## Edgar Filing: Colton William M - Form 4

| Check this box<br>if no longer<br>subject to<br>Section 16.<br>Form 4 or<br>Form 5<br>obligations<br>may continue.<br>See Instruction<br>1(b).<br><b>STATEMENT</b><br><b>STATEMENT</b><br><b>STATEMENT</b><br><b>STATEMENT</b><br>Section 17(a) of th<br>30( | ES SECURITIES AND EXCHANGE CO<br>Washington, D.C. 20549<br>OF CHANGES IN BENEFICIAL OWN<br>SECURITIES<br>o Section 16(a) of the Securities Exchange<br>e Public Utility Holding Company Act of 1<br>h) of the Investment Company Act of 1940 | ERSHIP OF<br>Act of 1934,<br>1935 or Section<br>END 3235-0287<br>Number: 3235-0287<br>Number: January 31,<br>2005<br>Estimated average<br>burden hours per<br>response 0.5               |  |  |  |
|--|--|--|--|--|--|
| <ul> <li>(Print or Type Responses)</li> <li>1. Name and Address of Reporting Person <u>*</u><br/>Colton William M</li> <li>(Last) (First) (Middle)</li> <li>C/O EXXON MOBIL CORP., 5959</li> <li>LAS COLINAS BLVD.<br/>(Street)</li> </ul>                   | Symbol       I         EXXON MOBIL CORP [XOM]       3. Date of Earliest Transaction         (Month/Day/Year)       -         02/24/2011       -         4. If Amendment, Date Original       6   | 5. Relationship of Reporting Person(s) to<br>ssuer (Check all applicable) (Check all applicable) (Check all applicable) (Check all applicable) (Check applicable Line)                   |  |  |  |
| IRVING, TX 75039-2298 Form filed by One Reporting Person Form filed by More than One Reporting Person Person   |  |  |  |  |  |
| (City) (State) (Zip)   | Table I - Non-Derivative Securities Acqui  | ired, Disposed of, or Beneficially Owned   |  |  |  |
| (Instr. 3) any (Month  | on Date, if Transaction Disposed of (D)<br>Code (Instr. 3, 4 and 5)<br>/Day/Year) (Instr. 8)<br>(A)<br>or<br>Code V Amount (D) Price   | 5. Amount of<br>Securities6.7. Nature of<br>IndirectBeneficiallyForm:BeneficialOwnedDirect (D)OwnershipFollowingor Indirect(Instr. 4)Reported(I)Transaction(s)(Instr. 3 and 4)(Instr. 4) |  |  |  |
| Common 02/24/2011<br>Stock   | S 9,893 D <sup>\$</sup><br>86.1942   | 119,059 D  |  |  |  |
| Common<br>Stock  |  | 8,171.7014 I By<br>Plan  |  |  |  |

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

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 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 4.<br>Transactio<br>Code<br>(Instr. 8) | 5.<br>ofNumber<br>of<br>Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3,<br>4, and 5) |                     | Date               | Secur | unt of<br>rlying                       | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Nu<br>Deriv<br>Secur<br>Bene<br>Owne<br>Follo<br>Repo<br>Trans<br>(Instr |
|---|---|---|---|--|---|---------------------|--------------------|-------|--|---|---|
|   |   |   |   | Code V                                 | (A) (D)   | Date<br>Exercisable | Expiration<br>Date | Title | Amount<br>or<br>Number<br>of<br>Shares |   |   |

## **Reporting Owners**

| <b>Reporting Owner Name / Address</b> | Relationships |           |           |       |  |  |  |
|---------------------------------------|---------------|-----------|-----------|-------|--|--|--|
|                                       | Director      | 10% Owner | Officer   | Other |  |  |  |
| Colton William M                      |               |           |           |       |  |  |  |
| C/O EXXON MOBIL CORP.                 |               |           | Vice      |       |  |  |  |
| 5959 LAS COLINAS BLVD.                |               |           | President |       |  |  |  |
| IRVING, TX 75039-2298                 |               |           |           |       |  |  |  |
| Signatures                            |               |           |           |       |  |  |  |
| /s/ William M.                        |               |           |           |       |  |  |  |
| Colton 02/2                           | 5/2011        |           |           |       |  |  |  |

<u>\*\*</u>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.