FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| Silligion, D.C. 20549 | OMB APPROVAL |
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| 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).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| 1. Name and Address of Reporting Person* <u>Schleckser Robert N</u> | | | 2. Issuer Name and Ticker or Trading Symbol EXXON MOBIL CORP [XOM] | | | | | | | | | | heck a | all app | licable) | g Person(s) to Is | | | |
|-----------------------------------------------------------------------------------------|----|-------------------|----------------------------------------------------------------------|-------------------------------------------|-------------------------------------------------------------|---------------------------------------------|--------------------------------------------|---------------|---------------------------------------------------------|----------------------------------------------------------------------------------------|---------------------|-----------------------------|------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|--------------------------------------------------------------------|-----------------------|---------------------------------|
| (Last) (First) (Middle) C/O EXXON MOBIL CORPORATION 5959 LAS COLINAS BOULEVARD | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 11/20/2012 | | | | | | | | | | below) below) Vice President and Treasurer | | |)`` | |
| (Street) IRVING (City) | T) | | 75039-229 Zip) | 98 | 4. If | f Ame | endment | , Date o | f Original | (Month/Da | ay/Ye | ar) | | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| | ` | | e I - Non | -Deriva | ative | Se | curitie | s Ac | quired, | Disp | osed o | f, o | r Bene | eficia | lly O | wne | ed | | |
| 1. Title of Security (Instr. 3) 2. Tr. Date | | 2. Transa Date | saction /Day/Year) | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | 3. Transaction Code (Instr. r) 8) | | 4. Securities Acquired (A Disposed Of (D) (Instr. 3, | | | (A) or | or 5. A 4 and Sec Ben Owr | | ount of ties cially I Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | | Code | v | Amount | | (A) or (D) | | | Reported Transaction(s) (Instr. 3 and 4) | | | (Instr. 4) |
| Common Stock | | | | 11/20/2012 | | | | | G | V | 115 D | | (1) | | 80,564(2) | | D | | |
| Common Stock | | | | | | | | | | | | | | 328.7291 | | I | As Trustee for Child 1 | | |
| Common Stock | | | | | | | | | | | | | | | | 30 | 5.9624 | I | As Trustee for Child 2 |
| Common Stock | | | | | | | | | | | | | | 16, | | 688.607 | I | By Savings Plan | |
| | | Ta | ble II - D | erivati e.g., pu | ve S ts, c | ecu calls | urities s, warr | Acqu ants, | ired, Di option | spo s, co | sed of, onvertib | or E | Benefi ecurit | cially ies) | / Ow | ned | | | |
| 1. Title of 2. 3. Transaction 3A. Deemed 4 Derivative Conversion Date Execution Date, T | | | 1. Transa Code (| 5. Numbransaction of ode (Instr. Derivati | | vative rities rired r osed) | 6. Date E: Expiratio (Month/D | kercis | able and | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amoun | | str. 3 | | vative urity tr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | Code | | | v | (A) | (D) | Date Exercisal | | Expiration Date | Numbe of Title Shares | | | | | | | |

Explanation of Responses:

- 1 No consideration received
- 2. Direct shareholdings include 8,914 shares in joint ownership with reporting person's spouse.

/s/ Robert N. Schleckser 11/20/2012

** Signature of Reporting Person

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

- * 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.

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.