FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

					01.5	ecu	JII 30(II)	or the ii	ivesimei	it Coi	npany Act	01 194	U							
1. Name and Address of Reporting Person* <u>Wascom Dennis G</u>					2. Issuer Name and Ticker or Trading Symbol EXXON MOBIL CORP [XOM]											all app Direc	licable) tor	g Person(s) to Iss		wner
(Last) (First) (Middle) C/O EXXON MOBIL CORPORATION 5959 LAS COLINAS BOULEVARD				3. Date of Earliest Transaction (Month/Day/Year) 12/18/2014										X	X Officer (give title Other (spec below) Vice President					
(Street) IRVING (City)	Street) RVING TX 75039-2298				4. If <i>i</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)									i. Indiv ine) X	Forn Forn	al or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person			
		Tabl	e I - Nor	n-Deriv	ative	Se	curitie	es Acq	uired,	Dis	posed o	f, or	Ben	efici	ally	Owne	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da			eay/Year) if a		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disposed Code (Instr. 5)		ities Acquired (A) d Of (D) (Instr. 3,				5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
							Code	v	Amount		A) or D)	Price	•	Transaction(s) (Instr. 3 and 4)				(111501.4)		
Common	Common Stock 12/			12/18	3/2014				S		6,000		D	\$90).42	14	48,155	D		
Common Stock														10,287.944			I	By Savings Plan		
		Та	ıble II - I								sed of, onvertib					vned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)		n of		6. Date Exercisa Expiration Date (Month/Day/Year		9	7. Title and Amount of Securities Underlying Derivative Security (Instrand 4)			Deri	rice of ivative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ow For Dir or I (I) (10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)		Date Exercisa		Expiration Date	Title	or	ount nber	er					

Explanation of Responses:

/s/ Dennis G. Wascom

12/19/2014

Date

** Signature of Reporting Person

 $Reminder: \ Report \ on \ a \ separate \ line \ for \ each \ class \ of \ securities \ beneficially \ owned \ directly \ or \ indirectly.$

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.

^{*} 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).