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* CRAMER HAROLD R					2. Issuer Name and Ticker or Trading Symbol EXXON MOBIL CORP [XOM]									Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner							
(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 05/01/2006								X	X Officer (give title below)			Other (spec below)				
C/O EXXON MOBIL CORP															Vice President						
5959 LAS COLINAS BLVD						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street))															X Form filed by One Reporting Person Form filed by More than One Reporting Person					
IRVING	TX	7	5039-2298												,						
(City)	(State) (Z	Zip)																		
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
(2. Transaction Date (Month/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				nd 5) Securities Beneficial Following		Form	: Direct (D) lirect (I) . 4)	7. Nature of Indirect Beneficial Ownership		
						Code	v	Amount		(A) or (D)	Price	Transaction (Instr. 3 and				(Instr. 4)					
Common Stock					01/2006				М 20,0		20,00	00	Α	\$26.975	497,	563		D			
Common Stock 0				05/0	01/2006				S	20,00		00	D	\$64	\$64 477,			D			
Common Stock													6,744.4584		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 3. Transactio Date (Month/Day/Y			3A. Deemed Execution Dat if any (Month/Day/Yo	Code (Instr.					6. Date Exercisable and Expiration Date (Month/Day/Year)		е	7. Title and Amoun Securities Underly Derivative Security 3 and 4)		erlying	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio	i Fo	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Co	ode \	v	(A)	(D)	Date Exercisal		Expiration Date	Title		Amount or Number of Shares		(Instr. 4)	on(s)	n(s)			
Notional Stock Units w/Dividend Equivalent Rights ⁽¹⁾	(2)								(3)		(3)	Common Stock (2		(2)		35,452.723		D			
Employee Stock Option (Right to Buy)	\$26.975	05/01/2006			М			20,000	02/27/200	01	02/27/2008		mmon stock	20,000	\$26.975	95,10	6	D			

Explanation of Responses:

- 1. This grant is exempt from Section 16 under transition provisions applicable to cash-only awards granted prior to August 15, 1996, but is reported voluntarily.
- 2. Convert to common shares on a 1 for 1 basis.
- 3. To be settled in cash in one or more installments following retirement.

<u>Harold R. Cramer</u> 05/03/2006

** Signature of Reporting Person

Date

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

- * 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.

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.