FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549	9
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number: 3235-0287								
Estimated average burden								
hours per response	: 0.5							

	tion 1(b).			Filed							es Exchang npany Act o			34		Tiours	peri	esponse:	0.5
1. Name and Address of Reporting Person* <u>Karsner Alexander</u>					2. Issuer Name and Ticker or Trading Symbol EXXON MOBIL CORP [XOM]									(Ch	Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
(Last) (First) (Middle) C/O EXXON MOBIL CORPORATION					3. Date of Earliest Transaction (Month/Day/Year) 01/03/2022											Officer (give title below)		Other below)	(specify
5959 LAS COLINAS BOULEVARD (Street) IRVING TX 75039-2298				98	4. If Amendment, Date of Original Filed (Month/Day/Year)									Line	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(St	ate) (Z	Zip)																
		Table	I - Non-	-Deriva	tive S	Secui	rities	Acq	uired,	Disp	osed of	, or	Ben	eficia	lly Own	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)				Executary Execut		a. Deemed ecution Date, any onth/Day/Year)		Transaction Dispo		Disposed	rities Acquired (ed Of (D) (Instr. 3		(A) or 3, 4 an	d Securit Benefic Owned	5. Amount of Securities Beneficially Owned Following Reported		ownership m: Direct or Indirect Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A (D) or)	Price	Transa	ction(s) 3 and 4)			(instr. 4)
Common Stock 01/03					3/2022				A 2,500			A	\$0 ⁽¹⁾	27	7,500		D		
		Tal									sed of, onvertib				y Owne	d			
1. Title of Derivative Security (Instr. 3)	rative Conversion Date Execution Date, rity or Exercise (Month/Day/Year) if any		n Date,	Code (Instr. 8)		of Deriv	rative rities ired r osed)	6. Date Exercisable a Expiration Date (Month/Day/Year) Date Expira		te	7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		nstr.	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	

Explanation of Responses:

1. Restricted stock grant.

/s/ Cynthia K. Guild by Power of Attorney

01/04/2022

** 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.