FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
OMB Number:	3235-0104							
Estimated average burden								
hours per response:	0.5							

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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* Ortwein Sara N		s	Date of Event Reatement (Month/	_ ' " .	3. Issuer Name and Ticker or Trading Symbol EXXON MOBIL CORP [XOM]						
(Last)	(First)	(Middle)	=			ionship of Reporting Person(s all applicable)	,		5. If Amendment, Date of Original Filed (Month/Day/Year)		
C/O EXXON MOBIL CORPORATION 5959 LAS COLINAS BOULEVARD (Street) IRVING TX 75039-2298					X	Director Officer (give title below) Executive Office	10% Owner Other (specify below)		Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person		
(City)	(State)	(Zip)									
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Security (Instr. 4)					nt of Securities Ily Owned (Instr. 4)			4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Common Stock						200,622(1)	D				
Common Stock					14,551.1844		I		By Savings Plan		
Common Stock					979		I		By Dependent Child		
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)											
1. Title of Derivative Security (Instr. 4)		2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Derivative Security (Instr. 4)		Col or I		Conversion or Exercise	(D) or	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
			Date Exercisable	Expiration Date	Title		Amount or Number of Shares	Price of Deriva Securi	tive	Indirect (I) (Instr. 5)	

Explanation of Responses:

1. Direct shareholdings include 20,472 shares in joint ownership with reporting person's spouse.

/s/ Sara N. Ortwein

11/07/2016

** 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 5 (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).