FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| OMB APPROVAL | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | |
| 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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person* SANDERS DANIEL S | | | | | 2. Issuer Name and Ticker or Trading Symbol EXXON MOBIL CORP [XOM] | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner | | | | | | |
|--|--|---------------------|--|-------|--|---|--|--------|---|-------|---|---|-------------|---|---|--|-----------------------|--|--|--|
| (Last) C/O EXXON | (First) | , | (Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 07/30/2004 | | | | | | | | | Officer (g below) | | | | - | |
| 5959 LAS COLINAS BLVD | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Indivi | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person | | | | | | |
| (Street) IRVING | TX | 7 | 5039-2298 | | | | | | | | | | | | Form filed by More than One Reporting Person | | | | | |
| (City) | (State |) (Z | Zip) | | | | | | | | | | | | | | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | |
| Date | | | | Date | | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an | | | | Beneficiall Following | | Form | nership : Direct (D) lirect (I) . 4) | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | | | Code | v | Amount | (A) o (D) | r I | Price | Transaction(s) (Instr. 3 and 4) | | | | (Instr. 4) | |
| Common Stock 07/3 | | | | | 0/2004 | | | | M | | 15,00 | 0 A | . [| \$19.7344 | 292,066 | | | D | | |
| Common Stock 07 | | | | 07/30 | 30/2004 | | | | S | | 15,000 | 0 D | | \$46.25 | 277,066 | | D | | | |
| Common Stock | | | | | | | | | | | | | 33,568.2328 | | | 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) | 2. Conversion or Exercise Price of Derivative Security | se (Month/Day/Year) | 3A. Deemed Execution Da if any (Month/Day/Y | Co | , Transaction Code (Instr. | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date E Expiration (Month/E | n Dat | | 7. Title and Amou Securities Underly Derivative Securit 3 and 4) | | | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficia Owned Following Reported Transacti | e s illy | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | Co | ode | v | (A) | (D) | Date Exercisa | | Expiration Date | oi N | | Amount or Number of Shares | | (Instr. 4) | - (a) | | | |
| Employee Stock Option (Right to Buy) | \$19.7344 | 07/30/2004 | | | М | | | 15,000 | 11/29/19 | 96 | 11/29/2005 | Commo Stock | n | 15,000 | \$19.7344 | 54,93 | 6 | D | | |

Explanation of Responses:

D. S. Sanders

08/02/2004

** Signature of Reporting Person

Date

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

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.

 $^{^{\}star}$ 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).