FORM 4

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

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

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## 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

					01	Section	n 30(	(h) of the	Investr	ment C	Company Act	of 1940								
1. Name and Address of Reporting Person*  Walters Thomas R							2. Issuer Name <b>and</b> Ticker or Trading Symbol  EXXON MOBIL CORP [ XOM ]									able) r	ting Person(s) to Issuer  10% Owner  Other (specify			
(Last) (First) (Middle) C/O EXXON MOBIL CORPORATION 5959 LAS COLINAS BOULEVARD						3. Date of Earliest Transaction (Month/Day/Year) 10/28/2011										Officer (give title Other (specify below) below)  Vice President				
5959 LA	S COLINA	4.											ridual or Joint/Group Filing (Check Applicable							
(Street) IRVING TX 75039-2298														Form filed by One Reporting Person Form filed by More than One Reporting				I		
(City) (State) (Zip)															Person					
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 a			d 5)	Securiti Benefici Owned	5. Amount of Securities Beneficially Owned Following Reported		Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Code	v	Amount	(A) or (D)	Price		Transac (Instr. 3	tion(s)			(	
Common Stock 10/28/				10/28/2	2011			М		10,307	A	\$3	7.12	278	78,316		D			
Common Stock				10/28/2011				S		10,307	D	\$81.6	5433 <sup>(1)</sup>	268	68,009		D			
Common	Stock														11	,000		I .	By Family Trust	
Common Stock													13,104.7923			I	By Savings Plan			
Common Stock														15	,084			By Spouse		
Common Stock														13,0	066.67		I	By Spouse Savings Plan		
Common Stock															25	25,000		I .	By TRW 2010 GRAT 3	
Common Stock													25	,000		I :	By TRW 2010 GRAT 5			
		-	Table I								posed of,				wned					
1. Title of Derivative Security (Instr. 3)	Title of rivative Conversion or Exercise Price of Derivative Security  Security  1. Transaction Date (Month/Day/Year)  2. Conversion or Exercise Price of Derivative Security  3. Transaction Date (Month/Day/Year)  (Month/Day/Year)  3. Transaction Date (Execution Date, if any (Month/Day/Year)  (Month/Day/Year)  3. Transaction Date (Execution Date, if any (Month/Day/Year)  3. Transaction Date (Month/Day/Year)  3. Transaction Date (Execution Date, if any (Month/Day/Year)  4. Transaction Date (Execution Date, if any (Execution Da		emed ion Date,	n Date, Transac Code (Ir		ction of Derivative Securities Acquired		<del></del>	e Exer	cisable and	7. Title and Am of Securities Underlying Derivative Secu (Instr. 3 and 4)		ount 8	Price of Perivative Security Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Ownersh Form: Direct (D or Indirec (I) (Instr.		11. Nature of Indirect Beneficial Ownership (Instr. 4)		
			(D)	Date Exercisable		Expiration Date	Title	or Nun of Sha												
Employee Stock Option (Right to Buy)	\$37.12	10/28/2011			M			10,307	11/28	/2002	11/28/2011	Commo Stock	<sup>n</sup> 10,	307	\$0	13,693	3	D		

## **Explanation of Responses:**

1. Actual sale prices range from \$81.62 to \$81.66 per share. The number of shares sold at each separate price will be provided upon request.

/s/ Thomas R. Walters

11/01/2011

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.  $^{\star}$  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).

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.