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* Chapman Neil A | | | | 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) (First) (Middle) 5959 LAS COLINAS BOULEVARD | | | | 3. Date of Earliest Transaction (Month/Day/Year) 11/30/2016 | | | | | | | | X Officer (give title Other (specify below) Vice President | | | | | | | |
| (Street) IRVING | TX | 75 | 039-2298 | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | - 1 | 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) | (Zi | p) | | | | | | | | | | | | | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | |
| [| | 2. Transaction Date (Month/Day/Year) | | 2A. Deemed Execution Date, if any (Month/Day/Year | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 a | | | 5. Amount of Securities Beneficially Owner Following Reporte | | | Beneficial Ownership | | | | | | |
| | | | | | | | Code | v | Amount | | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | | (Instr. 4) | | | |
| Common Stock | | | | 11/3 | 0/2016 | | A | | 46,800 |) | A | \$0 ⁽¹⁾ | 269,0 |)99 | D | | | | |
| Common Stock | | | | 12/0 | 1/2016 | | F | | 5,748 | | D | \$87.695 | 263,3 | 351 | D | | | | |
| Common Stock | | | | | | | | | | | | | 66 | 0 | I | By Dependent Child 1 | | | |
| Common Stock | | | | | | | | | | | | | 629 | 9 | I | By Spouse | | | |
| Common Stock | | | | | | | | | | | | | 660 | 0 | I | By Dependent Child 3 | | | |
| Common Stock | | | | | | | | | | | | 8,854.1118 | | I | By Savings Plan | | | | |
| Common Stock | | | | | | | | | | | | 660 | | I | By Dependent Child 2 | | | | |
| 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) | Derivative Conversion Date Execution Date, | | ate, | 4. Fransaction Code (Instr 3) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | ite | 7. Title and Amou Securities Underl 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 | Owner Form: Direct or Indi | Beneficial D) Ownership ect (Instr. 4) | | | | |
| | | | | | Code V | (A) (D) | Date Exerci | sable | Expiration Date | Title | | Amount or Number of Shares | (Instr. 4) | | (0) | | | | |

Explanation of Responses:

1. Grant of restricted stock units to be settled in shares only.

/s/ Jerry D. Miller by Power of Attorney

12/02/2016

** 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 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).