This guide outlines the benefits offered to Baker Hughes, a GE company, for employees hired under legacy Baker Hughes legal entities. Employees who are hired under other legal entities may have a different benefit package offered. Please contact your Human Resources representative if you have questions.

Using this guide
Explore this interactive guide to understand your benefit plan options, the dependents you may cover, and the steps you need to take to enroll. You can read it front to back like a booklet or click a link for specific topics.

Health
Medical
Telemedicine
Prescription Drug
Dental
Vision
Flexible Spending Accounts
Executive Physical Program
Advocacy
International SOS

Protection
Disability benefits
Life insurance benefits
Accident (AD&D) insurance benefits
Business Travel
Accident insurance

Retirement
401(k) Plan
Supplemental Retirement Plan
Employee Stock Purchase Program

Incentives
Long-Term Incentives

Enrollment
The big picture
Before you enroll
Covering dependents
How to enroll
After you enroll
If you don’t enroll
When you can make changes
Your cost (rates)

Newly hired or transferred?
You must enroll within 31 days to participate in Health and Protection benefits.

For more detailed plan information, please refer to the appropriate Heath & Welfare, 401(k) and Supplemental Retirement Plan Summary Plan Descriptions on BakerHughesBenefits.com/executives.
Medical

Our Cigna International Medical plan helps you manage your health, whether that means treating a specific problem or just using free preventive care to make sure everything’s in working order.

Please note that you’ll always save with network providers. Our Medical plan allows you to receive medical care through the Cigna network of physicians, specialists, hospitals, and clinics at pre-negotiated fees, which are usually lower than what you’d pay outside the network.

The chart below details some of the highlights of your medical coverage.

<table>
<thead>
<tr>
<th>Plan feature</th>
<th>International</th>
<th>U.S. In-network</th>
<th>U.S. Out-of-network</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lifetime maximum</td>
<td>Unlimited</td>
<td>Unlimited</td>
<td>Unlimited</td>
</tr>
<tr>
<td>Deductible</td>
<td>No deductible</td>
<td>$350 Individual/$700 Family</td>
<td>$350 Individual/$700 Family</td>
</tr>
<tr>
<td>Coinsurance</td>
<td>100% of covered expenses</td>
<td>80% after plan deductible</td>
<td>60% after plan deductible</td>
</tr>
<tr>
<td>Preventive care</td>
<td>100% covered expenses</td>
<td></td>
<td>60% after plan deductible</td>
</tr>
<tr>
<td>Physician office visit</td>
<td>80% of covered expenses</td>
<td>80% after plan deductible</td>
<td>60% after plan deductible</td>
</tr>
<tr>
<td>Emergency Room</td>
<td>100% of covered expenses</td>
<td>80% after plan deductible</td>
<td>80% after plan deductible</td>
</tr>
<tr>
<td>Outpatient surgery</td>
<td>100% of covered expenses</td>
<td>80% after plan deductible</td>
<td>60% after plan deductible</td>
</tr>
<tr>
<td>Inpatient hospital</td>
<td>100% of covered expenses</td>
<td>80% after plan deductible</td>
<td>60% after plan deductible</td>
</tr>
<tr>
<td>Out-of-pocket maximum</td>
<td>In the US: $2,350 Individual/$4,700 Family</td>
<td>Outside the US: $2,000 Individual/$4,000 Family</td>
<td></td>
</tr>
<tr>
<td>Prescription Drug coverage</td>
<td>When you enroll in Medical, you automatically receive Prescription Drug coverage. Refer to the Prescription Drug Section for details.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Save money on healthcare!

Take advantage of benefits that can help lower your out-of-pocket expenses, such as using network providers, in-network preventive care that’s covered at 100%, and the Flexible Spending Accounts.
**Deductibles, coinsurance, and out-of-pocket maximums**

Understanding Medical plan terminology will help you get the most from your health care dollars.

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**Lifetime maximum**
This is the amount you must pay each year before the plan begins to pay for services. The lower the deductible, the higher the premium you’ll pay each paycheck.

**Coinsurance**
Coinsurance describes the cost-sharing between you and the plan for eligible expenses. For example, after you've satisfied your annual deductible, you pay 20% coinsurance and the plan pays 80% coinsurance for in-network expenses, up to plan limits.

**Out-of-pocket maximum**
This is the most you’ll pay out of your own pocket (coinsurance and deductibles) in a year. Once you reach the out-of-pocket maximum, the plan pays 100% of the eligible expenses for the rest of the year.

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**Medical plan**
Each covered person has an individual deductible and an out-of-pocket maximum, which can be met without reaching the Family limit. Once two or more individuals reach the Family deductible or out-of-pocket maximum, the individual limits no longer apply.
You and CignaLinks

CignaLinks, part of the Cigna Global Health Benefits, is a collaboration between Cigna and local health care insurers or administrators. The program enhances quality and service by providing access to local health care administrators in selected countries while maintaining the benefits and advantages of a global plan. When you access care through a CignaLinks doctor or hospital, you will benefit from higher discounts and less paperwork.

If you are an employee who is on assignment, rotating, or you are a local national from a CignaLinks country, you will automatically be enrolled in the CignaLinks program. You may be required to fill out some additional paperwork. Cigna or Human Resources will contact you if this is necessary and will provide all the details.

CignaLinks networks are currently available in the United Kingdom, Australia, Hong Kong, the Middle East (Saudi Arabia, United Arab Emirates, Kuwait, Bahrain, Oman, and Qatar), Canada, Singapore, China, Macau, Indonesia, Taiwan, Malaysia, Brazil, Spain, South Africa, and Nigeria. Customers in China and Taiwan have access to the provider network in Hong Kong and customers in Malaysia and Indonesia have access to the provider network in Singapore.

CignaLinks ID cards

For employees in Australia, the Middle East, Canada, Spain, Brazil, or Africa (South Africa and Nigeria), you will receive two cards—your Cigna Global Medical ID card and a separate card for the local insurance carrier. Make sure and use your local ID card when making claims in those countries. You will receive a dual-branded ID card for Greater China, Southeast Asia, and the United Kingdom.
Learn more about your Medical benefits

- Register with Cigna at www.cignaenvoy.com after your hire date or transfer date (allow approximately two weeks for your enrollment to be updated with Cigna)
- Search for doctors in the Cigna network
- Order replacement ID cards or print a temporary ID card
- Make real-time inquiries into the status and history of your Medical, Vision, or Prescription Drug claims
- Access health and well-being information

Medical coverage in retirement

Baker Hughes, a GE Company (BHGE), currently offers Retiree Medical benefits to eligible BHGE employees and their dependents who are not eligible for Medicare (generally under age 65). To be eligible for Retiree Medical coverage, you must be considered a retiree of BHGE (55 years of age or older with at least 10 years of service on your date of retirement). You must also be covered under an eligible BHGE Medical plan at the time of retirement.

While BHGE intends to provide medical coverage for retirees now and in the future, BHGE does not guarantee the continuation of this benefit.
Telemedicine is a form of telehealth, which is the delivery of clinical health services by means of real-time two-way audio, visual, or other telecommunications or electronic communications, including the application of secure video conferencing or store and forward transfer technology to provide or support health care delivery.

**What’s covered by Cigna Global Health Benefits®?**

- Telemedicine services are covered at the same coverage level and cost share as the same service if rendered through in-person consultation or contact – subject to the same medical necessity criteria.
  - Must be provided by an appropriately licensed and credentialed health care professional.
  - Coverage is provided per the terms and conditions of the policy and the health care professional’s or vendor’s contracting status: In- or out-of-network.
- Health care professionals, such as mental health professionals, primary care physicians, etc., may provide consultations via telemedicine.
- Telemedicine vendors, such as MDLIVE, Relay for Health, AmWell, etc., provide services for minor, non-urgent conditions.
Telemedicine (continued)

Who can use telemedicine and how can they access services?

