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* Schleckser Robert N | | | | | EXX | 2. Issuer Name and Ticker or Trading Symbol EXXON MOBIL CORP [XOM] | | | | | | | | | itionship of R all applicab Director | | Person(| (s) to Issuer 10% Ov | vner |
|--|---|--|---|---|---|--|--|-------|--|------------------------------|----------|---|---|--|---|---|---|--|--|
| (Last) | (First) | (Mi | iddle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 11/25/2016 | | | | | | | | X | Officer (g below) | Officer (give title below) | | Other (specify below) | |
| C/O EXXON MOBIL CORPORATION | | | | | | | | | | | | | | | Vice President and Treasurer | | | | |
| 5959 LAS COLINAS BOULEVARD | | | | If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Indi | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | | |
| | | | | | | | | | | | | | | X | Form filed by One Reporting Person | | | | |
| (Street) IRVING | TX | 75 | 75039-2298 | | | | | | | | | | | | Form filed by More than One Reporting Person | | | | g Person |
| (City) | (State) | (Zi _l | p) | | | | | | | | | | | | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | |
| Date | | | | h/Day/Year) Execution | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | | | 4. Securiti Disposed | | | | 5. Amount Securities Beneficially Following I | y Owned Reported | Form | nership : Direct (D) lirect (I) . 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | | v | Amount | (A (D | A) or D) | Price | (Instr. 3 and 4) | | | | (111501.4) | |
| Common Stock 11/2. | | | | 25/2016 | | F | | 2,011 | | D | \$86.7 | 144,200(1) | | | D | | | | |
| Common Stock | | | | | | | | | | | | | | | 19,693.8743 | | | 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 (Month/Day/Year) | 3A. Deemed Execution Da if any (Month/Day/ | ate, | l. Γransaction Code (Instr. β) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisa Expiration Date (Month/Day/Year | | te | 7. Title and Amou Securities Underl Derivative Securi (Instr. 3 and 4) | | erlying | 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 | Date Exp Exercisable Date | | Title | | Amount or Number of Shares | | (Instr. 4) | on(s) | | |

Explanation of Responses:

1. Direct shareholdings include 11,911 shares in joint ownership with reporting person's spouse.

/s/ Jerry D. Miller by Power of

** Signature of Reporting Person

Attorney

11/29/2016

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).