STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

EXXON MOBIL CORP

Form 4

December 04, 2013

FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 Check this box

OMB APPROVAL

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940 See Instruction

(Print or Type Responses)

1(b).

| 1. Name and Address Duffin Neil W | of Reporting Person * | 2. Issuer Name and Ticker or Trading Symbol EXXON MOBIL CORP [XOM] | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
|--------------------------------------|-----------------------|--|---|--|--|--|
| (Last) (F | First) (Middle) | 3. Date of Earliest Transaction | | | | |
| | | (Month/Day/Year) | Director 10% Owner | | | |
| EXXON MOBIL | | 12/02/2013 | X Officer (give title Other (specify | | | |
| CORPORATION | , 5959 LAS | | below) below) Executive Officer | | | |
| COLINAS BOUL | EVARD | | Executive officer | | | |
| (Street) | | 4. If Amendment, Date Original | 6. Individual or Joint/Group Filing(Check | | | |
| | | Filed(Month/Day/Year) | Applicable Line) | | | |
| | | | _X_ Form filed by One Reporting Person | | | |
| IRVING TX 750 | 39-2298 | | Form filed by More than One Reporting | | | |

IRVING, TX 75039-2298

| (City) | (State) | (Zip) Tab | le I - Non- | Derivative | Secu | rities Acc | quired, Disposed | of, or Beneficia | ally Owned |
|--------------------------------------|---|---|--|-------------------------------------|-------|--------------------|--|--|---|
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transactic Code (Instr. 8) | 4. Securitor(A) or Di (Instr. 3, | spose | d of (D) 5) Price | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| Common Stock | 12/02/2013 | | F | 8,202 | D | \$ 93.91 | 354,136 | D | |
| Common Stock | | | | | | | 6,631 | I | By Family Trust |
| Common Stock | | | | | | | 2,123.6368 | I | By Savings Plan |
| Common Stock | | | | | | | 490 | I | By Trustee For Dependent Child 1 |

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By Trustee Common For 490 I Stock Dependent Child 2

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of **SEC 1474** information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

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) | | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 4. Transacti Code (Instr. 8) | 5. orNumber of Derivative Securities Acquired (A) or | | | Amou Unde Secur | tle and unt of erlying rities r. 3 and 4) | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secur Bene Owne Follo Repo |
|---|--|---|--------------------------------------|---------------------------------------|--|---------------------|--------------------|-----------------------|---|---|--|
| | | | | | Disposed | | | | | | Trans |
| | | | | | of (D) | | | | | | (Instr |
| | | | | | (Instr. 3, 4, and 5) | | | | | | |
| | | | | | 1, 4114 5) | | | | Amount | | |
| | | | | | | Date Exercisable | Expiration Date | Title | Amount or Number of | | |
| | | | | Code V | (A) (D) | | | | Shares | | |

Reporting Owners

Relationships Reporting Owner Name / Address

> Director 10% Owner Officer Other

Duffin Neil W **EXXON MOBIL CORPORATION** 5959 LAS COLINAS BOULEVARD IRVING, TX 75039-2298

Executive Officer

Signatures

/s/ Jerry D. Miller by Power of 12/04/2013 Attorney

> **Signature of Reporting Person Date

Explanation of Responses:

- 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. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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