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 * Duffin Neil W				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) EXXON MOB	ast) (First) (Middle) XXON MOBIL CORP.				3. Date of Earliest Transaction (Month/Day/Year) 03/11/2010									X	X Officer (give title Other (specify below) Executive Officer					
5959 LAS COLINAS BLVD. (Street) IRVING TX 75039-2298					4. If Amendment, Date of Original Filed (Month/Day/Year)									- 1	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(State)	(Zi	p)																	
		Та	ble I - No	n-Deri	ivative	Se	ecuritie	s Acq	uired,	Disp	osed of,	, or I	Benefi	cially O	vned					
in this of occurry (mean of				2. Transaction Date (Month/Day/Year)		ar)	2A. Deeme Execution if any (Month/Da	Date,	3. Transaction Code (Instr.) 8)		4. Securiti Disposed				Beneficially Owned Following 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					03/11/2010				G	V	225		D	(1)	235,019			D		
Common Stock														1,230.2044			I	By Savings Plan		
Common Stock															34	0		I	By Trustee For Dependent Child 1	
Common Stock															340			I	By Trustee For Dependent Child 2	
	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. 3. Transaction Date Date (Month/Day/Year) if any (Month/Day/sear) Execution Diffusion from the properties of Derivative Security		ate, Transaction Code (Instr.					6. Date Exerc Expiration Da (Month/Day/Y		te			nderlying ecurity 4)	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A) (D)		Date Exercisable		Expiration Date			or Number of Shares						

Explanation of Responses:

1. No consideration received.

/s/ Neil W. Duffin

03/12/2010

** 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.

 $^{^{\}star}$ 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).