- **U.S. inpatriates** (non-U.S. employees on an expatriate assignment in the U.S.)
  - Access services from any health care professional inside or outside the U.S. – home country or locally via web, email, phone, etc.
  - Be aware of potential treatment limitations (including prescriptions) when seeking services from a remote health care professional.
  - Access services from a U.S. telemedicine vendor for minor, non-urgent care.

- **Third Country Nationals** (non-U.S. employees on assignment in a country other than the U.S.)
  - Access services from any health care professional inside or outside the U.S. – home country or locally via web, email, phone, etc.
  - Be aware of potential treatment limitations (including prescriptions) when seeking services from a remote health care professional.
  - Access services from a local telemedicine vendor (such as Apollo Hospitals in India) for minor, non-urgent care.
  - For employees not located in the U.S., we do not recommend seeking services from a U.S. telemedicine vendor due to licensing regulations and treatment limitations.

- **U.S. expatriates** (U.S. employees on assignment outside the U.S.)
  - Access services from any health care professional inside or outside the U.S. – home country or locally via web, email, phone, etc.
  - Be aware of potential treatment limitations (including prescriptions) when seeking services from a remote health care professional.
  - Access services from a local telemedicine vendor for minor, non-urgent care.
  - For employees not located in the U.S., we do not recommend seeking services from a U.S. telemedicine vendor due to licensing regulations and treatment limitations.
Prescription Drug coverage

Prescription drugs can be essential for treating a variety of conditions and we all need them occasionally. They’re also expensive, which is why BHGE provides Prescription Drug coverage automatically with your medical coverage.

Because prescription drugs are a key driver of higher health care costs, it’s smart to ask your doctor to prescribe generic equivalents whenever possible. Generics work the same as (or similar to) the more expensive brand-name drugs, but cost you—and BHGE—much less.

Under the Cigna International plan, you automatically receive Prescription Drug coverage through Cigna, both within and outside the U.S.

Under this plan, you will pay 20% coinsurance up to the $2,000 Individual or $4,000 Family out-of-pocket maximum (combined with Medical). In addition, please note that you will pay the full price of the prescription drug at the time of purchase then submit a claim form for reimbursement.

While in the U.S., your prescription drug cost will vary depending on whether the prescribed medication is a generic, formulary brand, or a non-formulary brand drug. The cost for each drug category is shown on the next page.

Helpful Tip
You’ll always save by asking for generic drugs. If a generic isn’t available, ask your doctor to prescribe a brand-name drug that’s listed on the Cigna formulary.
## Prescription Drug Costs

<table>
<thead>
<tr>
<th>Prescription Drug coverage</th>
<th>Cigna International Prescription Plan (within the U.S.)(^2)</th>
<th>Cigna International Prescription Plan (outside the U.S.)(^1)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deductible</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Retail – generic</td>
<td>$7 copay</td>
<td></td>
</tr>
<tr>
<td>Retail – formulary brand</td>
<td>25% ($30 minimum/$60 maximum)</td>
<td>20% coinsurance (R&amp;C applies)(^1)</td>
</tr>
<tr>
<td>Retail – non-formulary brand</td>
<td>30% ($60 minimum/$100 maximum)</td>
<td></td>
</tr>
<tr>
<td>Retail or Mail – specialty</td>
<td>30% ($150 maximum)</td>
<td>N/A</td>
</tr>
<tr>
<td>Mail order or retail – generic</td>
<td>$21 copay</td>
<td>N/A</td>
</tr>
<tr>
<td>Mail order or retail – formulary brand</td>
<td>25% ($90 minimum/$180 maximum)</td>
<td></td>
</tr>
<tr>
<td>Mail order or retail – non-formulary brand</td>
<td>30% ($180 minimum/$300 maximum)</td>
<td></td>
</tr>
</tbody>
</table>

### Out-of-pocket maximum

<table>
<thead>
<tr>
<th></th>
<th>In the US: $2,350 Individual/$4,700 Family</th>
<th>In the US: $2,350 Individual/$4,700 Family</th>
</tr>
</thead>
<tbody>
<tr>
<td>Outside the US: $2,000 Individual/$4,000 Family</td>
<td></td>
<td>Outside the US: $2,000 Individual/$4,000 Family</td>
</tr>
<tr>
<td>Separate from Medical. Included in Medical out-of-pocket maximum.</td>
<td></td>
<td>Included in Medical out-of-pocket maximum.</td>
</tr>
</tbody>
</table>

### ID card

<table>
<thead>
<tr>
<th></th>
<th>Same card as Medical</th>
<th>Same card as Medical</th>
</tr>
</thead>
</table>

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1 Reasonable and Customary (R&C) charges are the standard costs for services in a geographic area.

2 Home delivery is not available outside of the U.S.
Good dental health is about more than a great smile

There’s a clear medical connection between dental health and your overall health. Our Dental plan encourages preventive and diagnostic dental care and provides coverage for basic and major dental care as well as orthodontia services.

You can visit any licensed dentist you wish. However, if you use a dental provider who participates in the Cigna PPO network, you may pay less for care. There’s no penalty for using a non-network dentist, but Cigna won’t pay expenses that exceed the Reasonable and Customary (R&C) allowable amounts.*

When you incur a dental expense, you pay the full cost at the time of service unless you use a Cigna dental provider. You will need to file a claim through Cigna in order to be reimbursed. The claim form is the same one used for medical claims. If you have a question about a specific treatment, contact Cigna. Once you reach the annual dental maximum benefit, expenses will not be covered for the remainder of the plan year.

<table>
<thead>
<tr>
<th>Type of service</th>
<th>Plan pays</th>
</tr>
</thead>
<tbody>
<tr>
<td>Routine preventive services</td>
<td>100%</td>
</tr>
<tr>
<td>Basic care services</td>
<td>80%</td>
</tr>
<tr>
<td>Major care services</td>
<td>50%</td>
</tr>
<tr>
<td>Orthodontia (for dependent children under age 19 with a $1,500 orthodontia lifetime maximum per child)</td>
<td>50%</td>
</tr>
<tr>
<td>Annual dental maximum benefit of $1,500 per person (applies to preventive, basic, and major services combined)</td>
<td></td>
</tr>
</tbody>
</table>

*R&C allowable amounts are the standard costs for services in a geographic area.
Vision

Under the Cigna Worldwide plan, you automatically receive vision coverage. This coverage is designed to help you and your family take care of your vision needs anywhere in the world.

When you receive vision care services, you pay the full cost at the time of service. You will then submit a claim form to Cigna for reimbursement. The claim form is the same one used for medical claims. Cigna will reimburse expenses for routine vision exams and medically necessary care, but not cosmetic work. Each covered member receives 100% of covered vision services up to $350 per calendar year worldwide.
Flexible Spending Accounts

Nobody likes paying more in taxes than necessary. That’s the idea behind Flexible Spending Accounts (FSAs). FSAs let you use pre-tax dollars to pay your share of eligible health care and dependent day care expenses.

Remember these two important rules:
• Claims must be incurred during the plan year (January 1–December 31) and submitted to UHC by March 31 of the following year to be eligible for reimbursement.
• Due to IRS regulations, any amount left in your account at the end of the year will be forfeited.

How they save you money
You figure out how much you want to set aside each year and your contributions are deducted from each paycheck before taxes. That means you don’t pay federal income tax, Social Security tax, and, in most cases, state income tax on your contributions.

