#### **EXXON MOBIL CORP**

Form 4

February 11, 2005

## FORM 4

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB

Check this box if no longer subject to

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES** 

3235-0287 Number: January 31, Expires:

2005

**OMB APPROVAL** 

Section 16. Form 4 or Form 5 obligations

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,

Estimated average burden hours per response... 0.5

may continue. See Instruction

Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * SULLIVAN PAUL E			2. Issuer Name <b>and</b> Ticker or Trading Symbol EXXON MOBIL CORP [XOM]	5. Relationship of Reporting Person(s) to Issuer		
(Last)	(First)	(Middle)	3. Date of Earliest Transaction	(Check all applicable)		
			(Month/Day/Year)	Director 10% Owner		
C/O EXXON MOBIL CORP, 5959 LAS COLINAS BLVD (Street)			02/10/2005	_X_ Officer (give title Other (specify		
				below) below) Vice Pres and Gen Tax Counsel		
			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 75039-2298				Form filed by More than One Reportin Person		

(City)	(State)	(Zip) 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)	Code (Instr. 8)	or Dispos (Instr. 3, 4	ed of (4 and :		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 Common	02/10/2005		M	Amount 26,836	(D)	\$ 19.7344	272,632	D		
Stock	02/10/2005		S	26,836	D	\$ 56.5	245,796 <u>(1)</u>	D	D	
Common Stock							36,231.8992	I	By Savings 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 Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount o Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Share
Bonus Share Units with Dividend Equivalent Rights	(2)					(3)	(3)	Common Stock	(2)
Employee Stock Option (Right to	\$ 19.7344	02/10/2005		M	26,836	11/29/1996	11/29/2005	Common Stock	26,836

## **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

SULLIVAN PAUL E C/O EXXON MOBIL CORP 5959 LAS COLINAS BLVD IRVING, TX 75039-2298

Vice Pres and Gen Tax Counsel

## **Signatures**

Buy)

Paul E. Sullivan 02/11/2005

\*\*Signature of Date Reporting Person

## **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).
- (1) Includes 94,696 shares in joint ownership with reporting person's spouse.
- (2) Convert to common shares on a 1 for 1 basis.

Reporting Owners 2

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(3) To be settled in shares in installments following retirement.

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.