### **EXXON MOBIL CORP**

Form 4

November 17, 2016

#### **OMB APPROVAL** UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB 3235-0287 Washington, D.C. 20549 Number: Check this box January 31, Expires: if no longer 2005 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF subject to Estimated average **SECURITIES** Section 16. burden hours per Form 4 or response... 0.5 Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940 See Instruction 1(b). (Print or Type Responses) 1. Name and Address of Reporting Person \* 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading Chapman Neil A Issuer Symbol EXXON MOBIL CORP [XOM] (Check all applicable) (Last) (First) (Middle) 3. Date of Earliest Transaction (Month/Day/Year) Director 10% Owner X\_ Officer (give title Other (specify 5959 LAS COLINAS 11/15/2016 below) **BOULEVARD** Vice President (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check Filed(Month/Day/Year) Applicable Line) \_X\_ Form filed by One Reporting Person Form filed by More than One Reporting IRVING, TX 75039-2298 (City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 1 Securities 5 Amount of 6 Ownership 7 Nature of 1 Title of 2 Transaction Data 24 Dagmad

1.Title of	2. Transaction Date	2A. Deemed	3.	4. Securities			5. Amount of	6. Ownership	7. Nature of
Security	(Month/Day/Year)	Execution Date, if	Transactio	tionAcquired (A) or			Securities	Form: Direct	Indirect
(Instr. 3)		any	Code	Disposed of (D)			Beneficially	(D) or	Beneficial
		(Month/Day/Year)	(Instr. 8)				Owned	Indirect (I)	Ownership
		, ,	,				Following	(Instr. 4)	(Instr. 4)
							Reported	,	,
					(A)		Transaction(s)		
					or		(Instr. 3 and 4)		
			Code V	Amount	(D)	Price	(msur. 5 and 1)		
Common	11/15/0016		C	0.000	Ъ	ф <b>07</b>	222 200	Ъ	
Stock	11/15/2016		S	8,000	D	\$8/	222,299	D	
Stock									
Common	11/15/0016		<b>a</b>	0.000	_	ф. О <b>.</b>	620		D 0
Stock	11/15/2016		S	8,000	D	\$ 87	629	I	By Spouse
Stock									
Common									By Savings
Stock							8,854.1118	I	Plan
SIUCK									1 1411
									By
Common							660	I	•
Stock							660	1	Dependent
									Child 1
Common							660	т	Dv
Common							660	I	By
Stock									Dependent

Child 3

9. Nu

Deriv

Secu

Bene Own Follo Repo Trans (Instr

Common

Stock 660 I Dependent Child 2

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

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 control number.

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(9-02)

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)	4. Transact Code (Instr. 8)	5. ionNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titi Amou Under Secur (Instr	int of rlying	8. Price of Derivative Security (Instr. 5)	
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

# **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Chapman Neil A
5959 LAS COLINAS BOULEVARD
IRVING, TX 75039-2298

Vice
President

## **Signatures**

/s/ Jerry D. Miller by Power of Attorney 11/17/2016

\*\*Signature of Reporting Person Date

# **Explanation of Responses:**

- \* 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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