FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

STATEMENT	OF CHANGES	S IN BENEFICIAL	OWNERSHIP

l	OMB APPRO	OVAL				
	OMB Number:	3235-0287				
l	Estimated average burd	len				
	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

Name and Address of Reporting Person* Ortwein Sara N														Check	k all app Direc	or		10%	Owner	
(Last) (First) (Middle) C/O EXXON MOBIL CORPORATION 5959 LAS COLINAS BOULEVARD					3. Date of Earliest Transaction (Month/Day/Year) 12/18/2017										X Officer (give title Other (specify below) Executive Officer					
(Street) IRVING	ТХ	ζ 7	75039-22	298	4. If Amendment, Date o				of Original Filed (Month/Day/Year)						6. Individual or Joint/Group Filing (Check Applical Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					son
(City)	(St		Zip)																	
			e I - No			_			_	, Dis	posed o				_				1	
[2. Transaction Date (Month/Day/Year)) E	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)			and Securitie Beneficia Owned F		es ally Following	Form (D) o	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership			
								Code	ode V Amount		(4	A) or D)	Price	- 11	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock 12			12/18/	2017				G	V	3,000		D	(1)	259,061		,061	D			
Common Stock													51,425		,425		I	Family Trust of Parent		
Common Stock											979		I		By Dependent Child					
Common Stock														15,473.6767			I	By Savings Plan		
		Та									osed of, o					wned				
				Transa Code (saction of			6. Date Exercisable and Expiration Date (Month/Day/Year)				7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		Deri	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4		11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Nu of	mber						

Explanation of Responses:

1. No consideration received.

/s/ C. K. Guild by Power of <u>Attorney</u>

12/19/2017

** 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.