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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| Check this box if no longer subject to |
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| 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

| OWB APPRC | VAL |
|-------------------------|-----------|
| OMB Number: | 3235-0287 |
| Estimated average burde | en |
| hours per response: | 0.5 |

| 1. Name and Address of Reporting Person [*] Duffin Neil W | | I Person [*] | 2. Issuer Name and Ticker or Trading Symbol <u>EXXON MOBIL CORP</u> [XOM] | | ationship of Reporting Pe (all applicable) Director | erson(s) to Issuer 10% Owner |
|---|--------------|-----------------------|--|-------|--|---------------------------------|
| , | | | _ | | Officer (give title | Other (specify |
| (Last) | (First) | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) | | below) | below) |
| EXXON M | OBIL CORPORA | ATION | 11/25/2014 | | Executive C | Officer |
| 5959 LAS C | COLINAS BOUL | EVARD | | | | |
| ļ | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | /idual or Joint/Group Fili | ng (Check Applicable |
| (Street) | | | | Line) | | |
| IRVING | ТХ | 75039-2298 | | X | Form filed by One Re | porting Person |
| | 17 | / 3039-2290 | _ | | Form filed by More th Person | an One Reporting |
| (City) | (State) | (Zip) | | | | |

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transaction Code (Instr. 8) | | | | | 5. Amount of Securities Beneficially Owned Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership |
|---------------------------------|--|---|---|---|--------|---------------|---------------------------|---|---|---|
| | | | Code | v | Amount | (A) or (D) | Price | Reported Transaction(s) (Instr. 3 and 4) | | (Instr. 4) |
| Common Stock | 11/25/2014 | | F | | 9,817 | D | \$96.02 | 318,733 | D | |
| Common Stock | 11/25/2014 | | Α | | 64,400 | A | \$0 ⁽¹⁾ | 383,133 | D | |
| Common Stock | | | | | | | | 31,921 | Ι | By Family Trust |
| Common Stock | | | | | | | | 638 | I | By Trustee For Dependent Child 1 |
| Common Stock | | | | | | | | 638 | I | By Trustee For Dependent Child 2 |
| Common Stock | | | | | | | | 2,374.0408 | I | By Savings Plan |

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| 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. Transa Code (8) | | of | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | d 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 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) |
|---|---|--|---|------------------------------|---|-----|-----|--|--------------------|---|--|---|--|--|--|
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |

Explanation of Responses:

1. Grant of restricted stock units to be settled in shares only.

<u>/s/ Jerry D. Miller by Power of</u> <u>Attorney</u> <u>11/2</u>

<u>11/28/2014</u>

** 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.