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 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* <u>Colton William M</u>						2. Issuer Name and Ticker or Trading Symbol EXXON MOBIL CORP [XOM]									eck all app Dired	tor		10% C	wner
(Last) (First) (Middle) C/O EXXON MOBIL CORPORATION 5959 LAS COLINAS BOULEVARD						3. Date of Earliest Transaction (Month/Day/Year) 11/07/2014									X Officer (give title Other (specify below) Vice President				
(Street) IRVING TX 75039-2298 (City) (State) (Zip)				4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable ne) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
		Tabl	e I - No	n-Deriv	ative	Sec	uritie	s Acc	quired	, Dis	posed o	f, or I	3enef	iciall	y Owne	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da					Exe if a	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4 5)						Form:	Direct I Indirect E tr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) (D)	or Pr	ice	Transac (Instr. 3	tion(s)			Instr. 4)
Common Stock 11/07/					2014	.014			G	V	320	I)	(1)	170	0,098		D	
Common Stock 11/07					2014				G	V	1,587	I)	(1)	(1) 168,5]	D	
Common Stock															1	.50		I I	By Dependent Child
Common Stock															8,998.4702			I S	By Savings Plan
		Та									osed of, onvertib				Owned			,	
1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security 3. Transaction Date (Month/Day/Year) if any (Month/D			n Date, Transact Code (Ins			on of		Expiration (Month/I	on Dai	ear)	7. Title and Amount of Securities Underlying Derivative Security (Instr and 4)		. 3	Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly C	LO. Dwnership Form: Direct (D) or Indirect I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				- 1,	Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	of Share	.					

Explanation of Responses:

1. No consideration received.

/s/ William M. Colton

11/10/2014

** Signature of Reporting Person

Date

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).