

Mobil Oil Corporation Life Insurance Program

The purpose of Mobil's Life Insurance Program is to help you provide protection against financial loss due to your death, the death of your dependents and/or certain serious injuries.

Mobil's Life Insurance Program covers eligible employees of any company participating in it. A list of the major participating employers (along with directions for obtaining a complete list) appears in Section 14 of this Summary Plan Description, "Claims and Appeals Procedure, Employee Rights and Participating Employers." Mobil Oil Corporation and the Participating Employers are collectively referred to in this summary as Mobil.

Read this summary of Mobil's Life Insurance Program carefully. It is intended to give you the highlights of your benefits in easy-to-read language; it does not, however, in any way replace or alter the full text of the Program and written Mobil policies which always govern in the event a question arises.

Mobil's Life Insurance Program described in the following pages applies to non-represented employees and to represented employees if, when and to the extent they are covered under the Program as a result of collective bargaining.

Introduction

Mobil's Life Insurance Program provides flexible insurance coverages to meet the varying needs of employees.

The term "regular employee" is used throughout this Summary Plan Description to discuss eligibility and enrollment under the Life Insurance Program. This term does not include an individual who provides services to Mobil on a consulting basis under a written contract or any individual who performs services for Mobil as an independent contractor or as an employee of an entity other than Mobil. These individuals are not eligible to participate in the Plan regardless of common law employment principles, except to the extent expressly provided by written contract.

Annual Life Insurance Pay is calculated as of December 31, and is comprised of your base pay, variable pay, lump sum IPA, overtime, shift differential, short-term incentive compensation for employees in Salary Group 21 and below, and bonuses under the Mobil Chemical Marketing Incentive Plan, rounded up to the next \$1,000.*

- * For certain represented populations annual life insurance pay does not include the prior year's overtime and shift differential. You may contact the ExxonMobil Benefits Service Center to see if your annual life insurance pay includes these components.

After Retirement

Complete information on insurance coverage after retirement for the above coverages is contained in Section 5, "Insurance Coverage After Retirement."

1. Group Life Insurance Plan (GLIP) and 20-Year Survivorship Plan

Prior to Retirement

If you were employed before January 1, 1969, you may have elected to maintain coverage under one or more of Mobil's predecessor plans to the group life insurance coverages described in this book. If so, your coverage will continue under the terms of the applicable plans (as they may be amended) unless and until you change your election.

- The Group Life Insurance Plan (GLIP) has been renamed the Prior Basic Life Insurance coverage.
- The Survivorship Benefit Plan for 20-Year Employees (the 20-Year Plan) will continue for present participants of that Plan.

Employees who were eligible for GLIP but did not elect to participate may no longer enroll in GLIP, but with evidence of good health, may enroll in Basic Life Insurance coverage.

Employees who discontinue participating in GLIP cannot re-enroll in that plan and automatically disqualify themselves from Mobil-paid retirement coverage under GLIP. However, they may enroll in Basic Life Insurance coverage with evidence of good health.

After Retirement

For information on insurance coverage after retirement, contact the ExxonMobil Benefits Service Center.

2. Basic Life Insurance Coverage

You are eligible to enroll in Basic Life Insurance coverage for active employees as soon as you are employed. Your coverage is equal to twice your annual life insurance pay. (See Section 1, "Introduction," for the definition of annual life insurance pay.)

Eligibility and Enrollment

Your coverage in Basic Life Insurance becomes effective on:

- your date of employment as a regular, fulltime employee of a Participating Employer, if you enroll within 31 days of employment, or
- your date of marriage, if you enroll within 31 days of your marriage.

If you do not enroll in Basic Life Insurance coverage within 31 days of the date you commence employment or marry, or if you at any time discontinue your participation following enrollment, you must provide acceptable evidence of good health to enroll at a later date. You will be covered under the Plan on the date the insurance company accepts your evidence of good health and certifies you for coverage.

You must participate in Basic Life Insurance to be eligible for the retiree coverage (see Section 5, "Insurance Coverage After Retirement").

Coverage and Costs

Under the Basic Life Insurance coverage, your amount of Basic Life Insurance is twice your annual life insurance pay. (See "Introduction," for the definition of annual life insurance pay.)

Premiums are set once per year on April 1, using your Annual Life Insurance Pay as of December 31 of the previous year. Your contribution is \$150 a month for each \$1,000 of insurance. Mobil pays the balance of the cost of the insurance.