Check It Out!
The amount you elect to contribute to a Flexible Spending Account is deducted equally from each paycheck. If you enroll after January 1, the amount of your FSA contributions is divided by the number of benefits-eligible pay periods remaining in the year. If your goal amount is not equally divisible by the number of pay periods, your actual contributions may be slightly less or more than your goal amount. You will be reimbursed up to the elected goal amount.
Choose one or both FSAs

Participation in the FSAs is completely voluntary. There are two FSAs available to you:

<table>
<thead>
<tr>
<th>Health Care FSA¹</th>
<th>Dependent Care FSA¹</th>
</tr>
</thead>
</table>
| You can only enroll in the Health Care FSA if you enroll in the Standard Plan or if you waive Medical plan coverage. Use your pre-tax contributions to reimburse yourself for eligible health care expenses you incur for you and your eligible dependents, such as your deductible, coinsurance, or other expenses not covered by a health care plan.  
  • You do not need to be enrolled in a BHGE health plan to participate in the Health Care FSA. But, if you are enrolled, you cannot be enrolled in an HSA at any point during the year.  
  • You can be reimbursed for eligible expenses before the money is in your account, up to the total amount you elect to contribute for the year.  
  • Medical and Prescription Drug claims are submitted automatically.  
  • If you enroll in the Health Care FSA, you cannot use a Health Savings Account (HSA). Check out the differences between the Health Care FSA and an HSA by clicking | Use your pre-tax contributions to reimburse yourself for eligible dependent care expenses (not health care expenses) you incur, such as expenses for a qualifying day care or nursery school, so that you and your spouse (if any) can work or attend school full time.  
  • Dependents can be your children under age 13, or a dependent who lives with you and is physically or mentally incapable of self-care, regardless of age.  
  • The money must actually be in your account before you can be reimbursed. |
| Minimum contribution² | $60 | Minimum contribution² | $300 |
| Maximum contribution² | $2,700 | Maximum contribution² | $5,000 for single taxpayers and for married taxpayers filing a joint return³ |
|                         |      |                         | $2,500 for married taxpayers filing separate returns⁴ |
Executive physical program

Taking the annual physical to the next level

All Baker Hughes employees can receive an annual in-network physical at no cost. As a leader at Baker Hughes, you’re encouraged to be even more proactive with your health and the company supports that by providing a more comprehensive physical exam each year. The executive physical program is for SEB+ employees only.

Our preferred providers for this program include: Kelsey-Seybold’s Mavis & Mary Kelsey Suite in Houston, Texas, and our Woodlands Clinic located in Shenandoah. When you utilize one of these facilities, there is no out-of-pocket cost to you. If you use a different provider (including other Kelsey-Seybold clinics), you’ll need to pay for services out of pocket then submit an expense report for reimbursement of covered services (up to $1,800).

- Personal history and physical exam
- Complete blood count
- Comprehensive metabolic panel
- Lipid profile
- Urinalysis
- C-reactive protein test (40+)
- Thyroid assessment (40+)
- Prostate cancer screening (male 40+)
- Bone density screening (female 50+)
- Audio screening
- Vision screening
- Electrocardiogram (<40) or cardiac stress test (40+)
- Chest x-ray (40+)
- Mammogram (female 40+)
- Pap smear (female)

Preferred providers

Kelsey-Seybold Clinic Main Campus, Mavis & Mary Kelsey Suite
Executive Health Assessment Program
2727 West Holcombe Blvd., 3rd floor
Houston, Texas 77025

Woodlands Clinic
Executive Health Assessment Program
106 Vision Park Blvd
Shenandoah, Texas 77384

To schedule an executive physical call 713-442-EXEC (3932) or email executivehealth@kelsey-seybold.com.
Benefits issues? Contact Advocacy.

The confidential participant Advocacy service can help you with unresolved health plan access or claims issues with your Medical, Prescription Drug, Dental, and Vision.

Advocacy will research your issue and work directly with the Claims Administrator and/or provider to resolve it on your behalf.

**Before you request assistance from Advocacy**, you must make at least one attempt to resolve the issue directly with the appropriate Claims Administrator and/or provider. After this attempt, if your issue is still unresolved, call the Baker Hughes Benefits Center.

A Baker Hughes Benefits Center representative will review the issue to determine next steps. If the issue requires Advocacy assistance, the representative will forward your issue to an advocate who will begin research. The advocate will contact you within two business days to provide an update on your issue.
International SOS (ISOS)

Baker Hughes has contracted with ISOS to provide emergency evacuation services when adequate medical care is not available locally. Baker Hughes employees and their dependents on international assignment and/or traveling on company business are covered under the ISOS contract. ISOS provides the following medical, security, and travel assistance to Baker Hughes travelers and expatriates. You can:

- Speak to an English-speaking doctor 24 hours a day, 7 days a week
- Request a dispatch of prescription medication
- Get referrals to a doctor or dentist for emergencies
- Secure an evacuation or repatriation in the event of a serious injury
- Access country-specific information
- Check travel information in over 200 countries
- View summarized reports of health risks and situations around the world
- Check information on medical care and vaccination requirements
- Sign up to receive email health alerts that send travel health information to your PC, laptop, or wireless device

How to Use International SOS

International SOS (ISOS) is the world’s leading provider of medical assistance, security services, and outsourced customer care. The ISOS network includes a multilingual staff that operates 24 hours a day, 365 days a year.

In the event of an emergency, contact the nearest ISOS Alarm Center. If calling from Europe, the U.S., Africa, or the Middle East, call +44 20 8762 8008. If calling from Asia, Australia, or the Pacific Rim, call +65 6338 7800 (call collect where available).

When placing a call to ISOS, make sure to provide the Baker Hughes membership number: 1CPA984.

Via Internet: www.internationalSOS.com (input membership number 1CPA984)

- Obtain destination reports
- Locate country guides
- Obtain health and travel security reports and warnings
Disability Benefits

Most people understand the need for life insurance, but if you’re unable to work because of an illness or injury, the bills will keep coming even though your paycheck won’t.

That’s where Baker Hughes disability benefits can help. There are two kinds of disability coverage: Salary Continuation and Long-Term Disability.

**Salary Continuation**

Baker Hughes helps you prepare for unexpected absences by providing you with Salary Continuation at no cost to you.

The plan provides the continuation of your base pay during a disability for a period of up to 90 days or until recovery, whichever is earlier. If you are disabled for longer than 90 days, you may be eligible for Long-Term Disability.

**Note:** If an employee returns to his or her home country while receiving Salary Continuation, his or her hardship and Goods and Services allowance is stopped.
Long-Term Disability (LTD)

Becoming permanently disabled or having an extended disability can have devastating financial implications. Few people can afford to stop working for an extended period of time.

The LTD plan provides you with the continuation of a portion of your benefits base pay after a period of 26 weeks (the maximum benefit period for STD). BHGE pays the full cost of this coverage:

**LTD**

- Pays 60% of your benefits base pay
- Maximum of $25,000 per month*
- Up to age 65 or recovery per the terms

*Subject to a reduction by deductible sources of income or other disability earnings.

**What is benefits base pay?**

Benefits base pay means your base annual earnings, including any before-tax contributions you make through the benefits program. This does not include any overtime pay or bonuses. For certain benefit rate calculations, your benefits base pay is determined either in September, your date of hire, or your transfer date, whichever is later. Some field employees may have a gross-up rate in place of base salary.
Life Insurance Benefits

Nobody likes to think about it, but it’s important to provide your family with some financial security in the event of your death.

