FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL

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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 A	ddress of Reporti	ng Person [*]	Requiring State	2. Date of Event Requiring Statement (Month/Day/Year) 04/01/2007 3. Issuer Name and Ticker or Trading Symbol EXXON MOBIL CORP [XOM]						
(Last) (First) (Middle) EXXON MOBIL CORP. 5959 LAS COLINAS BLVD.						10% Owne Other (spe below)	er ecify 6. Individual or Joint/Group Filing (Check Applicable Line)		t/Group Filing (Check	
(Street) IRVING TX 75039-2298					Executive on	acci		X Form filed by One Reporting Person Form filed by More than One Reporting Person		
(City)	(State)	(Zip)								
			Table I - Noi	n-Derivati	ive Securities Beneficial	ly Owned				
1. Title of Security (Instr. 4)					. Amount of Securities eneficially Owned (Instr. 4)			4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Common Stock					124,055	D				
Common Stock					75	I		By Dependent Child		
Common Stock					75	I		By Dependent Child		
Common Stock					540.3993	I By		By Savings Plan		
		(6			e Securities Beneficially nts, options, convertible		s)			
			2. Date Exerc Expiration D (Month/Day/	ate	3. Title and Amount of Securi Underlying Derivative Securi		4. Conversion	e Form:	(Instr. 5)	
			Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Price of Derivative Security	Direct (D) or Indirect (I) (Instr. 5)		
Employee Stock Option (Right to Buy)			11/28/2002	11/28/2011	Common Stock	40,000	37.12	D		

Explanation of Responses:

N. W. Duffin

04/09/2007

** 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 5 (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).