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 *  TILLERSON REX W					EX	2. Issuer Name and Ticker or Trading Symbol EXXON MOBIL CORP [ XOM ]									ationship of F k all applicab Director		Person(	s) to Issuer	
(Last)	(First)	,	ddle)			Date of Earliest Transaction (Month/Day/Year) 2/07/2007								X	below)	1.D	Other (s	specify	
C/O EXXON N															Ci	nairman a	and Pr	esident	
5959 LAS COLINAS BLVD					4. If A	Amen	dment, D	ate of Or	iginal File	ed (Mo	onth/Day/Ye	- 1	6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person						
(Street)														\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		-		ne Reportir	ig Person
IRVING	TX	75	039-2298																
(City)	(State)	(Zi	o)																
		Та	ble I - Noı	n-Der	rivativ	e Se	ecuritie	s Acq	uired, l	Disp	osed of,	or	Benefi	cially Ov	vned				
D D			2. Transaction Date (Month/Day/Year)		ear)	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a				Securities Beneficially Following F	Beneficially Owned Following Reported		nership Direct (D) rect (I) 4)	7. Nature of Indirect Beneficial Ownership	
						Code	v	Amount		(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)				(Instr. 4)			
Common Stock														914,569			D		
Common Stock														12,618.5699			I	By Savings Plan	
Common Stock			12/0	07/200	7			S		300 Г		D	\$91.74	1,725			I	By Dependent Child	
			Table II - I (								sed of, o				ed				
1. Title of Derivative Security (Instr. 3)  2. Conversion or Exercise Price of Derivative Security  3. Transaction Date Execution Date (Month/Day/Year) if any (Month/Day/Year)			ate, Transaction Code (Instr.			5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exerci Expiration Da (Month/Day/Yo		te	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 Beneficia Owned Following Reported	e s illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A) (D)		Date Exercisable		Expiration Date	or Nur		Amount or Number of Shares		Transacti (Instr. 4)	ion(s)		

Explanation of Responses

Jerry D. Miller by Power of Attorney

\*\* Signature of Reporting Person Date

12/11/2007

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).