## Edgar Filing: EXXON MOBIL CORP - Form 4

	IOBIL CORP									
Form 4	2005									
March 01, 2	ЛЛ	ES SECURITIES		СПА	NCEC	OMMISSION		PROVAL		
	UNITED STAT	LS SECURITIES Washingto			INGE C	OWINI55ION	OMB Number:	3235-0287		
Check if no lo subject Section Form 4 Form 5	to STATEMENT 16. or		URITIES				Expires: Estimated av burden hour response			
Form 5 obligations may continue. See Instruction 1(b). Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940										
(Print or Type	e Responses)									
1. Name and RAYMON	Address of Reporting Person <u>*</u> ID LEE R	2. Issuer Name <b>a</b> Symbol EXXON MOB			C	5. Relationship of I Issuer				
(Last)	(First) (Middle)	3. Date of Earliest	Transaction		-	(Check	all applicable)	)		
C/O EXXON MOBIL CORP, 5959  (Month/Day/Year)  _X_ Director  10% Owner    02/25/2005  02/25/2005  _X_ Officer (give title Other (specify below)    LAS COLINAS BLVD										
	(Street)						oint/Group Filing(Check			
Filed(Month/Day/Year) Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person										
(City)	(State) (Zip)	Table I - Nor	1-Derivative	e Secu	rities Aca	Person iired, Disposed of,	or Beneficiall	v Owned		
1.Title of Security (Instr. 3)	2. Transaction Date 2A. De (Month/Day/Year) Executi any (Month	emed 3.	4. Securit ioror Dispos (Instr. 3, 4	ies Ac ed of ( 4 and 5 (A)	quired (A) (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
		Code V	Amount	or (D)	Price	(Instr. 3 and 4)				
Common Stock	02/25/2005	М	50,000	А	\$ 30.7031	3,138,179	D			
Common Stock	02/25/2005	S	10,000	D	\$ 62.92	3,128,179	D			
Common Stock	02/25/2005	S	10,000	D	\$ 62.93	3,118,179	D			
Common Stock	02/25/2005	S	25,000	D	\$ 62.96	3,093,179	D			
Common Stock	02/25/2005	S	5,000	D	\$ 63.1	3,088,179	D			

## Edgar Filing: EXXON MOBIL CORP - Form 4

Common Stock						11,967.7489	Ι	By Savings Plan		
Common Stock						319.551	Ι	By Spouse		
Reminder: Re	Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.									
Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02) required to respond unless the form displays a currently valid OMB control number.										
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. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	e Expiration Date Unde (Month/Day/Year) (Instr (A) ed of		7. Title and Underlying (Instr. 3 and	Securities	
						Date	Expiration	Title	Amount or	

			Code V (A	(D)				of Shares
Employee Stock Option (Right to Buy)	\$ 30.7031	02/25/2005	М	50,000	11/26/1998	11/26/2007	Common Stock	50,000

## **Reporting Owners**

Reporting Owner Name / Addre	ess	Relationships						
	Director	10% Owner	Officer	Other				
RAYMOND LEE R C/O EXXON MOBIL COR 5959 LAS COLINAS BLVI IRVING, TX 75039-2298	X		Chairman					
Signatures								
Lee R. Raymond	02/28/2005							
<u>**</u> Signature of	Date							

Reporting Person

Number

Exercisable

Date

## **Explanation of Responses:**

- \* 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. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.