Baker Hughes offers you a variety of life insurance coverage options to protect your family. There are three coverage components:

- **Basic Life**: 2x automatic coverage
- **Prerequisite Life**: up to 3x optional coverage
- **Supplemental Life**: up to 8x optional coverage

**Total Coverage**: Not to exceed $7.5 million ($5 million maximum of Basic + Perquisite Life combined and $2.5 million maximum of Supplemental Life)
### Basic Life insurance

Baker Hughes pays the full cost of this benefit, which is based on your benefits base pay:

<table>
<thead>
<tr>
<th>Your age when you die</th>
<th>Benefit amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Under age 70</td>
<td>2x benefits base pay, rounded to the next higher $1,000 if not already a multiple thereof (minimum $50,000; maximum $3 million)</td>
</tr>
<tr>
<td>Age 70 or over</td>
<td>Coverage is reduced by 50% the first of the year following your 70th birthday</td>
</tr>
</tbody>
</table>

### Perquisite Life insurance

In addition to the company-provided Basic Life insurance coverage, you may choose to elect Perquisite Life insurance coverage as shown in the chart below.

<table>
<thead>
<tr>
<th>Your age when you die</th>
<th>Benefit amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Under age 70</td>
<td>1x to 3x benefits base pay, rounded to the next higher $1,000 if not already a multiple thereof, up to $3 million ($5 million combined maximum with Basic Life)</td>
</tr>
<tr>
<td>Age 70 or over</td>
<td>Coverage is reduced by 50% the first of the year following your 70th birthday</td>
</tr>
</tbody>
</table>

Premiums for this coverage are typically deducted from the first paycheck of each quarter.

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### What is imputed income?

The IRS requires income tax to be paid on the premiums BHGE pays on your behalf for employer-paid life (and Perquisite Life) insurance greater than $50,000, which is known as “imputed income.”

This taxable income is applied each pay period. Here are two things to remember about life insurance benefits and imputed income.

- The life insurance benefits themselves are not taxable.
- You pay income tax only on the premiums, not on the amount of the benefit.

For example, for $100,000 in coverage on a 45-year-old employee, imputed income on the premium is only $90 per year. You may elect to limit or cap your Basic Life insurance coverage at $50,000 to avoid imputed income.
Supplemental Life Insurance

You can buy additional life insurance for yourself, your spouse, and eligible dependent children through the Supplemental Life insurance plan. Depending on the amount of coverage you elect, you and/or your spouse may be required to provide Evidence of Insurability (EOI).

<table>
<thead>
<tr>
<th>Coverage type</th>
<th>Coverage amount</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Employee coverage</strong></td>
<td>1x to 8x benefits base pay rounded to the next higher $1,000 if not already a multiple thereof (up to a maximum of $2.5 million)</td>
</tr>
<tr>
<td><strong>Spouse coverage</strong></td>
<td>Choose from these benefit amounts:</td>
</tr>
<tr>
<td></td>
<td>- $25,000  ·  $50,000  ·  $75,000  ·  $100,000</td>
</tr>
<tr>
<td></td>
<td>- $150,000  ·  $200,000  ·  $250,000</td>
</tr>
<tr>
<td><strong>Dependent child coverage</strong></td>
<td>$10,000 per covered child</td>
</tr>
</tbody>
</table>
|                        | If both you and your spouse are BHGE employees, each of you and any of your dependents can be covered only once under the Supplemental Life insurance plan. Coverage can be through you or your spouse or a combination of the two of you, so long as no person is covered more than once, including your dependents.

*Coverage amount is reduced by 50% the first of the year following your 70th birthday.

What is EOI?

To elect certain supplemental insurance coverage levels, you (and your spouse) may be required to provide proof of good health, also known as Evidence of Insurability (EOI). If you are required to complete EOI, you will be notified at the time of enrollment.
Accidental Death & Dismemberment

This plan pays a benefit in the event of the accidental death, dismemberment, or paralysis of you or a covered family member.

Baker Hughes offers three Accidental Death & Dismemberment (AD&D) insurance coverage options:

<table>
<thead>
<tr>
<th>Basic AD&amp;D</th>
<th>Prerequisite Life</th>
<th>Supplemental Life</th>
<th>Total Coverage</th>
</tr>
</thead>
<tbody>
<tr>
<td>2x automatic coverage</td>
<td>up to 3x optional coverage</td>
<td>up to $250,000 optional coverage</td>
<td>Not to exceed $5.25 million ($5 million maximum of Basic + Perquisite AD&amp;D combined and $250,000 maximum of Voluntary AD&amp;D)</td>
</tr>
</tbody>
</table>

The benefit is paid in addition to any life insurance you have. Baker Hughes pays the full cost of Basic AD&D coverage, and you can purchase Voluntary AD&D coverage for yourself and your family.

**Basic AD&D insurance**

The basic benefit is equal to 2x your benefits base pay rounded to the next higher $1,000 if not already a multiple thereof (minimum $50,000; maximum $3 million).

If you elect to cap your Basic Life insurance coverage at $50,000 to avoid imputed income, your Basic Accidental Death & Dismemberment coverage will also be capped at $50,000.
Perquisite AD&D insurance

You have the option to purchase a Perquisite AD&D benefit from 1x to 3x your benefits base pay, rounded to the next higher $1,000 if not already a multiple thereof, up to $3 million ($5 million combined maximum with Basic AD&D insurance). This benefit is paid in addition to the Basic AD&D benefit.

Voluntary AD&D insurance

You pay the full cost of this coverage.

<table>
<thead>
<tr>
<th>Coverage type</th>
<th>Coverage amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employee coverage</td>
<td>1- 5x up to $4 million</td>
</tr>
<tr>
<td>Employee + Family</td>
<td>Based on the coverage levels above, if you elect Family coverage, the spouse and children benefit will be:</td>
</tr>
<tr>
<td>coverage</td>
<td>• Spouse only — 50% of employee coverage amount</td>
</tr>
<tr>
<td></td>
<td>• Children only — 15% of employee coverage amount, up to $20,000 per child</td>
</tr>
<tr>
<td></td>
<td>• Spouse and children — 40% of employee coverage amount for your spouse and 10% of employee coverage amount for your children (up to $20,000 per child)</td>
</tr>
</tbody>
</table>

Check it Out!

If both you and your spouse are Baker Hughes employees, each of you and any of your dependents can be covered only once under the Voluntary AD&D plan. Coverage can be through you or your spouse or a combination of the two of you.
Business Travel Accident insurance

The Business Travel Accident (BTA) insurance plan provides protection and peace of mind while traveling on company business.

BTA insurance provides an additional level of coverage in the event of your accidental death, dismemberment, or paralysis while traveling on authorized BHGE business. BTA coverage is provided at no cost to you.

<table>
<thead>
<tr>
<th>Coverage type</th>
<th>Coverage amount</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Employee coverage</strong></td>
<td>Coverage is up to 5x benefits base pay rounded to the next higher $1,000 if not already a multiple thereof (minimum $50,000; maximum $3 million)</td>
</tr>
<tr>
<td><strong>Spouse coverage</strong></td>
<td>$25,000</td>
</tr>
<tr>
<td>(during relocation)</td>
<td></td>
</tr>
<tr>
<td><strong>Dependent child coverage</strong></td>
<td>$10,000</td>
</tr>
<tr>
<td>(during relocation)</td>
<td></td>
</tr>
</tbody>
</table>
**401(k) Plan**

The Baker Hughes, a GE company, 401(k) Plan (“the 401(k) Plan”) offers the opportunity to build financial security and retirement income for you and your family through a combination of your own and company contributions. Please refer to the Summary Plan Description posted on [BakerHughesbenefits.com/executives](http://BakerHughesbenefits.com/executives) for more information.

Not only does the company double your money on the first 5% of pay you contribute, the company also makes a base contribution that kicks your savings into high gear.

