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

										. ,									
Name and Address of Reporting Person* Woods Darren W					2. Issuer Name and Ticker or Trading Symbol EXXON MOBIL CORP [XOM]									Relationship of Reporting Person(s) to Issuer (Check all applicable) Output Out					
(Last) EXXON MOI	(First)	,	fiddle)		3. Date of Earliest Transaction (Month/Day/Year) 11/25/2015								X	Director Officer (g below)		10% Owner of title Other (specification) nior Vice President			
5959 LAS COLINAS BOULEVARD					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indi	6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) IRVING	TX	7.	5039-2298										X	X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(State)) (Z	lip)																
		T	able I - Noı	n-Derivat	ive S	ecurit	ies Acc	uired, I	Disp	osed o	f, or	Benefi	cially Ov	vned					
1. Title of Security (Instr. 3)				2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a				nd 5) Securities Beneficiall Following				7. Nature of Indirect Beneficial Ownership	
									v	Amount		(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock					25/2015			M		6,450		A	(1)	231,499			D		
Common Stock				11/25/2	25/2015		D		6,450		D	\$81.64	225,049		D				
Common Stock													7,280.9097				By Savings Plan		
			Table II - I	Derivativ e.g., put										ed					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	se (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	Code	Transaction Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable Expiration Date (Month/Day/Year)		Securities Underly		erlying	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported	e s ally	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title		Amount or Number of Shares		Transacti (Instr. 4)	ion(s)			
Restricted Stock Units	(1)	11/25/2015		М			6,450	(2)		(2)		mmon tock	6,450	(1)	0		D		
Restricted Stock Units	(1)							(3)		(3)		mmon tock	7,350		7,350	0	D		

- 1. Each restricted stock unit represents a contingent right to receive a cash payment corresponding to the value of one share of ExxonMobil common stock.
- 2. The units vest in two equal installments. The first installment vested on the third anniversary and the remaining installment vested on the seventh anniversary of the grant date (November 25, 2008).
- 3. The units vest in two equal installments. The first installment vested on the third anniversary and the remaining installment will vest on the seventh anniversary of the grant date (November 24, 2009).

/s/ Jerry D. Miller by Power of 11/30/2015 Attorney

** Signature of Reporting Person

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.