consideration received.

/s/ Stephen M. Greenlee 12/11/2014

** 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.