Accidental Death and Dismemberment (AD&D) Provision

Your contributions to Basic Life Insurance coverage also provide accidental death and dismemberment coverage equal to the amount of your Basic Life Insurance coverage. If you are physically injured as a result of an accident and die within 90 days as a result of that injury or accident, your designated beneficiary will receive the full amount of your accidental death and dismemberment benefit as well as your normal benefit under Basic Life Insurance (a maximum combined benefit of four times your annual life insurance pay, which is defined in "Introduction").

Death benefits paid under the AD&D provision will be paid in the same manner as your Basic Life Insurance benefits.

Dismemberment

If, as a result of an accidental injury, you suffer the loss of a hand, foot or eye, you will receive one-half the accidental death and dismemberment benefit for which you are eligible under Basic Life Insurance. For loss of any two or more of these, you will receive the full AD&D benefit.

Dismemberment benefits are payable to you in a lump sum.

Exceptions

No AD&D payment will be made for death or loss caused by disease, infirmity, or treatment or diagnosis thereof; infection (except septic infection of a visible accidental wound); war or any act of war; or intentional self-destruction or intentionally self-inflicted injury. However, the war risk exclusion is waived when the insured active U.S. employee incurs the loss while an innocent bystander and not a participant in the situation.

Accelerated Benefit in Case of Terminal Illness

If you are terminally ill, you may receive a onetime advance payment called an accelerated benefit. See Section 9 for more information.

Settlement

In the event of your death, the insurance will be paid to your beneficiary through a Total Control Account from Metropolitan Life Insurance Company (MetLife), where it will remain earning interest until withdrawn as your beneficiary directs (see Section 10, "Settlement Provisions – Total Control Account"). However, if the beneficiary is an estate or trust, the benefit will be paid in a lump sum directly to the estate or trust.

Continuation of Coverage

Your Basic Life Insurance coverage and contributions continue until you separate from service. Section 5 describes coverage after retirement. If you separate from service with Mobil before retirement and receive benefits under the Mobil Separation Benefits Plan, you may be able to continue your Basic Life Insurance, including the Mobil-paid portion of your coverage, as described in Section 11, "Termination of Coverage." If you separate from service due to disability before age 65, Mobil will continue your Basic Life Insurance coverage without cost to you until the earlier of your death, the date your disability ceases or age 65, as described in Section 7, "Continued Life Insurance Protection Following Separation from Service for Disability."

Beneficiaries

Your life insurance will be paid to the beneficiary you name on your beneficiary designation form. You may change your beneficiary at any time by completing the proper form and submitting it to the ExxonMobil Benefits Service Center.

3. Voluntary Accidental Death and Dismemberment Insurance Coverage

As described in Section 2, your Basic Life Insurance coverage includes accidental death and dismemberment coverage of an additional two times annual life insurance pay (see "Introduction" for the definition of annual life insurance pay). If you want a higher level of AD&D coverage (or if you want AD&D coverage and are not enrolled in Basic Life Insurance), you may elect this coverage in whole multiples of one to eight times annual life insurance pay through Voluntary AD&D insurance. You pay the entire cost for this voluntary coverage.

Enrollment

As an active employee, you may enroll at any time without evidence of good health.

Coverage and Cost

The monthly cost of Voluntary AD&D coverage is 2.4 cents for each \$1,000 of insurance, regardless of age.

Voluntary AD&D coverage must be purchased in whole multiples of one to eight times annual life insurance pay. Coverage may be increased or decreased effective the first of any month (no evidence of good health is required).

Conditions for Payment of Benefits

Conditions for payment of benefits are the same as for AD&D benefits payable under Basic Life Insurance (see Section 2, "Basic Life Insurance Coverage"), with certain exceptions. No Voluntary AD&D payment will be made for death or loss caused by disease, infirmity, or treatment or diagnosis thereof; infection (except infection of a visible accidental wound); war or war-like action in time of peace (waived if active, insured employee's loss or death occurs while employee is an innocent bystander and not a participant in the situation); suicide or attempted suicide; intentionally self-inflicted injury; the use of any drug or medicine, unless used on the advice of a doctor; or committing or attempting to commit a felony or other serious crime or an assault.

Settlement

In the event of your accidental death, the insurance will be paid to your beneficiary through a Total Control Account from MetLife, where it will remain earning interest until withdrawn as your beneficiary directs (see Section 10, "Settlement Provisions – Total Control Account"). However, if the beneficiary is an estate or trust, the benefit will be paid in a lump sum directly to the estate or trust. Dismemberment benefits will be paid to you in a lump sum.

