FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPRO	OVAL						
	OMB Number: 3235-0							
l	Estimated average burden							
l	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* Chapman Neil A					2. Issuer Name and Ticker or Trading Symbol EXXON MOBIL CORP [XOM]									Relationship of Reporting Person(s) to Issuer (Check all applicable) Pirector 1006 Owner					
(Last)							3. Date of Earliest Transaction (Month/Day/Year) 11/15/2016									X Officer (give title below) Vice President 10% Owner Vice President			
(Street) IRVING TX 75039-2298					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									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		Zip) e I - No	n-Deriv	ative	Secu	ıritie	s Acc	uired.	. Dis	posed o	f. or l	3ene	ficial	lv Owne				
1. Title of Security (Instr. 3) 2. Transa Date				2. Transac	ction	2A. Exe	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4) or	5. Amou Securiti Benefic	int of es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect		
									Code	v	Amount	nt (A) or (D)		rice	Transaction(s) (Instr. 3 and 4)			(
Common Stock				11/15/				S		8,000	I		\$87	222	2,299	D			
Common	Stock			11/15/	_			S		8,000	I		\$87	629		I	By Spouse		
Common Stock														8,85	4.1118	I	By Savings Plan		
Common Stock														660		I	By Dependent Child 1		
Common Stock															6	660	I	By Dependent Child 3	
Common Stock														660		I	By Dependent Child 2		
		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)	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)		5. Number of		6. Date Exerci Expiration Da (Month/Day/Y		sable and te	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		8 5 (1	. Price of Perivative Security Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Ownersh Form: Direct (D or Indirec (I) (Instr.	D) Beneficial Ownership ect (Instr. 4)	
Evnlanation	of Respons	ac.			Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amou or Numb of Share	er					

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

11/17/2016

** 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.

 $^{^{\}star}$ 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).