FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washir

ngton, D.C. 20549	OMB APPROVAL

OMB Number: 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).

## 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. Name and Address of Reporting Person*  Rosenthal David S  (Last) (First) (Middle)  C/O EXXON MOBIL CORPORATION  5959 LAS COLINAS BOULEVARD  (Street)						2. Issuer Name and Ticker or Trading Symbol EXXON MOBIL CORP [ XOM ]  3. Date of Earliest Transaction (Month/Day/Year) 05/27/2016  4. If Amendment, Date of Original Filed (Month/Day/Year)										S. Relationship of Reporting Person(s) to Issuer (Check all applicable)     Director 10% Owner     X Officer (give title Other (specify below)     Vice President and Controller      6. Individual or Joint/Group Filing (Check Applicable Line)				
IRVING (City)	TX (St		75039-22 (Zip)	298												X Form filed by One Reporting Person Form filed by More than One Reporting Person				
1. Title of Security (Instr. 3)				2. Transac Date (Month/Da	ction	2A Ex if a	. Deem ecution any lonth/Da	3. Transa Code (	4. Securiti	Sed of, or Benefic Securities Acquired (A) of sposed Of (D) (Instr. 3, 4			or 5. Amount of		int of es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock				05/27/				Code	v	1,000	(D)		Prid	(1)	1,577			I	By Revocable Trust	
Common Stock Common Stock																5,150 13.9595		I	By Savings Plan	
		Та									sed of, onvertib					wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deen Executio if any (Month/D	n Date,	4. Transac Code (II B)	etion nstr.	ion of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Expiration (Month/L	on Dat Day/Ye			De Se (In	Price of rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

## **Explanation of Responses:**

1. No consideration received.

/s/ Jerry D. Miller by Power of <u>Attorney</u>

05/31/2016

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.