Termination of Coverage

Your coverage will end at the end of the month in which you separate from service or retire unless you elect to cancel it at an earlier date. See Section 5 for information about coverage after retirement.

Beneficiaries

Refer to the description of this subject in Section 2, "Basic Life Insurance Coverage."

4. Dependent Group Life Insurance Coverage

You may enroll your spouse and dependent children under Dependent Group Life Insurance within 31 days of your date of employment with a Participating Employer as a regular, full-time employee, or within 31 days of qualifying life event.

Eligibility and Enrollment

If you enroll your spouse and dependent children within 31 days of your employment or a qualifying life event (e.g., your marriage or the birth/adoption of a child,) they do not have to provide evidence of insurability to qualify. However, if they are not enrolled within those 31 days, you will have to furnish evidence of their good health to the insurance company before they can be insured. When an increase in coverage is requested after 31 days of eligibility, evidence of good health must be submitted and approved for your spouse before the increased coverage can become effective.

Re-Enrollment

If you decide to re-enroll your dependents after you canceled your participation in this coverage, you will have to furnish evidence of their good health.

Coverage and Cost

You may cover your eligible dependents by making the required contributions. You have a choice of benefits and contributions as follows:

Insurance Benefits for Active Employees		
Spouse	Each Eligible Dependent Child	Your Monthly Contribution effective January 1, 2018*
\$15,000	\$5,000	\$9.72
\$30,000	\$5,000	\$19.50
\$45,000	\$5,000	\$29.23

* This rate applies regardless of the number of dependents covered.

Accelerated Benefit in Case of Terminal Illness

If your spouse is terminally ill, you may receive a one-time advance payment called an accelerated benefit. See Section 9 for more information. The accelerated benefit is not allowed for dependent children.

Settlement

Should your spouse or child die from any cause, Dependent Group Life Insurance is payable to you, as the beneficiary, in one lump sum if less than \$10,000. For settlements greater than \$10,000, see Section 10, "Settlement Provisions--Total Control Account."

Eligible Dependents

Your eligible dependents are:

- your spouse,
- unmarried children under age 25,
- unmarried children ages 25-30 who are fulltime students, if they attained the age of 25 before April 1, 1996, and were covered by the Plan at that time,
- covered children who reach the age limit and are incapable of supporting themselves due to physical or mental handicap.

A husband and wife who are both employees of Mobil may each enroll for Dependent Group Life Insurance and cover each other as dependents. Either spouse, but not both, can cover their child or children.

The term "children" includes:

- natural or legally adopted children,
 - stepchildren related by the current marriage,
 - other children* supported solely by you and permanently living with you (when you are head of your household),
 - stillborn children in or after the seventh month of pregnancy, and
 - children of American Foreign Residents who attend boarding schools outside the U.S. or Canada.
- * Proof of dependent status for tax purposes and/or guardianship papers may be required.

You may not cover as a dependent:

- any person in the military forces of any country,
- your domestic partner or your domestic partner's children unless they are your IRS dependents, and
- any person who legally resides outside the United States or Canada unless you are employed outside those countries and the person lives in your home (except a child of an American Foreign Resident attending boarding school).

5. Insurance Coverage After Retirement

Mobil life insurance coverage, except for the Occupational Accidental Death benefit, can be continued during your retirement if you were participating in Basic Life Insurance at retirement.

For purposes of the Life Insurance Program, retirement is determined by eligibility for immediate benefits under the Retirement Plan. (See Summary Plan Description, "Retirement Plan.")

Basic Retiree Life Insurance Grandfathered Benefit

If you retire before age 65 and your age and years of service totaled at least 60 on September 1, 1990, you will be eligible for the grandfathered retiree life insurance benefit. As a grandfathered participant, you may continue your current Basic Life Insurance coverage shown below until you reach age 65, by paying the applicable premium. Your Basic Life Insurance coverage, Accidental Death and Dismemberment (AD&D) benefit and premiums will be based on your annual life insurance pay as of September 1, 1990. (See Section 1, "Introduction," for the definition of annual life insurance pay.)

Basic Life Insurance Coverage 2 x annual life insurance pay at 15¢ per month per \$1,000 coverage	Basic Life Insurance Coverage 2 x annual life insurance pay at no additional cost
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Beginning at the later of age 65 or retirement, Mobil assumes the full cost of your Basic Retiree Life Insurance coverage. The amount of coverage is determined by multiplying your annual life insurance pay as of September 1, 1990, by the factor shown in the following chart, with a minimum coverage of \$10,000.

