

**THE DOW CHEMICAL COMPANY  
SUMMARY OF MATERIAL MODIFICATIONS**

**Summary Plan Descriptions for**

**The Dow Chemical Company Medical Care Program’s Active Employee Map Plus Option  
1 Low Deductible Plan and MAP Plus Option 2 High Deductible Plan (ERISA Plan #501)  
Applicable to Eligible Active Employees**

**AND**

**“Wrapper” for Health Maintenance Organizations (HMOs) and Insured Health Plans  
Participating in: The Dow Chemical Company Insured Health Program (ERISA Plan  
#601) Applicable to Eligible Active Employees.**

**Amended and Restated Effective January 1, 2017**

This Summary of Material Modifications (“SMM”) describes the grandchildren of certain employees of the Dow Corning Corporation who are eligible for coverage under The Dow Chemical Company Medical Care Program and The Dow Chemical Company Insured Health Program (each a “Program”). Different rules apply if you are not an employee of the Dow Corning Corporation -- see your Summary Plan Description (“SPD”) for details. Capitalized terms are defined in your SPD.

Effective on and after January 1, 2017, if you are an employee of Dow Corning Corporation who enrolls in one of the Programs and you had medical coverage for your grandchild(ren) on December 31, 2016, under either (a) the medical component of the Dow Corning Corporation Health and Welfare Benefits Plan for Retirees and Inactive Employees or (b) the Dow Corning Corporation Health and Welfare Benefits Plan for Active Employees; then such grandchild(ren) on file with Aetna are eligible for coverage under the Program. Any such grandchild(ren) ceases to be eligible on the earlier of (1) the day that your child, who is the parent of such grandchild(ren), ceases to meet the eligibility requirements that otherwise apply to Dependent Children (e.g., the end of the month in which your child turns age 26); (2) the day that the grandchild(ren) ceases to meet the eligibility requirements that otherwise apply to Dependent Children (e.g., the end of the month in which the grandchild turns age 26); or (3) the effective date on which you cancel coverage under the Program for the grandchild(ren). If you drop medical coverage under the Program for such grandchild(ren) at any time and for any reason, you may not again enroll such grandchild(ren) in the Program.

If you have any questions about these rules or the Programs generally, please call the HR Service Center at 877-623-8079

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*Retain this SMM for future reference with your SPD for the applicable Program. For more details about the Program, please review your SPD. Copies of the SPD and this SMM are available at the Dow Family Health website (<http://www.dowfamilyhealth.com>). You may request hard copies of these documents from the HR Service Center by calling 877-623-8079 or*

*by submitting your request through the Dow Benefits website's Message Center available at (<http://dowbenefits.ehr.com>).*

*The Programs are governed by the plan documents for the Programs, which are the legal instruments under which the Programs are operated. You may request a copy of the formal plan documents at any time by following the instructions in the SPD. If a provision described in this SMM differs from the provisions of the applicable plan document, the plan document prevails. Similarly, any oral or written representations by a company employee or agent, or any benefit estimates that you may receive, cannot override, reverse or supplement the provisions of the plan documents.*

*The Dow Chemical Company reserves the right to amend, modify or terminate the Programs and any or all of the plans (including amending the plan documents and the SPDs), at any time, for any reason, in its sole discretion with or without notice, retroactively or prospectively, to the full extent permitted by law.*