**Eligibility**

You are eligible to participate in the 401(k) Plan if you are:

- Employed by Baker Hughes, a GE company, or an affiliate that has adopted the 401(k) Plan (each a “BHGE company”);
- Covered by a collective bargaining agreement your agreement must provide for participation;
- Paid on a BHGE U.S. dollar payroll;
- 18 years of age or older; and
- One of the following:
  1. A U.S. citizen, legal permanent resident, or a non-U.S. citizen whose employment is based in the United States on local terms and conditions;
  2. A Canadian citizen on an international assignment to the U.S. and not eligible for the International Retirement Plan;
  3. A participant in the Plan since December 31, 1998; or
  4. A participant in the Plan since your transfer of employment from the Western Geophysical division of Western Atlas International, Inc., between January 1, 1999, and December 31, 2000 (but only if you were a participant in the Western Atlas International, Inc., Retirement/Profit Sharing Plan on December 31, 1998).

You’ll automatically be enrolled in the plan at a before-tax rate of 3% with a 3% company matching contribution. Amounts contributed through automatic enrollment will be invested in the 401(k) Plan’s default fund—the Moderate Style Fund.

Your contribution election will automatically increase annually by 1% until it reaches 10%. These auto-escalation increases typically occur during the first quarter of each year.

Remember, you may change your contribution rate and investment elections at any time. Visit [BakerHughesbenefits.com/executives](http://BakerHughesbenefits.com/executives) for more information.
401(k) Plan (continued)

Your contributions
You make contributions to the BHGE 401(k) Plan through convenient payroll deductions.

You choose:
- How much to save, from 1% to 50% of total eligible pay
- If you want to save with before-tax, Roth, after-tax contributions, or a combination of all.

Eligible pay includes all of your pay listed below that is paid up through the last payroll period in which termination occurs:
- Your regular base pay
- Overtime pay
- Shift differentials
- Commissions
- Eligible bonuses paid during the year

The Internal Revenue Service (IRS) limits your before-tax and Roth contributions to $19,000 in 2019. This includes any before-tax and/or Roth contributions you made to another employer within the same year.

Employee Catch-up contributions
If you are age 50 or over on January 1, 2019, or will be turning age 50 in 2019, you are eligible to make additional pre-tax and/or Roth contributions (unmatched) into your 401(k) Plan account up to a maximum of $6,000 in 2019.
Company Contributions
The company helps you save for your future by making the following contributions:

**Company base:** The company will automatically contribute an amount equal to 4% of your eligible pay to your account each pay period, whether or not you contribute.

**Company matching:** For every dollar you save each pay period up to 5% of your eligible pay, the company will provide matching contributions of a dollar.

Vesting
You are always fully vested in your own contributions, the company’s matching contributions, and any related earnings. Being “fully vested” means the money is yours to keep, even if you leave the company. You become 100% vested in the company base contributions and any related earnings when you:

- Complete three years of vesting service or
- Retire from the company or
- Reach age 65 while still an active employee of the company or
- Become permanently disabled or die while an active employee of the company.

Have money in another employer’s 401(k)?
You can roll over your account from a previous employer’s qualified plan or certain IRAs into the 401(k) Plan. For details, see the Summary Plan Description posted on BakerHughesbenefits.com/executives or call the BHGE Benefits Center at 1-866-244-3539.
Investment Options

Whether you’re a savvy investor or want a simplified approach to making investment decisions, the 401(k) Plan has got you covered with two distinct types of investment funds. Which approach you choose will depend on your comfort level with making investment decisions and how much time you want to devote to managing your investments. There will be changes to your investment options in 2020. More information will be made available in November 2019 on BakerHughesbenefits.com/executives.

Style Funds

Style Funds are pre-mixed, diversified funds that provide a quick and easy method for diversifying your investments with a single selection.

A Style Fund may be the right choice for you if you want a simplified investment strategy because each fund allows you to make a single choice for a specific investment objective and risk tolerance.

Each Style Fund is constructed from Core Fund options. Style Funds are rebalanced periodically to maintain appropriate asset allocations. Since Style Funds are pre-mixed and diversified, there’s generally no need to invest in additional Style or Core Funds.

Core Funds

If you want more involvement in choosing and managing your investment mix, the 401(k) Plan offers eight Core Funds from which you can choose to build your own portfolio.

In choosing your own portfolio from the Core Funds, you should consider your retirement financial goals, risk tolerance, and time horizon.

VS.

Helpful Tip

For resources and tools that can help determine the investment strategy that’s right for you, go to BakerHughesbenefits.com/executives

Naming a Beneficiary

When you become a participant, you will have the ability to name a beneficiary. A beneficiary is the person you choose to receive your 401(k) Plan benefit in the event of your death. To designate a beneficiary, visit BakerHughesbenefits.com/executives to access your account or call the Baker Hughes Benefits Center at 1-866-244-3539.
Supplemental Retirement Plan

The Supplemental Retirement Plan (SRP) rewards you for the key leadership role you play in our organization and allows you to save more for retirement than you’d be able to otherwise.

Because it’s a non-qualified retirement plan under the Internal Revenue Code, the SRP enables you to set aside additional compensation and bonus earnings on a tax-deferred (before-tax) basis—beyond what’s possible in the 401(k) Plan. In addition, BHGE supports your SRP contributions with additional base and basic contributions on compensation not eligible to receive company contributions in the 401(k) Plan. This includes the income that you defer in the SRP and compensation above the IRS compensation limit.

Additional details on the SRP will be provided to you after you begin work at Baker Hughes or become eligible for the SRP.

Salary deferral election
You may elect to defer eligible salary each year instead of receiving that amount as current compensation. You may elect to defer from 1% to 60% of your eligible base salary during the plan year.

Bonus deferral election
After your first year of participation in the SRP, you may elect to defer up to 100% of eligible bonuses earned during the plan year.

SRP company basic and base contributions
You will receive SRP company basic and base contributions equal to the sum of:
- 5% basic and 4% base contributions on base salary deferrals and eligible bonus deferrals
- 5% basic and 4% base contributions on base salary and eligible bonuses above the annual IRS compensation limit

Income eligible to receive an SRP basic/base contribution is not eligible to receive a 401(k) Plan match or base contribution.

Helpful Tip
You must enroll in the SRP within 30 days of your eligible start date if you want to defer income for the current plan year. The 2019 IRS compensation limit is $280,000.
SRP Vesting

Your contributions and company basic contributions: You are always 100% vested in your contributions and related company basic contributions.

Company base contributions: You become 100% vested in company base contributions and earnings on those amounts when you:

- Complete three years of vesting service
- Retire from the company (on or after you reach age 65)
- Become permanently disabled or die while actively working at a BHGE company

SRP investment funds

As with the 401(k) Plan, your investment options include a collection of Core Funds of different asset classes and risk/reward potential, as well as Style Funds, which are pre-mixed, diversified funds that provide a quick and easy method for diversifying your investments with a single selection.

For information on each investment option, please visit BakerHughesbenefits.com/srp or call the BHGE Benefits Center.

There is no requirement that any assets of the company (including those held in any rabbi trust) shall be invested in accordance with your deemed investment elections. Your deemed investment elections are relevant solely for purposes of determining the amount of your SRP benefits.

Helpful Tip

If you do not participate in the SRP, you will still need to make an election on the timing and method of payment for your company base contributions.
Accessing your money
When you enroll in the SRP, you must choose the timing of payment and method of payment for receiving your SRP benefit.
You can select the timing and method of payment as outlined below.

Timing of payment options:

Option 1: Receive your payment following your Separation of Service
- 100% of your vested account balance on the date of your Separation from Service*
- OR
- 100% of your vested account balance on January next following the first or later anniversary of your Separation from Service

*Payments made upon your Separation from Service will be made on the later of (1) the first day of the month coincident with or next following the date that is six months after the date of your Separation from Service or (2) the first day of January next following the date of your Separation from Service.

Option 2: Receive your payment on a Specified Date
Receive 100% of your vested account balance by a Specified Date. Payments made upon a Specified Date will be made no earlier than the third January following the end of the deferral election plan year.
For example, for the 2020 enrollment, the earliest Specified Date that can be elected is January 2023.