Age at end of year in which death occurs	Factor
65	1.3
66 - 69	1.2
70 - 71	1.1
72 - 73	1.0
74	.9
75	.8
76	.7
77 - 78	.6
79	.5
80 - 81	.4
82	.3
83 & over	.2

Grandfathered AD&D coverage, beginning at age 65, is the lesser of \$20,000 or the retiree AD&D coverage as determined using the following chart. The amount is determined by multiplying your annual life insurance pay as of September 1, 1990, by the factor as shown below with a minimum coverage of \$10,000.

Age at end of year in which death occurs	Factor
65 - 73	1.0
74	.9
75	.8
76	.7

77 - 78	.6
79	.5
80 - 81	.4
82	.3
83 & over	.2

Waiver of Grandfathered Benefit

At any time you may irrevocably waive the grandfathered benefit (for which you pay a portion of the cost until you reach age 65) and elect to be covered under the cost-free, non-grandfathered benefit described below.

Non-Grandfathered Benefit

If you did not meet the grandfathered age and service criteria on September 1, 1990, you will be eligible for the non-grandfathered retiree benefit of \$50,000 of life insurance coverage for the first five years of your retirement. This amount will then reduce by \$10,000 each subsequent year of retirement to a minimum of \$10,000. This coverage is currently provided at no cost to the retiree. AD&D coverage after retirement will be the lesser of \$20,000 or the non-grandfathered retiree coverage in effect at the time of death.

Minimum Coverage – \$10,000

The non-grandfathered benefit described above is the minimum coverage for any participant retiring September 1, 1990, or later. Therefore, a grandfathered participant would receive the non-grandfathered benefit in any year it provides higher coverage. Consequently, the minimum benefit payable for retiree life insurance and AD&D coverages will be \$10,000 each and \$20,000 combined.

Voluntary Accidental Death and Dismemberment Insurance

If you are retiring, you may continue this additional AD&D coverage until you reach age 70. The premium rate remains the same as for active employees. If you receive monthly pension payments large enough to cover your premium, it will automatically be deducted from your pension check. Otherwise, you will be billed directly for the premium.

Dependent Group Life Insurance

You may continue reduced coverage for your spouse and eligible children, as defined in Section 5, "Dependent Group Life Insurance Coverage," at a reduced premium rate as shown in the following chart.

Insurance Benefits for Retirees

Spouse	Each Eligible Dependent Child	Your Monthly Contribution effective January 1, 2018*
\$3,000	\$1,500	\$11.20
* This rate applies regardless of the number of dependents covered.		

If you receive monthly pension payments large enough to cover your premium, it will automatically be deducted from your pension check. Otherwise, you will be billed directly for the premium.

Accelerated Benefit in Case of Terminal Illness

If you are terminally ill, you may receive a onetime advance payment called an accelerated benefit. See Section 9 for more information.

Settlement

In the event of death, insurance proceeds for the coverages described in this section, "Insurance Coverage After Retirement," will be paid as described under the appropriate plan for active employees (see Sections 2 through 5).

6. Imputed Income

Under certain conditions, the value of your insurance coverage in excess of an amount specified by federal tax law may be taxable to you as imputed income.

You may be subject to imputed income if your active or retired coverage under Basic (or Prior Basic) Life Insurance exceeds \$50,000. Imputed income is added to your yearly gross W-2 earnings and is taxable on a monthly basis.

The ExxonMobil Benefits Service Center can provide you with information on how you can reduce the impact of imputed income.

No imputed income results from participation in Occupational Accidental Death Insurance coverage, Voluntary AD&D Insurance coverage, Dependent Group Life Insurance coverage or non-grandfathered retiree Basic Life Insurance coverage.

7. Continued Life Insurance Protection Following Separation from Service for Disability

Basic (or Prior Basic) Life Insurance

Upon submitting satisfactory evidence of total disability, Mobil will continue your coverage under Basic (or Prior Basic) Life Insurance at no cost if you separate from service due to total disability. This coverage will continue until the earliest of your death, age 65, the date your disability ceases, or the date this Plan terminates. If you are still disabled at age 65, coverage continues, without cost, at the applicable retired employee amounts.

Dependent Group Life Insurance

Coverage under Dependent Group Life Insurance will continue at no cost if you separate from service due to total disability. This coverage will continue until the earliest of your death, age 65, the date your disability ceases, or the date this Plan terminates. If you are still disabled at age 65, coverage continues, without cost, at the applicable retired employee amounts.

