## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

l	OMB APPRO	DVAL				
	OMB Number:	3235-0287				
	Estimated average burd	len				
l	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

Name and Address of Reporting Person*     LIPPINCOTT PHILIP						2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>EXXON MOBIL CORP</u> [ XOM ]								(Ch	5. Relationship of Reporting Person(s) to Is (Check all applicable)  X Director 10% C				
(Last) (First) (Middle) C/O EXXON MOBIL CORPORATION					3. Date of Earliest Transaction (Month/Day/Year) 05/28/2008										Offic belov	er (give title v)		Other (specify below)	
5959 LAS COLINAS BLVD.						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)  IRVING TX  (City) (State)			75039-229 Zip)	8											X Form filed by One Reporting Person Form filed by More than One Reporting Person				ng
(City)	(50		e I - Non	-Deriva	ative	Sec	uritie	s Acc	quired,	Dis	posed o	f, or E	Benef	 icial	ly Owne	ed			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)					Day/Year) if a		2A. Deemed Execution Date, f any (Month/Day/Year		3. 4. Securitie Transaction Disposed ( Code (Instr. 5)						Benefi Owned	ties cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	ect Of I	7. Nature of Indirect Beneficial Ownership
									Code	v	Amount	(A) or (D)		rice		ted action(s) 3 and 4)		(ins	(Instr. 4)
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)	rative Conversion Date Execution rity or Exercise (Month/Day/Year) if any		3A. Deemed Execution I if any (Month/Day	Date, Trans			5. Nu of Deriv Secu Acqu (A) or Dispo of (D) (Instr	ative rities ired sed	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		E	3. Price of Derivative Security Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	ship of Be D) Ow ect (In:	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	٧	(A)	(D)	Date Exercisal		Expiration Date	Title	Amou or Numb of Share	er					

**Explanation of Responses:** 

Jerry D. Miller by Power of

05/30/2008

<u>Attorney</u>

\*\* Signature of Reporting Person Date

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.