Method of payment:
Single lump-sum payment OR Installments of 2–20 years
If you do not make an election, payment will be made to you in a single lump-sum cash payment made upon your Separation from Service.
Employee Stock Purchase Program (ESPP)

The Employee Stock Purchase Program (ESPP) gives eligible employees the opportunity to purchase company shares at a 15% discount without brokerage commissions or fees. You’ll have four opportunities each year, one per quarter, to enroll in the ESPP. Your first opportunity to enroll in the ESPP will be this year during Annual Enrollment. Fidelity will administer the ESPP.

Contributions are deducted on an after-tax basis from each paycheck based on your election of up to $3,000 per quarter. Your contributions add up between the offering date and the purchase date. The purchase date for payroll contributions is the last day of March, June, September, and December on which trading in Baker Hughes common stock is conducted on the New York Stock Exchange.
Your Baker Hughes benefits: The Big Picture

Sure, your paycheck is important. But there’s so much more to your Total Rewards at Baker Hughes.

Baker Hughes offers a variety of benefits that help you manage and protect your health and your family’s health.

These benefits together with your compensation, form the Total Rewards you receive for working at Baker Hughes. Our Total Rewards package is not only competitive within our industry, it’s designed to be comprehensive enough to meet the varying benefit needs of our employees.

Total Rewards at Baker Hughes

Your Total Rewards consists of base pay, benefits, and other compensation.

<table>
<thead>
<tr>
<th>Baker Hughes role:</th>
<th>Your role:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Provide quality benefits to protect you and your family and help you prepare for retirement.</td>
<td>• Learn about and choose your benefit coverage carefully to meet your needs and your family’s needs.</td>
</tr>
<tr>
<td>• Ensure our programs are competitive in the marketplace and within our industry.</td>
<td>• Be a smart health care consumer. Get involved in your health care — ask questions about treatment alternatives and provider quality and efficiency.</td>
</tr>
<tr>
<td>• Manage costs and plan designs to keep our programs sustainable over the long term.</td>
<td></td>
</tr>
<tr>
<td>• Provide decision-making tools and other resources to help you choose and use your benefits wisely.</td>
<td></td>
</tr>
</tbody>
</table>

Newly hired or transferred?

Your personal Total Rewards data will be available about 60 days after you enroll.
Before you enroll

Take just a second to review this page to make sure you enroll, on time and get the coverage you need for yourself and your family.

Health and Protection benefits

- If you plan to cover dependents, make sure they’re eligible.
- You have 60 days from your date of hire or transfer to enroll, or else you will receive default coverage.
- Once you receive your first paycheck, you can enroll in your benefits.

If you need medical care before you enroll in your health benefits:

- Call the Baker Hughes Benefits Center to have coverage verified with a provider or
- Pay for the services yourself (you will be reimbursed for eligible expenses after you’ve enrolled)

Retirement benefits

Summary Plan Descriptions explain these plans in greater detail and are available online at BakerHughesbenefits.com/executives

401(k) Plan

You can enroll in the 401(k) Plan and make changes to your elections at any time by visiting BHGEBenefits.com/executives online or by calling the Baker Hughes Benefits Center during its hours of operation. If you do not enroll or if you do not decline enrollment in the 401(k) Plan, you will receive default coverage.

Supplemental Retirement Plan

If you are newly eligible to participate in the Supplemental Retirement Plan (SRP), you can enroll in the SRP within the 30 days immediately following your date of eligibility. You will receive information regarding your eligibility and enrollment in the SRP.

Employee Stock Purchase Program

Purchase company shares at a 15% discount without brokerage commissions or fees.
Planning to enroll dependents?

These are considered eligible dependents for your Health and Protection benefits:

<table>
<thead>
<tr>
<th>Family member</th>
<th>Eligibility requirements</th>
</tr>
</thead>
<tbody>
<tr>
<td>Your spouse</td>
<td>• Your legal spouse of opposite or same gender, including common law in states recognizing common law marriage, or a legally separated spouse in states recognizing legal separation</td>
</tr>
<tr>
<td>Your children</td>
<td>• Your dependent children up to age 26 regardless of whether they are married, full-time students, or eligible for other group health plan coverage</td>
</tr>
<tr>
<td></td>
<td>• Your unmarried dependent children up to any age who are supported by you because of mental or physical disability; the disability must have occurred during the period in which they were an eligible dependent (up to age 26)</td>
</tr>
</tbody>
</table>

- Your biological children
- Your adopted children and children placed for adoption
- Your stepchildren
- Foster children in your care
- Any children for whom you have legal custody
- Any children for whom there is a Qualified Medical Child Support Order (QMCSO)
- Those who are in full-time military service
- Parents, siblings, grandparents, nephews, nieces, etc., under the Medical, Dental, or Vision plans. They may qualify under the Flexible Spending Accounts, but only if they meet the requirements. Refer to IRS publications 502 and 503 for additional information.
- Domestic partners

Helpful Tip

You’ll need the Social Security Number (SSN) of any dependent you cover. If you have not received an SSN for a dependent by the time you enroll, be sure to update his or her information with the Baker Hughes Benefits Center once you receive it.

Check it out!

All BHGE employees are required to comply with the dependent eligibility verification process for all dependents covered under the Baker Hughes Health & Protection benefit plans.

Be sure to update your beneficiaries for life insurance and AD&D insurance.
How to enroll

Whether for the first time or during Annual Enrollment, enrolling is a snap — especially online!

There are two ways you can enroll in your benefits: either online or by phone.

**Online — BakerHughesBenefits.com**


The first time you access the enrollment system, you will need to create a new user ID and password. Here are the steps you will need to follow:

- You will need your work email, employee ID or Social Security Number to start the process. An email will be sent to the email address on file for you with an authentication code. Type that code into the box on the screen.
- Then the site will ask you to type in a mobile phone number where you can receive a text. This is called multi-factor authentication.
- Check your text messages for a code to type into the box on the screen.
- Create a password at least eight characters long. The site will require you to include a combination of capital and lowercase letters, numbers, and symbols.
- Each time you log in, you will be required to use multi-factor authentication (sending your mobile phone a text with a code).

Access is available 24 hours a day, seven days a week.

**By phone — Baker Hughes Benefits Center**

Call the Baker Hughes Benefits Center
1-847-883-0945 (worldwide)
1-866-244-3539 (within the U.S.)

Representatives are available Monday through Friday from 7 a.m. to 7 p.m. CST.

Make Changes?

During Annual Enrollment, if you wish to make changes, you must contact the Baker Hughes Benefits Center directly and speak with a representative.

If you have problems accessing the enrollment system or enrolling for benefits, contact the Baker Hughes Benefits Center.
After you enroll

Enrollment confirmation
If you make changes to your elections during Annual Enrollment, you’ll receive a confirmation statement of your health and insurance elections at your Baker Hughes email address. If you find any errors, contact the Baker Hughes Benefits Center immediately.

Insurance identification cards
If you are enrolling for the first time (or making changes during Annual Enrollment), you’ll receive ID cards for these benefits as shown:

<table>
<thead>
<tr>
<th>Benefit plan</th>
<th>Insurance ID card</th>
<th>Vendor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical plans</td>
<td>Yes</td>
<td>UnitedHealthcare (UHC)</td>
</tr>
<tr>
<td>Prescription Drug plans</td>
<td>Yes</td>
<td>CVS/caremark</td>
</tr>
<tr>
<td>Dental</td>
<td>No</td>
<td>Cigna</td>
</tr>
</tbody>
</table>

You will receive an Optum Bank card if you enroll in the HSA. You will not receive an ID card for the Vision Plan. In addition, you will not receive a card for the Flexible Spending Accounts. Beginning in 2020, you will not receive a Dental Plan ID card.

