FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: 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

Name and Address of Reporting Person* Balagia S Jack						2. Issuer Name and Ticker or Trading Symbol <u>EXXON MOBIL CORP</u> [XOM]									Check all D	applicable) rector ficer (give title	Othe	Owner er (specify
(Last) (First) (Middle) C/O EXXON MOBIL CORPORATION						3. Date of Earliest Transaction (Month/Day/Year) 12/02/2013									De	low) ice President	belo & Gen. Cou	´
(Street) IRVING TX 75039-229 (City) (State) (Zip)			98	4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									ine) X F F	·			
1 Tido of C	Saarruiter (Imat		e I - Nor			_	curitie		quired	, Dis	posed o						6. Ownership	7. Nature
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						Execution Date,			Trans Code	Transaction Dispos		rities Acquired (A) o ed Of (D) (Instr. 3, 4 a					Form: Direct (D) or Indirec (I) (Instr. 4)	of Indirect Beneficial Ownership
								Code	v	Amount	8	A) or D)	Price	Tra	nsaction(s) tr. 3 and 4)		(Instr. 4)	
Common Stock 12/02/					/2013						1,505		D	\$93	.91	170,217	D	
Common Stock																,911.1042	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)	ve Conversion Date Execution or Exercise (Month/Day/Year) if any			Date, Transaction					6. Date I Expirati (Month/I		Amount of			8. Price Derivative Security (Instr. 5)		Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	or	nber				

Explanation of Responses:

/s/ Jerry D. Miller by Power of **Attorney**

12/04/2013

** 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.