8. Suspension/Reinstatement of Coverage

When you are placed on a leave of absence without pay which involves a break in service, your life insurance coverages are automatically suspended.

Suspension

You can elect to continue coverage during the leave of absence period under any or all life insurance coverages in which you are enrolled, except Occupational Accidental Death, by making the required monthly employee premium contributions on a direct-pay basis. However, if you are on a disability leave of absence without pay, your coverage under Basic (or Prior Basic) Life Insurance and the Dependent Group Life Insurance continues at no cost.

Reinstatement

Coverage will be automatically reinstated upon your return to active employment, regardless of whether or not you elected to continue coverage during the leave period.

9. Accelerated Benefit in Case of Terminal Illness

If you are terminally ill and participate in Basic Life Insurance, Dependent Group Life Insurance (for your spouse only), or Retiree Life Insurance, you may receive a one-time advance payment – called an accelerated benefit – of up to 50% of the amount of your Life Insurance benefit, (minimum of \$5,000 and maximum of \$250,000). A doctor must provide proof acceptable to the insurance company that your illness (or your spouse's for DGLI) is terminal and that death is expected within six months. The money may be used for any purpose and is generally not taxable.

Benefits paid to the beneficiary after death will be reduced by any accelerated benefit paid to you. Contact the ExxonMobil Benefits Service Center for more information.

10. Settlement Provisions – Total Control Account

Proceeds of your insurance can be withdrawn at any time by your beneficiary from a Total Control Account, which insures that the money will continue to earn interest until needed. Proceeds are income tax-free; the interest is taxable.

This life insurance settlement method eliminates any need for a beneficiary to make immediate settlement decisions at a difficult time, while allowing the beneficiary to retain complete control over the account. Under this method, MetLife establishes a Total Control Account for each beneficiary whose share of insurance is at least \$10,000 (smaller amounts are paid as a lump sum). Insurance proceeds and interest are deposited to this account and earn interest at money market rates established by MetLife. MetLife sends a personalized checkbook to the beneficiary for his or her use. The beneficiary may withdraw some or all of the proceeds and interest immediately, or whenever needed. Insurance proceeds from dismemberment benefits from AD&D coverage will be payable to you in a lump sum.

Tax Considerations

Proceeds deposited in the beneficiary's Total Control Account are treated the same as a lump sum settlement for income tax purposes.

- Proceeds of insurance are not subject to income tax.
- Proceeds payable to a spouse qualify for the Estate Tax Marital Deduction.
- Interest earned on the Total Control Account is taxed as ordinary income.

Alternative Investment Options

Your beneficiary can elect alternative investment options instead of the money market interest rate for balances left in the Total Control Account. Your beneficiary will receive a description of these with the Total Control Account checkbook and instructions from MetLife.

11. Termination of Coverage

Generally, your coverage under Basic Life Insurance (or Prior Basic Life Insurance), Occupational Accidental Death, Voluntary AD&D and Dependent Group Life ends on the last day of the month you separate from service, when you stop contributions or when you are no longer eligible to participate. However, certain coverages continue after your employment ceases if you retire or are disabled. See the Summary Plan Descriptions, "Retirement Plan" and "Disability Benefits Programs."

Occupational Accidental Death coverage stops on the last day of your employment with Mobil, regardless of the reason your employment ends.

For all other life insurance coverages (including AD&D), coverage ceases under the following circumstances:

- **Voluntary Separation from Service** — When you separate from service (for reasons other than retirement or approved total disability), all life insurance coverage ceases on the last day of the month in which you last made your required contribution.
- **Mobil Initiated Separation from Service** — If you separate from service at Mobil's request and you are receiving benefits under the standard Separation Benefit Plan, and are not retirement-eligible, you can receive life insurance coverage for up to 18 months after separation. Company contributions will continue for 12 months, and you may continue coverage for an additional six months without Company subsidy. If you are retirement-eligible at separation, you are immediately covered under Retiree Life Insurance.
- **Cancellation** — If you stop making contributions, or if you become ineligible to participate, life insurance coverage ceases on the last day of the month in which you last made your required contribution or became ineligible.
- **Transfer** — When you transfer to an affiliate or subsidiary that is not a Participating Employer, your life insurance coverage ceases the last day of the month in which you last made your required contribution.

Dependent Group Life Insurance Only

Coverage for your eligible dependents ceases the last day of the month of your death, the last day of the month the dependent no longer qualifies as a dependent, or upon termination, cancellation or transfer, as described above.