Dependent eligibility verification
All BHGE employees are required to provide proof of dependent eligibility for any new dependents added to coverage under the BHGE Health & Protection benefit plans.

If you add dependents to your coverage, you will receive notification and information on the required proof of eligibility. If you do not submit acceptable documentation by the deadline provided, those dependents will be removed from the plans for which they were enrolled and will not have coverage.

Additionally, if a dependent becomes ineligible, you must notify the BHGE Benefits Center immediately. Intentionally covering ineligible persons under these plans may be subject to discipline, up to and including termination.
If you don’t enroll

Baker Hughes provides some benefits automatically; others require you to enroll to have coverage. If you don’t enroll by the deadline, your default coverage will depend on whether you’re a newly hired or current employee (see below).

<table>
<thead>
<tr>
<th>Benefit plan</th>
<th>Newly hired employees</th>
<th>Current employees who remain eligible but don’t enroll during Annual Enrollment</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Medical</strong> (includes Prescription Drug coverage)</td>
<td>You Only coverage in the Standard plan or Standard Out-of-Area plan*</td>
<td>Same coverage you currently have</td>
</tr>
<tr>
<td><strong>Health Savings Account (HSA)</strong></td>
<td>No participation</td>
<td><strong>You must take action.</strong> You will have to enroll to continue contributing to your HSA, otherwise your contribution will be reset to $0.</td>
</tr>
<tr>
<td><strong>Dental</strong></td>
<td>No coverage</td>
<td>Same coverage you currently have</td>
</tr>
<tr>
<td><strong>Flexible Spending Accounts (FSAs)</strong></td>
<td>No participation</td>
<td>To continue participation in the Dependent Day Care FSA and the Health Care FSA, you must re-enroll during annual enrollment. If you do not re-enroll your coverage amount will default to $0.</td>
</tr>
<tr>
<td><strong>Employee Assistance Program (EAP)</strong> (available to all employees and family members)</td>
<td>Automatic coverage (Basic only)</td>
<td>Automatic coverage</td>
</tr>
<tr>
<td><strong>Short-Term Disability (STD)</strong></td>
<td>Automatic coverage</td>
<td>Automatic coverage</td>
</tr>
<tr>
<td><strong>Long-Term Disability (LTD)</strong></td>
<td>Automatic coverage</td>
<td>Same coverage you currently have</td>
</tr>
</tbody>
</table>

*You will need to pay for the default Medical and Prescription Drug coverage.

If you’re an existing employee transferring within Baker Hughes, your default coverage may be different. Visit BakerHughesBenefits.com online or contact the Baker Hughes Benefits Center to verify your coverage.
If you don’t enroll (chart cont.)

<table>
<thead>
<tr>
<th>Benefit plan</th>
<th>Newly hired employees</th>
<th>Current employees who remain eligible but don’t enroll during Annual Enrollment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accidental Death &amp; Dismemberment (AD&amp;D) insurance</td>
<td>Automatic coverage (Basic only)</td>
<td>Same coverage you currently have</td>
</tr>
<tr>
<td>Business Travel Accident (BTA)</td>
<td>Automatic coverage</td>
<td>Automatic coverage</td>
</tr>
<tr>
<td>Legal Plan</td>
<td>No coverage</td>
<td>Same coverage you currently have</td>
</tr>
<tr>
<td>Critical Illness plan</td>
<td>No coverage</td>
<td>Same coverage you currently have</td>
</tr>
<tr>
<td>401(k) Plan</td>
<td>Automatic participation for employee before-tax contributions (3%), company match (3%), and company base contributions (4%) invested in the Moderate Style Fund. You will be enrolled in auto escalation, which automatically increases your contribution by 1% each year, to a maximum contribution of 10%.</td>
<td>Same participation and contribution level you currently have</td>
</tr>
<tr>
<td>Supplemental Retirement Plan (SRP)</td>
<td>No employee deferrals. Automatic company base (4%) and basic (5%) contributions on eligible income above the IRS compensation limit.</td>
<td>If you do not make distribution and investment elections during the enrollment period and receive company contributions in a given year, your distribution election will automatically default to a lump-sum payment made the year following your separation from service. You will receive your payment the year following your separation from service.</td>
</tr>
</tbody>
</table>

If you’re an existing employee transferring within Baker Hughes, your default coverage may be different. Visit BakerHughesBenefits.com online or contact the Baker Hughes Benefits Center to verify your coverage.
Making changes to your benefit elections

When life changes you can change your benefits as shown below by visiting BakerHughesBenefits.com.

<table>
<thead>
<tr>
<th>Benefit plan</th>
<th>When changes can be made</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health and Protection</td>
<td>You can make changes during the Annual Enrollment period (typically held during October or November each year) for benefits effective January 1 of the following year. You can also make modifications if you have a change in family status, such as the birth or adoption of a child, marriage or divorce, or if you have a change in employment status that affects your benefits eligibility. In most cases, you will need to notify the Baker Hughes Benefits Center within 31 days of the date of the change. The effective date will be the same day as the status change (for example, your baby’s birth date or your date of marriage). For more information, access BakerHughesBenefits.com/executives or call the Baker Hughes Benefits Center.</td>
</tr>
<tr>
<td>benefits</td>
<td></td>
</tr>
<tr>
<td>401(k) Plan</td>
<td>You can make changes to your 401(k) Plan contribution amounts and investment elections at any time.</td>
</tr>
<tr>
<td>Supplemental Retirement</td>
<td>You can make changes during the Annual Enrollment period (typically held during October or November each year) for benefits effective January 1 of the following year. For more information, go to BakerHughesBenefits.com/SRP.</td>
</tr>
<tr>
<td>Plan (SRP)</td>
<td></td>
</tr>
</tbody>
</table>

If you leave Baker Hughes

If your active benefits terminate, you and your dependents may be eligible for continuation of Medical, Prescription Drug, Dental, Vision, and Health Care Flexible Spending Account benefits under the Consolidated Omnibus Budget Reconciliation Act of 1986 (COBRA). If you elect to continue any coverage under COBRA, you will automatically receive the Employee Assistance Program (EAP) at no additional cost.

For more information about COBRA, please refer to the Health & Welfare Summary Plan Description on BakerHughesBenefits.com/executives.
2020 monthly premium rates

Here’s how much you’ll pay each pay period if you enroll in these health plans.

<table>
<thead>
<tr>
<th>Employee Only</th>
<th>Employee + Spouse</th>
<th>Employee + Child(ren)</th>
<th>Employee + Family</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Medical Monthly Premium Rates</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Standard Plan</td>
<td>$59.08</td>
<td>$188.77</td>
<td>$104.77</td>
</tr>
<tr>
<td>Premium HSA</td>
<td>$32.31</td>
<td>$94.15</td>
<td>$43.85</td>
</tr>
<tr>
<td>Basic HSA</td>
<td>$7.38</td>
<td>$20.31</td>
<td>$11.54</td>
</tr>
<tr>
<td><strong>Dental Monthly Premium Rates</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dental Plan</td>
<td>$8.31</td>
<td>$16.62</td>
<td>$21.69</td>
</tr>
<tr>
<td><strong>Vision Monthly Premium Rates</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>High Plan</td>
<td>$4.33</td>
<td>$6.94</td>
<td>$7.08</td>
</tr>
<tr>
<td>Low Plan</td>
<td>$2.26</td>
<td>$3.62</td>
<td>$3.69</td>
</tr>
</tbody>
</table>

*The out-of-network plans have the same rates.

