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  Kelly Alan J					EX	2. Issuer Name and Ticker or Trading Symbol EXXON MOBIL CORP [ XOM ]  3. Date of Earliest Transaction (Month/Day/Year)									5. Relationship of Reporting Person (Check all applicable) Director				10% Owner	
(Last)	(First)	(Mi	iddle)		12/07/2009								X	Officer (g below)	ive title	e title Other (speci below)		specify		
C/O EXXON MOBIL CORPORATION															Vice President					
5959 LAS COLINAS BLVD.					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indi	6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)															X Form filed by One Reporting Person					
IRVING	TX	75	039-2298												Form filed by More than One Reporting Person				g Person	
(City)	(State)	(Zi	p)																	
		Та	ble I - Noı	n-Der	ivativ	e S	ecurit	ies Acq	uired, l	Disp	osed of,	, or E	Benefi	cially Ov	/ned					
Date				Date	Transaction te onth/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Code (Instr.		4. Securiti Disposed				5. Amount Securities Beneficiall Following	y Owned Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
								Code	v	Amount		(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Common Stock 12/				12/0	07/2009				F		4,365	5	D	\$74.86	144,979			D		
Common Stock														2,7	50			By Family Trust		
Common Stock														1,101	088		I	By 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)	ive Conversion Date Execution Date		ate,	Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercis Expiration Date (Month/Day/Yes		e Securities Ur		derlying curity	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)				
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title		Amount or Number of Shares	ımber		Cii(a)			

Explanation of Responses:

/s/ Jerry D. Miller by Power of Attorney

12/09/2009

\*\* Signature of Reporting Person

n 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).