SEC Form 3

FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL
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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 [*] Littleton Stephen A			2. Date of Event Re Statement (Month/I 03/15/2020		ar) EXXON MOBIL CORP [XOM]						
	(First) MOBIL CORPC LINAS BOULE TX (State)				(Check all	nship of Reporting Person(s applicable) Director Officer (give title below) Vice President and S	10% Owner Other (spec below)		(Mor 6. In	hth/Day/Year) dividual or Joint/ icable Line) Form filed by	te of Original Filed Group Filing (Check y One Reporting Person y More than One Reporting
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Security (Instr. 4)						of Securities / Owned (Instr. 4)			4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Common Stock	¢					90,675	D				
Common Stock						6,198.9025	I		By Savings Plan		
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)		Conve or Exe		ercise	cise (D) or	6. Nature of Indirect Beneficial Ownership (Instr. 5)
			Date Exercisable	Expiratior Date	n Title		Amount or Number of Shares	Price o Deriva Securi	tive	Indirect (I) (Instr. 5)	

Explanation of Responses:

<u>/s/ Stephen A. Littleton</u> ** Signature of Reporting Person <u>03/19/2020</u> Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

* 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).

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.