Baker Hughes pays the full cost of these benefits:

- Employee Assistance Program
- Short-Term Disability
- Core Long-Term Disability
- Basic Life insurance
- Basic AD&D insurance
- Business Travel Accident insurance
- 401(k) Plan company base contribution
- Long-Term Incentives
Deduction Authorization

As a Baker Hughes employee, I understand that I may be eligible for Health and Welfare benefit coverage. Certain benefits are provided and paid for by Baker Hughes. Other plans and coverage levels require an employee contribution. Upon election of any level of coverage which requires an employee contribution via payroll deduction, I hereby authorize Baker Hughes to deduct the applicable contribution from my paycheck as required. I realize that premium amounts may be adjusted by the benefit providers/administrators or Baker Hughes and that I will be notified in writing of such changes.

Baker Hughes accepts no liability or responsibility for paying any employee portion of premiums. Paychecks are prepared biweekly. Depending upon timing of plan election, payroll deduction of retroactive premiums may be necessary.

If during the course of employment with Baker Hughes I am approved for a Leave of Absence (LOA), I understand I will be required to pay my employee contributions for coverage in place prior to leave. Payment of these premiums for continuation of coverages will be deducted from my paycheck. If I am not receiving pay during the leave, the benefit deductions will go into arrears and will be deducted from my regular pay upon my return to work.

Upon termination of employment, it may be necessary for Baker Hughes to deduct the remainder of any employee contributions for the current month’s coverages, in addition to any outstanding amounts.
Long-Term Incentives

Our Long-Term Incentive Plan (LTIP) rewards the leaders of our company for creating positive, sustained business results. The LTIP also allows our leadership to build an ownership position in the company, which helps us all focus on the reward potential of share price appreciation. The company’s Board of Directors may issue certain long-term incentive awards, including:

- **Stock options**: Allows you to purchase shares of company stock at a fixed price at a discount on the grant date.
- **Performance units**: Long-term incentive payable in cash if financial goals are met by the end of a three-year performance period.
- **Restricted stock shares or units**: Awards you company stock over a specified vesting period (typically pro rata over three years).

**Participation is not automatic**

Participation in the LTIP is based on your current performance and potential contributions to the company’s future success. You are eligible for consideration for participation as long as you remain an active employee of the company, in good standing, and as long as the Compensation Committee of the Board of Directors continues to make LTI grants.

The date of the grant and the exercise price for Stock Options is set by the Compensation Committee of the Board of Directors as described in the plan document.

After you receive an LTIP award, you will be provided with more detailed information on the LTIP.

**Check it Out!**

LTIP awards are granted to help align employees’ performance with shareholders’ interests, as well as the strategies and goals of Baker Hughes.
## Resources

<table>
<thead>
<tr>
<th>Benefit plan</th>
<th>Provider</th>
<th>Phone number</th>
<th>Website</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Enrollment, Eligibility, Summary Plan Descriptions, and Advocacy</strong></td>
<td>BHGE Benefits Center</td>
<td>1-866-244-3539 or 1-847-883-0945 (worldwide)</td>
<td>BakerHughesbenefits.com/executives</td>
</tr>
<tr>
<td><strong>Medical</strong></td>
<td>UnitedHealthcare (UHC)</td>
<td>1-866-743-6549 or 1-866-802-8572 (worldwide)</td>
<td><a href="http://www.myuhc.com">www.myuhc.com</a></td>
</tr>
<tr>
<td><strong>Health Savings Account (HSA)</strong></td>
<td>Optum Bank</td>
<td>1-866-743-6549 or 1-866-802-8572 (worldwide)</td>
<td><a href="http://www.myuhc.com">www.myuhc.com</a></td>
</tr>
<tr>
<td><strong>Prescription Drug</strong></td>
<td>CVS/caremark</td>
<td>1-877-252-3485</td>
<td><a href="http://www.caremark.com">www.caremark.com</a></td>
</tr>
<tr>
<td><strong>Dental</strong></td>
<td>Cigna</td>
<td>1-800-542-4293</td>
<td><a href="http://www.mycigna.com">www.mycigna.com</a></td>
</tr>
<tr>
<td><strong>Vision</strong></td>
<td>VSP</td>
<td>1-800-877-7195 or 1-916-635-7373 (worldwide)</td>
<td><a href="http://www.vsp.com">www.vsp.com</a></td>
</tr>
<tr>
<td><strong>Flexible Spending Accounts (FSAs)</strong></td>
<td>UnitedHealthcare (UHC)</td>
<td>1-866-743-6549 or 1-866-802-8572 (worldwide)</td>
<td><a href="http://www.myuhc.com">www.myuhc.com</a></td>
</tr>
<tr>
<td><strong>Limited Purpose HRA</strong></td>
<td>UnitedHealthcare (UHC)</td>
<td>1-866-743-6549 or 1-866-802-8572 (worldwide)</td>
<td><a href="http://www.myuhc.com">www.myuhc.com</a></td>
</tr>
<tr>
<td><strong>Employee Assistance Program (EAP)</strong></td>
<td>Optum Health</td>
<td>1-866-248-4096</td>
<td><a href="http://www.liveandworkwell.com">www.liveandworkwell.com</a></td>
</tr>
<tr>
<td><strong>Short-Term Disability (STD)</strong></td>
<td>Sedgwick</td>
<td>1-877-423-8677</td>
<td><a href="http://www.claimlookup.com">www.claimlookup.com</a>; client number 8504</td>
</tr>
<tr>
<td><strong>Long-Term Disability (LTD)</strong></td>
<td>Prudential</td>
<td>1-800-842-1718</td>
<td><a href="http://www.prudential.com/mybenefits">www.prudential.com/mybenefits</a></td>
</tr>
<tr>
<td><strong>Life and Accidental Death &amp; Dismemberment (AD&amp;D)</strong></td>
<td>BHGE Benefits Center</td>
<td>1-866-244-3539 or 1-847-883-0945 (worldwide)</td>
<td>BakerHughesbenefits.com/executives</td>
</tr>
<tr>
<td><strong>Legal Plan</strong></td>
<td>Legal Access Plans LLC</td>
<td>1-888-416-4313</td>
<td><a href="http://www.legaleaseplan.com/bakerhughes">www.legaleaseplan.com/bakerhughes</a></td>
</tr>
<tr>
<td><strong>Critical Illness and Accident Plan</strong></td>
<td>UnitedHealthcare (UHC)</td>
<td>1-800-444-5854</td>
<td>N/A</td>
</tr>
<tr>
<td><strong>401(k) Plan and Supplemental Retirement Plan</strong></td>
<td>BHGE Benefits Center</td>
<td>1-866-244-3539 or 1-847-883-0945 (worldwide)</td>
<td>BakerHughesbenefits.com/executives</td>
</tr>
<tr>
<td><strong>Employee Stock Purchase Program</strong></td>
<td>Fidelity</td>
<td>1-800-544-9354 or 1-800-544-0275 (worldwide)</td>
<td><a href="http://www.netbenefits.com">www.netbenefits.com</a></td>
</tr>
</tbody>
</table>
Contact information

This document includes information about the benefits programs offered by Baker Hughes. If you have difficulty understanding the information contained in this document, please contact the Baker Hughes Benefits Center.

Este documento contiene la información de los programas de beneficios de salud y bienestar de Baker Hughes. Si tuviera alguna dificultad para entender alguna parte de este documento, por favor contacte al Centro de Beneficios.


Please note that the information presented in this document is only a summary. The actual eligibility requirements, benefits, terms, conditions, limitations, and provisions that govern these plans are contained in the plan documents or group insurance contracts. If, in our efforts to make the plans easy to understand, any of the plan provisions have been omitted or misstated, the official plan documents or insurance contracts are the final authority. The legal documents also govern the administration of the plans and payment of benefits. In case of any dispute, the information in the plan documents or contracts will prevail. The company intends to continue the plans described in this document indefinitely. However, the company reserves the right to amend, cancel, change carriers, or discontinue all or any part of the plans at any time.