FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APP	ROVAL								
	OMB Number:	3235-0287								
l	Estimated average burden									

0.5

hours per response:

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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*  Pryor Stephen D						2. Issuer Name and Ticker or Trading Symbol EXXON MOBIL CORP [ XOM ]										Chec	k all applic Directo	tionship of Reportinç all applicable) Director Officer (give title		g Person(s) to Issuer 10% Owner Other (specif	
	(F MOBIL CO S COLINA		(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 05/02/2006										X	below) Vice President				,
(Street) IRVING	•				_   4. I _	4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Indi Line) X	•				
(City)	(S	tate)	(Zip)																		
Table I - Non-Deriva  1. Title of Security (Instr. 3)  2. Transac Date (Month/Da				saction	2 Ear) if	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3,		d (A) oı	r	5. Amour Securities Beneficia	5. Amount of Securities Beneficially Owned Following		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									С	ode \	,	Amount		(A) or (D)	Price	е	Transact (Instr. 3	ion(s)			(mstr. 4)
Common Stock 05/02/						2006				M		20,00	000 A		\$23	3.39	439	9,266		D	
Common Stock 05/02						/2006				S		20,00	0	D	\$6	4.7	419,266			D	
Common Stock																	23,	022			By Spouse
Common Stock																	18,587.115			I S	By Savings Plan
			Table II -							-	-	sed of, onvertil				-	Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,	ate, Transa Code (I		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercis Expiration Date (Month/Day/Yea				7. Title and Am of Securities Underlying Derivative Secu (Instr. 3 and 4)		es J Securii	5	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	i C	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exer	cisable		xpiration ate	Title	e	Amount or Number of Shares	er					
Employee Stock Option (Right to	\$23.39	05/02/2006			M			20,000	02/2	28/2000	0	2/28/2007		nmon ock	20,00	00	\$23.39	70,778	3	D	

**Explanation of Responses:** 

Stephen D. Pryor

05/04/2006

\*\* 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.