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*  McKee Karen T						2. Issuer Name and Ticker or Trading Symbol  EXXON MOBIL CORP [ XOM ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner				
(Last) (First) (Middle)				3. Date of Earliest Transaction (Month/Day/Year) 11/29/2019								X	Officer (e	jive title	Other (specify below)				
5959 LAS COLINAS BOULEVARD														Vice President					
(Street) IRVING	TX	75	75039-2298			4. If Amendment, Date of Original Filed (Month/Day/Year)								- 1	Individual or Joint/Group Filing (Che-     X Form filed by One Reporting     Form filed by More than One				ŕ
(City)	(State)	(Zi	p)																
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
Di Titalo di Godanii, (indani d)				2. Transaction Date (Month/Day/Year)		ar)	2A. Deem Execution if any (Month/D	n Date,	3. Transaction Code (Instr. 8)		4. Securiti Disposed				Beneficially Own Following Repor		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership
									Code V		Amount		(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common Stock			11/29/2019		)			F		1,571	!	D	\$68.755	157,	157,266		D		
Common Stock			12/03/2019				F		4,738	4,738		\$68.265	152,528			D			
Common Stock														54	19		I	Indirect by Spouse	
Common Stock														9,452.3274				By Savings Plan	
Common Stock														6,011.0344			I	Savings Plan-by Spouse	
	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)			ate,	Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercis Expiration Date (Month/Day/Ye		ite	7. Title and Amo Securities Under Derivative Secur (Instr. 3 and 4)		derlying curity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio	e s lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(A) (D)		Date Exercisable		or Nu		Amount or Number of Shares	(Instr. 4		on(a)		

**Explanation of Responses:** 

/s/ C. K. Guild by Power of Attorney

\*\* Signature of Reporting Person Date

12/03/2019

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.

 $<sup>^{\</sup>star}$  If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).