12. Conversion Privilege

You may convert your Basic (or Prior Basic) Life Insurance and Dependent Group Life Insurance to an individual policy upon separation from service (for reasons other than retirement or approved total disability) or upon transfer to a non-participating affiliate or subsidiary.

Mobil does not control the availability, terms, or premium amounts for conversion coverage.

Basic Life Insurance Coverage

In the circumstances described above, you will be provided with conversion forms so that you may arrange with the insurance company to continue at your own expense your insurance protection under an individual life policy, without medical examination. To do this, you must apply within 31 days after your original coverage ends. The insurance company will provide you with information concerning premiums.

If you die within the 31-day period following termination of your insurance, benefits for which you were covered at separation from service will still be paid to your beneficiary(ies).

Dependent Group Life Coverage

Your dependents may arrange with the insurance company to convert their insurance protection to an individual life policy without medical examination, under the following additional conditions:

- upon your death, or
- when your dependents become ineligible for coverage because of age or marriage.

At retirement, you may obtain a conversion policy for the difference between the dependent coverage you had as an active employee and the coverage available to you as a retired employee.

Application for conversion must be made within 31 days after your group coverage ends.

If a dependent should die within the 31-day conversion period, that dependent's benefit will still be paid to you as beneficiary.

Voluntary AD&D Coverage

If you retire, you can continue Voluntary AD&D Coverage to age 70. Otherwise, no continuation and no conversion of this insurance is available. See Section 6 for further details.

Occupational Accidental Death Coverage

Coverage ends on the last day of employment regardless of the reason for separation. No conversion of this insurance is available.

13. Administration

The Plan Administrator for the Life Insurance Program is the Administrator-Benefits.

The Administrator-Benefits is the Manager-Global Benefits Design, Exxon Mobil Corporation. You may contact the Administrator-Benefits at the following address.

Administrator-Benefits
P.O. Box 2283
Houston, TX 77252-2283

Legal process may be served upon the Administrator-Benefits c/o Exxon Mobil Corporation by serving the Corporation's Registered Agent for Service of Process, Corporation Service Company (CSC).

For service of legal process:
Corporation Service Co.
211 East 7th Street, Suite 620
Austin, Texas 78701-3218

The ExxonMobil Benefits Service Center is charged with the day-to-day administration of the Life Insurance Program. Its mailing address and telephone number are:

ExxonMobil Benefits Service Center
Monday – Friday 8:00 a.m. to 6:00 p.m.
(U.S. Eastern Time), except certain holidays

Address:

ExxonMobil Benefits Service Center
PO Box 199540
Dallas, TX 75219-9722
Toll-Free: 1-800-682-2847
or 800-TDD-TDD4 (833-8334) for hearing impaired

Inquiries should be directed to the ExxonMobil Benefits Service Center.

Claims for benefits are processed for Mobil by MetLife as Claims Administrator at the following address:

Metropolitan Life Insurance Company
Utica Life Claims
P.O. Box 3016
Utica, NY 13504-3016

Phone numbers:

1-800-GETMET8 (1-800-438-6388)
918-252-8616 (international)

Plan records are maintained on a calendar year basis with December 31 as the last day of the Plan Year.

14. Administrative and ERISA Information for the ExxonMobil Life Insurance Program

This section contains technical information about the ExxonMobil Life Insurance Program which includes the Life Insurance Program. It also contains a summary of your rights with respect to the plan and instructions about how you can submit an appeal if your claim for benefits is denied.

Plan sponsor and participating affiliates

The Plan is sponsored by:

Exxon Mobil Corporation
5959 Las Colinas Blvd.
Irving, TX 75039-2298

Participating Employers

The Life Insurance Program applies to eligible employees of:

Mobil Corporation
Mobil Oil Corporation
Mobil Business Resources Corp.
Mobil Exploration and Producing Services U.S.
Mobil Pipe Line Company
Mobil Overseas Services Inc.
Mobil Sales and Supply Corporation
Mobil Technology Company

The Life Insurance Program also applies to employees of a number of other affiliates. A complete list of participating affiliates is available from the Administrator-Benefits upon written request.

Basic Plan information

Authority of Administrator-Benefits

The Administrator-Benefits (and those to whom the Administrator-Benefits has delegated authority) has the full and final discretionary authority to determine eligibility for benefits, to construe and interpret the terms of the Life Insurance Program of Mobil Oil Corporation in its application to any participant or beneficiary and to decide any and all claim appeals.

