FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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* CRAMER HAROLD R					2. Issuer Name and Ticker or Trading Symbol EXXON MOBIL CORP [XOM]									heck al I	ationship of Reporting call applicable) Director Officer (give title below) Vice Pr		10% (ssuer Owner (specify	
(Last) (First) (Middle) C/O EXXON MOBIL CORP 5959 LAS COLINAS BLVD					3. Date of Earliest Transaction (Month/Day/Year) 12/01/2008												below resident		
(Street) IRVING (City)	ТУ	ζ 7	75039-22 Zip)	98	4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								ne) <mark>X</mark>	ividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Tabl	e I - No	n-Deriv	ative	Se	curitie	es Acc	quired,	Dis	posed o	f, or	Bene	eficia	lly O	vne	d		
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da					Execution Date,		Transaction Di			4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			4 and See Be		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	unt (A) or (D)		Price	Tr	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)		
Common Stock 12/01/2			/2008	2008		F		13,230)	D	\$78.	79	663,983		D				
Common Stock												7,		53.6743	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)	Conversion or Exercise Price of Derivative Security Date (Month/Day/Year) Execution Date, if any (Month/Day/Year) Execution Date, if any (Month/Day/Year) Month/Day/Year)		4. Transa Code (8)		ion of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Date Expiration Date Expiration Expiration Date Expiration Exercisable Date		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amoun or Numbe of		ount nber	nt er		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)			

Explanation of Responses:

Jerry D. Miller by Power of <u>Attorney</u>

12/03/2008

** 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.