## FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington,	D.C.	20549

<b>STATEMENT</b>	<b>OF CHANGES II</b>	N BENEFICIAL	<b>OWNERSHIP</b>

ı	OMB APPROVAL										
	OMB Number:	3235-0287									
	Estimated average burd	den									
	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

1. Name and Address of Reporting Person* Albers Mark W													5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director  Officer (give title Other (specify						
(Last) (First) (Middle) C/O EXXON MOBIL CORPORATION 5959 LAS COLINAS BOULEVARD						3. Date of Earliest Transaction (Month/Day/Year) 10/31/2011								Senior Vice President					
(Street) IRVING	TZ	X	75039-2	298	_	f Amei	ndme	nt, Date o	of Original Filed (Month/Day/Year)					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)	(Si		(Zip)	n Dori	vativ	- So	ourit	tion Ac	auirod		enocod o	f or Po	noficial	ly Owned	l				
1. Title of Security (Instr. 3) 2. Tra		2. Transa	action	2A Ex r) if a	2A. Deemed Execution Date,		3. Transaction Code (Instr. 8)				(A) or	5. Amount Securities Beneficial Owned Fo	of	6. Own Form: (D) or I (I) (Inst	Direct ndirect	7. Nature of Indirect Beneficial Ownership			
								(		v	Amount	(A) or (D)	Price	Reported Transactio (Instr. 3 an	ion(s)		(Instr. 4)		
Common Stock 1			10/31	/2011				M		20,000	A	\$37.12	422,396		D				
Common	Stock			10/31	/2011				S		20,000	D	\$80	402,3	396	]	D		
Common	Stock													17,252.3383 I Savin Plan			Savings		
Common Stock													15	j		,	By Trustee For Dependent Child 1		
		٦	Table II						,		oosed of, converti		,	Owned		,			
1. Title of Derivative Security (Instr. 3)	Title of 2. 3. Transaction 3A. Deemed 4 Execution Date Execution Date, if any			ransaction of ode (Instr. Derivati		ivative urities uired or oosed O) (Instr.	Expiration Da (Month/Day/Y		ate of Securitie		ies g Security	8. Price of Derivative Security (Instr. 5)  8. Price of Derivative Security Security Owner Follow Report Transs (Instr.		ive ies Form: cially Direct ( or Indir ing ed ction(s)		Beneficial Ownership ect (Instr. 4)			
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amount or Number of Shares						
Employee Stock Option (Right to Buy)	\$37.12	10/31/2011			M			20,000	11/28/2	002	11/28/2011	Common Stock	20,000	\$0	0		D		

**Explanation of Responses:** 

Mark W. Albers

11/02/2011

\*\* Signature of Reporting Person

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> 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).