UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934
or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL
OMB Number: 3235-0104
Estimated average burden hours per response: 0.5

1. Name and Address of Reporting Person *
Talley Darrin L

*(Last) (First) (Middle)*
5959 LAS COLINAS BOULEVARD
C/O EXXON MOBIL CORPORATION
(IRVING TX 75093-2298

Street) (City) (State) (Zip)

2. Date of Event Requiring Statement (Month/Day/Year)
04/01/2022

3. Issuer Name and Ticker or Trading Symbol
EXXON MOBIL CORP [ XOM ]

4. Relationship of Reporting Person(s) to Issuer
(Reject all applicable)
Director X 10% Owner
Officer (give title below)
Vice President

5. If Amendment, Date of Original Filed
(Month/Day/Year)

6. Individual or Joint/Group Filing (Check Applicable Line)
X Form filed by One Reporting Person
Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)

2. Amount of Securities Beneficially Owned (Instr. 4)

3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)

4. Nature of Indirect Beneficial Ownership (Instr. 5)

Common Stock 126,650.3012 D

Common Stock 100 I By Dependent Child 1

Common Stock 37,510 I By Revocable Trust

Common Stock 5,815.198 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 Underlying Derivative Security (Instr. 4)

4. Conversion or Exercise Price of Derivative Security

5. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)

6. Nature of Indirect Beneficial Ownership (Instr. 5)

Date Exercisable Expiration Date Title Amount or Number of Shares

Explanation of Responses:

1. Shares held jointly with spouse

/s/ Darrin L. Talley

** Signature of Reporting Person 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).


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.