

AUTODESK, INC.

ELIGIBILITY CERTIFICATION FOR NON-LEGALLY RECOGNIZED DOMESTIC PARTNERSHIP
(Do not complete this form for Legally Registered Domestic Partners– see FAQ on page 2 for details)

I. Declaration and Certification of Non-Legally Recognized Domestic Partnership

We, _____, and _____, certify
Employee name (print) Non-Legally Recognized Domestic Partner name (print)

Employee Initials	NLRDP Initials	Employee and Non-Legally Recognized Domestic Partner (NLRDP) – each must initial to confirm you meet all of the following requirements.
_____	_____	We are each other's sole domestic partner and intend to remain so indefinitely
_____	_____	We are engaged in a committed relationship of mutual caring and support, and are jointly responsible for our common welfare and financial obligations
_____	_____	We are both at least eighteen (18) years of age and mentally competent to consent to a contract
_____	_____	We are not related by blood to a degree of closeness which would prohibit legal marriage in the state in which we legally reside
_____	_____	We maintain the same residence(s) and intend to do so indefinitely
_____	_____	Neither of us is married to or legally separated from anyone else.

*I, employee, acknowledge I have read this document and understand the **cost and tax consequence** of adding my Non-Legally Recognized Domestic Partner to my benefits coverage. I also understand, unless adding during Open Enrollment, the first paycheck with deductions applied may include retroactive pay periods and may be a large amount.*

II. Declaration and Certification of child(ren) tax dependency (Complete II. if adding Non-Legally Recognized Domestic partner child(ren))

Employee Initials	NLRDP Initials	Employee and Non-Legally Recognized Domestic Partner (NLRDP) – each must initial
_____	N/A	I claim the child(ren) below as dependents on my federal tax return
N/A	_____	I do not claim the child(ren) below as dependents on my federal tax return

Names of children on employee's federal tax return that will be added as dependents:

III. Change in Non-Legally Recognized Domestic Partner Status

1. We understand that we have an obligation to notify the Autodesk Benefits Department if there is any change in our status as Non-Legally Recognized Domestic Partners, as stated in this document, which would terminate this Certification (for example, due to termination of the relationship or death of a partner). We will notify the Autodesk Benefits Department within thirty (30) calendar days of such change. Failure to inform the Benefits Department of a change in status could result in disciplinary action.

IV. Acknowledgments

1. We acknowledge that our Non-Registered Domestic Partnership began on or about this date: _____.
2. We have provided the information in this Certification for use by Autodesk, Inc. for the sole purpose of determining our eligibility for certain Non-Legally Recognized Domestic partner benefits. We understand that the information provided in this form will be treated as confidential by Autodesk, Inc., but will be subject to disclosure; a) upon the express written authorization of the undersigned employee, or b) if otherwise required by law.
3. We understand that this Certification may have legal implications relating, for example, to our ownership of property, and that before signing this Certification we should seek competent legal advice concerning such matters. We understand that the benefits provided by Autodesk **will result in imputed income and have tax consequences** for the undersigned employee and that we should seek the advice of a financial advisor concerning such matters.

We affirm, under penalty of perjury, that the statements in this Certification are true and correct. Falsification of this document in any way will require the undersigned employee to reimburse Autodesk for all company-paid benefits based on these representations and may additionally result in termination of the employee's employment with Autodesk, at its sole discretion.

Employee Signature

Date

Non-Legally Recognized Domestic Partner Signature

Date

Upload this completed and fully executed form to Workday once you have completed your enrollment.

Frequently Asked Questions

Q1. What is a Legally Registered Domestic Partner?

- A. (a) same-sex and opposite-sex couples who have registered with any state or local government domestic partnership registry; or
(b) State Registered Domestic Partners - two individuals who are Registered Domestic Partners with the state, in a state in which they reside pursuant to a domestic partner law; or
(c) Civil Union Partners - two individuals who are in a legally recognized Civil Union with the state, in a state in which they reside pursuant to a civil union law.

Q2. My partner and I are Legally Registered Domestic Partners. Is this form required?

- A. No, this form is not required as there are no requirements for proof of relationship. When enrolling your partner in benefits via Workday, simply select the *Domestic Partner – Registered/Legally Recognized* relationship.

Q3. What is a Non-Legally Recognized Domestic Partner?

- A. Partners who meet the requirements in this certification form but are not recognized by a government entity.

Q4. What are the costs and tax consequences of enrolling my Non-Legally Recognized Domestic Partner in health insurance coverage?

- A. The amount Autodesk pays for your partner's coverage, known as imputed income, is taxable to you. A chart detailing the health care premium contributions you'll pay and the imputed income amounts can be found [here](#). The actual amount of tax you end up paying depends on your tax bracket.

Q5. I reviewed the chart you referenced in Q4 above. Will the amount showing in the Imputed Income column be deducted from my paycheck?

- A. No; the imputed income amount reflects the amount that will be taxable to you. Refer to the illustration on the next page to understand what the imputed income will actually look like on your paycheck.

Q6. What benefits are Non-Legally Recognized Domestic Partners eligible for?

- A. All current and future spousal / dependent benefits, unless prohibited by law. Currently, this includes the following benefits:
- Medical, dental, vision, and supplemental Life/AD&D insurance
 - Employee Assistance Program, CareCounsel, CareTribe, and Grand Rounds
 - COBRA

Q7. Is the child(ren) of my Non-Legally Recognized Domestic Partner eligible for medical, dental, vision and/or supplemental Life/AD&D coverage?

- A. Only if you claim the child(ren) as a dependent on your Federal tax return. Note: Child(ren) of Legally Registered Domestic Partners do not require Federal tax dependency.

Q8. Can I submit expenses incurred by my Non-Legally Recognized Domestic Partner under my Flexible Spending Account (FSA) and/or Health Savings Account (HSA)?

- A. No. Per IRS regulations, only eligible expenses incurred by a spouse and/or child claimed on your tax return can be submitted for reimbursement.

Pay Stub Illustration of Imputed Income

Example

Post-tax contributions

Pre Tax Deductions			Post Tax Deductions		
Description	Amount	YTD	Description	Amount	YTD
401(k)			Domestic Partner - Dental	17.23	
401(k) AIP Bonus			Domestic Partner - Medical	48.73	
Health Savings Account					
Pre Tax Deductions			Post Tax Deductions		
			74.05		

Employer Paid Benefits/Imputed Income			Taxable Wages		
Description	Amount	YTD	Description	Amount	YTD
Employer Paid - AD&D			OASDI - Taxable Wages		
Employer Paid - Dental			Medicare - Taxable Wages		
Employer Paid - Employee Assistance Program			Federal Withholding - Taxable Wages		
Employer Paid - Health Advocacy Service			State Tax Taxable Wages - CA		
Employer Paid - Basic Life					
Employer Paid - Long Term Disability					
Employer Paid - Medical Care Assistance					
Employer Paid - Medical					
Employer Paid - Vision					
401(k) Match					
Imputed Income - Domestic Partner Dental	6.99				
Imputed Income - Domestic Partner Medical	182.16				
Imputed Income - Long Term Disability	8.78				
Employer Paid Benefits/Imputed Income					

You must pay taxes on the imputed income. The percentage that you pay depends on your tax bracket. If, for example, you pay 20% in taxes, you would end up paying \$37.83 per paycheck.

Calculation:
 $\$189.15 \times 20\% = \37.83

Total amount paid per paycheck in this example would be \$103.79.

Calculation:
 $\$65.96 + \$37.83 = \$103.79$