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* MULVA PATRICK T | | | | | | 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) | (First) | , | liddle) | | 3. Date of Earliest Transaction (Month/Day/Year) 09/09/2004 | | | | | | | | X | Officer (gi | | Other (specify below) | | pecify | | |
| 5959 LAS CO (Street) IRVING | S COLINAS BLVD TX 75039-2298 | | | | 4. If A | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Indiv | S. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| (City) | (State) | | ip) | | | | | | | | | | | <u> </u> | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transparent | | | | 2. Trans | nsaction n/Day/Year) | | 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 and | | | r | 5. Amount of Securities Beneficially Following Re | | Form: Owned or Ind Reported (Instr. | | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | | | Code | v | Amount | (A) or (D) | | rice | Transaction (Instr. 3 and | | | | (Instr. 4) | |
| Common Stock 0 | | | | 09/09 | 09/2004 | | | | M | | 2,500 | 500 A \$ | | 19.7344 | 110,062 | | | D | | |
| Common Stock | | | | 09/09 | 09/2004 | | | | S | | 2,500 | 2,500 D | | \$47.46 | 107,562(1) | | | D | | |
| Common Stock | | | | | | | | | | | | | | | 15,140 | .1017 | | | By Savings Plan | |
| Common Stock | | | | | | | | | | | | | 3,20 | | 00 | | By Trust for Parent | | | |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | | | |
| Derivative Conversion Date | | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Da if any (Month/Day/Y | c | ransact ode (Ins | ansaction ode (Instr. | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercis Expiration Date (Month/Day/Yea | | Securities Underlyi | | rlying | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s | e s illy | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | Code | ode | v | (A) | (D) | | | Expiration Date | C N | | Amount or Number of Shares | | (Instr. 4) | | | | |
| Employee Stock Option (Right to Buy) | \$19.7344 | 09/09/2004 | | | М | | | 2,500 | 11/29/19 | 96 | 11/29/2005 | Comm | | 2,500 | \$19.7344 | 18,50 | 0 | D | | |

Explanation of Responses:

 $1.\ Direct shareholdings\ include\ 342\ shares\ jointly\ owned\ with\ reporting\ person's\ spouse.$

Patrick T. Mulva

09/10/2004

** 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.

^{*} 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).