Type of plan

The Life Insurance Program of Mobil Oil Corporation is a welfare plan providing life and accident insurance.

Plan Identification Numbers

The numbers below are used by the federal government to identify the Life Insurance Program of Mobil Oil Corporation. For this purpose, the Basic Life Insurance (including retiree coverage), Prior Basic Life Insurance (including retiree coverage), 20-Year Survivorship and Occupational Accidental Death

Insurance coverages are treated as a single plan (Life Insurance Plans of Mobil Oil Corporation); the Voluntary Accidental Death and Dismemberment and Dependent Group Life Insurance coverages are treated as a second single plan (Life Insurance Protection Plan of Mobil Oil Corporation).

The Plan is identified with government agencies under these numbers: the Employer Identification Number is 13-5409005, the Life Insurance Plans of Mobil Oil Corporation's identification number is 501, and the Life Insurance Protection Plans of Mobil Oil Corporation's identification number is 503.

Plan year

The Plan year is the calendar year.

Plan funding

The Life Insurance Plans and the Life Insurance Protection Plans are insured with MetLife under a Group Life Insurance Policy numbered 23200. Participant and employer contributions fund the Policy.

Claims and Appeals Procedure, Employee Rights and Participating Employers

Introduction

Your claim for a benefit will be processed according to the procedures set forth below.

It is important to follow these procedures to receive your benefit and to protect the rights that you have under the Life Insurance Program and under the law if a claim is denied. In the event you decide to file a lawsuit, you must have followed each step within the required time limits in the Claims and Appeals Procedure.

It is also important to remember that the Plan Administrator has the full and exclusive authority to make final determinations as to *all* issues concerning plan administration, except where that authority has been expressly delegated to another party. That includes (but is not limited to) discretionary and final authority to determine coverage and eligibility for benefits under the Life Insurance Program, to interpret and explain the terms of the Life Insurance Program, and to make rules and regulations to carry out the Life Insurance Program. Among other things, this means that the Plan Administrator has full discretion and final authority to decide appeals from claim denials and to determine the amount and kind of information required for you to prove that you should receive benefits under the Life Insurance Program. These actions of the Plan Administrator are final and binding on all participants under the Life Insurance Program and all persons claiming an interest under the Life Insurance Program.

This summary contains important information about your rights and the procedures to follow if you have made a claim for benefits under the Life Insurance Program and that claim is denied.

Claims and Questions

All inquiries regarding benefits, including a claim for benefits, should be directed to the ExxonMobil Benefits Service Center. You must submit a claim form for a benefit when you feel you are entitled to it. A claim for benefits must be in writing. Your ExxonMobil Benefits Service Center Representative will supply you or your beneficiary or estate with the appropriate forms and procedures.

The time limit for submitting the form is 90 days after death or injury occurs. A claim that is not returned within the 90-day limit will still be payable if the claimant can show that justifiable circumstances delayed its return and that it was submitted as soon as was reasonably possible.

A written question regarding your benefit entitlement and the amount of your benefit or payment commencement dates will receive a written response within 30 days following receipt of your inquiry. A formal claim will receive a written response within 90 days following receipt of the claim.

If a claim is denied in whole or in part, you will receive a written explanation of the specific reasons for the denial, a specific reference to applicable provisions on which the denial is based, a description of any additional information required for you to complete your claim, including why such information is necessary, and an explanation of the procedure for appeals. You may also review applicable documents.

Appeals of Denied Claims

If you are not satisfied with the resolution of your claim and you feel your claim for benefits has been improperly denied, you (or in the event of your death, your beneficiary or estate) may submit in writing the issues and comments relating to your claim denial that you are appealing.

You must send your written appeal to MetLife within 60 days after you receive notification that your claim is denied. Send the appeal along with supporting documents (described below) to the following address:

Metropolitan Life Insurance Company
Utica Life Claims
P.O. Box 3016
Utica, NY 13504-3016

If your claim was denied based on eligibility, then send your written appeal to the following address:

Administrator-Benefits
P.O. Box 2283
Houston, TX 77252-2283

The written appeal should include the reasons why you believe the benefit should be paid and information that supports, or is relevant to, your claim (written comments, documents, records, etc.). The written appeal may also include a request for reasonable access to, and copies of, all documents, records and other information relevant to your claim. The review will take into account all comments, documents, records and other information submitted relating to the claim, without regard to whether such information was submitted or considered in the initial benefit determination. You will receive a response to the appeal within 60 days from the date the appeal was received.

