FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL							
OMB Number:	3235-0287						
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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).

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

Name and Address of Reporting Person* Duffin Neil W					2. Issuer Name and Ticker or Trading Symbol EXXON MOBIL CORP [XOM]										5. Relationship of Reporting Person(s) to Issue (Check all applicable) Director 10% (vner	
(Last)	(First)	(Mi	ddle)		3. Date of Earliest Transaction (Month/Day/Year) 02/10/2015								X	Officer (g below)			Other (specify below)			
EXXON MOB																Executiv	ve Offi	cer		
5959 LAS COLINAS BOULEVARD					4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)														X		d by One F d by More		-	a Person	
IRVING	TX	75	039-2298												i omi me	a by More	uiaii Oii	e reportir	g 1 613011	
(City)	(State)	(Zi _l	p)																	
		Та	ble I - Nor	n-Der	ivativ	e Se	curitie	s Acqı	uired, l	Disp	osed of,	or E	3enefi	cially Ov	vned					
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)			2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a				5. Amount Securities Beneficiall Following	y Owned Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
							Code	v	Amount		(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)					
Common Stock			02/10/2015		.5			G V		153		D	(1)	29,5	29,533			By Family Trust		
Common Stock															383,	133		D		
Common Stock														2,452.4085				By Savings Plan		
			Table II - [sed of, o				ed			·		
Derivative Conversion Security (Instr. 3) or Exercise (Month/Day/Year) if any			3A. Deemed Execution Da if any (Month/Day/\)	Pate, Transaction Code (Instr.			5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercis Expiration Date (Month/Day/Ye		e Securities Underl		derlying curity	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Ownership form: Direct (D) or Indirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	ode V (A)		(D)			Expiration Date	on Nu		Amount or Number of Shares		Transacti (Instr. 4)	on(s)			

1. No consideration received.

/s/ Neil W. Duffin

02/12/2015

** 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).