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

Name and Address of Reporting Person*  Franklin Robert Stuart						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)	•	iddle)			3. Date of Earliest Transaction (Month/Day/Year) 12/07/2009									Officer (g below)	ive title	Preside	Other (s		
C/O EXXON MOBIL CORPORATION 5959 LAS COLINAS BLVD.					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) IRVING	TX	75	039-2298												X Form filed by One Reporting Person  Form filed by More than One Reporting Person					
(City)	(State)	(Zi	p)																	
		Та	ble I - Noi	n-Der	ivative	e Se	ecuritie	s Acq	uired, l	Disp	osed of,	or l	Benefi	cially O	wned					
Date						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				nd 5) Securities Beneficial Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	v	Amount		(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)				(111501.4)		
Common Stock 12				12/0	07/2009				F		3,474		D	\$74.86	113,208			D		
Common Stock									2,689.	2,689.7183		,	By Employee Savings Plan							
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)	3A. Deemed Execution Da if any (Month/Day/	ate,		ransaction ode (Instr.		aber of tive ties ed (A) posed of str. 3, 4	6. Date I Expirati (Month/	on Da		e and 7. Title and Amou Securities Underl Derivative Securi (Instr. 3 and 4)		derlying curity	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
Fundamentian of Da					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title		Amount or Number of Shares		(Instr. 4)	ion(s)			

Explanation of Responses:

/s/ Jerry D. Miller by Power of Attorney

12/09/2009

\*\* Signature of Reporting Person

Date

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).