If additional time to decide on your appeal is needed because of special circumstances, you will be notified within the 60-day appeal response period.

If the appeal is denied, you will receive written notice of the decision. The notice will set forth:

- The specific reason(s) for the denial and the Plan provision(s) upon which the denial is based.

- A statement that you are entitled to receive, upon request and free of charge, reasonable access to, and copies of, all documents, records and other information relevant to the claim.
- A statement of the voluntary appeal procedure and your right to obtain information about such procedure or a description of the voluntary appeal procedure.
- A statement of your right to bring an action under section 502(a) of the Employee Retirement Income Security Act (ERISA).

Statute of limitations

After you have received the response of the mandatory appeal, you may bring an action under section 502(a) of ERISA. Such action must be filed within one year from the date your mandatory appeal was denied.

No implied promises

Nothing in this SPD says or implies that participation in the Life Insurance Program of Mobil Oil Corporation is a guarantee of continued employment with the company.

Future of the Plan

ExxonMobil has the right to change, suspend, withdraw, amend, modify or terminate the Plan or any of its provisions at any time and for any reason. A change may also be made to required contributions and eligibility for coverage, and may apply to those who retired in the past, as well as those who retire in the future. If any material changes are made in the future, you will be notified.

Your rights under ERISA

As a participant in the Life Insurance Program of Mobil Oil Corporation, you have certain rights and protections under the Employee Retirement Income Security Act of 1974 (ERISA). ERISA provides that as a plan participant, you shall be entitled to:

Receive information about your plan and benefits

- Examine, without charge, at the office of the Administrator-Benefits and at other specified locations, such as worksites and union halls, all documents governing the Life Insurance Program of Mobil Oil Corporation, including collective bargaining agreements, and a copy of the latest annual report (Form 5500 Series) filed by the Life Insurance Program of Mobil Oil Corporation with the U.S. Department of Labor and available at the Public Disclosure Room of the Employee Benefits Security Administration.
- Obtain, upon written request to the Administrator-Benefits, copies of documents governing the operation of the Life Insurance Program of Mobil Oil Corporation, including collective bargaining agreements, and copies of the latest annual report (Form 5500 Series) and updated summary plan description. The administrator may require a reasonable charge for the copies.
- Receive a summary of the Life Insurance Program of Mobil Oil Corporation's annual financial report. The Administrator-Benefits is required by law to furnish each participant with a copy of this summary annual report.

Prudent actions by plan fiduciaries

In addition to creating rights for participants, ERISA imposes duties upon the people who are responsible for the operation of the employee benefit plan. The people who operate your Life Insurance Program, called "fiduciaries" of the Life Insurance Program, have a duty to do so prudently and in the interest of you and other Life Insurance Program participants and beneficiaries. No one, including your employer, your

union, or any other person, may fire you or otherwise discriminate against you in any way to prevent you from obtaining a plan benefit or exercising your rights under ERISA.

Enforce your rights

- If your claim for a benefit is denied or ignored, in whole or in part, you have a right to know why this was done, to obtain copies of documents relating to the decision without charge, and to appeal any denial, all within certain time schedules.
- Under ERISA, there are steps you can take to enforce the above rights. For instance, if you request a copy of Plan documents or the latest Summary Annual Report and do not receive them within 30 days, you may file suit in a Federal court. Such lawsuit must be filed in the United States District Court for the Southern District of Texas, Houston, Texas, or in the United States District Court for the federal judicial district where the employee currently works. If a retiree or terminatee, the suit must be filed in the last location worked prior to termination of employment. Beneficiaries must also file in the same federal judicial district that the employee or retiree would be required to file. In such a case, the court may require the Administrator-Benefits to provide the materials and pay you up to \$110 a day until you receive the materials, unless the materials were not sent because of reasons beyond the control of the administrator.

Assistance with your questions

If you have any questions about your benefits, you should contact ExxonMobil Benefits Service Center. If you have any questions about this statement or about your rights under ERISA, or if you need assistance in obtaining documents from the Administrator-Benefits, you should contact the nearest office of the Employee Benefits Security Administration, U.S. Department of Labor, listed in your telephone directory or the Division of Technical Assistance and Inquiries, Employee Benefits Security Administration, U.S. Department of Labor, 200 Constitution Avenue N.W., Washington, D.C. 20210. You may also obtain certain publications about your rights and responsibilities under ERISA by calling the publications hotline of the Employee Benefits Security Administration