FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
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

1. Name and Address of Reporting Person * <u>Dolan Michael James</u>					2. Issuer Name and Ticker or Trading Symbol EXXON MOBIL CORP [XOM]										ationship of F c all applicab Director		Person	(s) to Issuer 10% Ov	vner	
(Last)	(First)	(Mi	iddle)			3. Date of Earliest Transaction (Month/Day/Year) 03/13/2015									Officer (g below)			Other (s below)	specify	
C/O EXXON MOBIL CORPORATION														S	enior Vi	ce Pre	esident			
5959 LAS COLINAS BOULEVARD					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) IRVING	TX	75	75039-2298									X	Form filed by One Reporting Person Form filed by More than One Reporting Person				g Person			
(City)	(State)	(Zi	p)																	
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
Date				insaction th/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				Securities Beneficiall Following	Beneficially Owned Following Reported		nership : Direct (D) direct (I) : 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount		(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock 03/1				13/2015		G	V	117		D	(1)	777,311			D					
Common Stock															10,379.5245			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 Execution Date, if any (Month/Day/Year)		ate,	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		ite	7. Title and Amou Securities Under Derivative Securi (Instr. 3 and 4)		derlying curity	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title		Amount or Number of Shares		(Instr. 4)				

Explanation of Responses:

1. No consideration received.

/s/ Michael J. Dolan

03/20/2015

** 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.