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* Spellings James M Jr					2. Issuer Name and Ticker or Trading Symbol EXXON MOBIL CORP [XOM]										Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) C/O EXXON N	(First)	,	iddle)		3. Date of Earliest Transaction (Month/Day/Year) 11/25/2016									X	Officer (g below)			specify		
5959 LAS COLINAS BOULEVARD (Street) IRVING TX 75039-2298 (City) (State) (Zip)					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)									ividual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person					
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
Date					h/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 and					ties cially Owned ring Reported		nership : Direct (D) lirect (I) . 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount		A) or D)	Price	(Instr. 3 and 4)				()	
Common Stock 11/2					25/2016				F		3,085	5	D	\$86.7	183,665			D		
Common Stock														10,804.043		1.043		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)	Execution Date, if any			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)		7. Title and Amou Securities Underl Derivative Securit (Instr. 3 and 4)		lerlying urity	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A) (D)				Expiration Date	or Nu		Amount or Number of Shares	Transacti (Instr. 4)		on(s)			

Explanation of Responses:

/s/ Jerry D. Miller by Power of

Attorney

** Signature of Reporting Person

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).