FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APP	ROVAL
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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

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1. Name and Address of Reporting Person* <u>Spellings James M Jr</u>					2. Issuer Name and Ticker or Trading Symbol EXXON MOBIL CORP [XOM]									Check a	ationship of Reporting all applicable) Director Officer (give title		10%		wner	
(Last) (First) (Middle) C/O EXXON MOBIL CORPORATION 5959 LAS COLINAS BOULEVARD					3. Date of Earliest Transaction (Month/Day/Year) 02/05/2016									X	belov	officer (give title elow) Vice Pres. & Gen. Tax Counse			`	
(Street) IRVING (City)	eet) VING TX 75039-2298			4. If Amendment, Date of Original Filed (Month/Day/Year)										. Individine) X	Form	ual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Tabl	e I - Noi	n-Deriv	ative	Se	curiti	es Ac	quired,	Dis	posed o	f, o	r Ben	efici	ally C	wne	ed			
Date			Date	ate E lonth/Day/Year) if		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4				nd S	5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount		(A) or (D)	Price	. 1	Transaction(s) (Instr. 3 and 4)				()
Common	Stock			02/05	/2016				S		11,924	4	D	\$78	3.9	18	186,750 D			
Common Stock													10,3		361.7706		I	By Savings Plan		
		Та									sed of, onvertib					ned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	e Execution	Date,	4. Transaction Code (Instr. 8)		n of		6. Date Exercisabl Expiration Date (Month/Day/Year)		е	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)					9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	O F D OI (I)	0. ovmership orm: irect (D) r Indirect) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	or Nu of	ount mber ares						

Explanation of Responses:

/s/ James M. Spellings, Jr.

02/08/2016

** 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).