

Statement of Domestic Partnership

We, the undersigned, each represent that:

- A. We are currently registered as domestic partners or civil union partners with a governmental body, pursuant to state or local law; **or**
- B. We meet all of the follow criteria:
 - a. Have assumed legal responsibility for each other's common welfare and financial obligations;
 - b. Each of us is presently unmarried under statutory or common law, legally separated, or in a partnership with anyone else;
 - c. Each of us is unrelated by blood to a degree that would prohibit marriage in our state;
 - d. Each of us is at least 18 years old and mentally competent;
 - e. We share the same residence;
 - f. Each of us intends that the relationship to last indefinitely.

We understand that as Domestic Partners, we are subject to the same window period governing all other employees by or applying for benefit plan coverage.

We understand that as Domestic Partners, the Employee may be subject to taxation on imputed income based on the value of the benefit(s) for the Domestic Partner and/or Domestic Partner Child(ren). Additionally, we have reviewed the Domestic Partner Enrollment Guide on NutanixBenefits.com.

We agree to notify the People Team if there is any change in our status as Domestic Partners or if we believe we are not subject to imputed income.

We have provided the information in this Declaration of Domestic Partner Status form for use by Nutanix, Inc. People Team for the sole purpose of determining our eligibility for insurance benefits. We agree to furnish any additional information requested to demonstrate our financial interdependence or to evaluate the current status of our Domestic Partnership relationship. Return form to Nutanix Benefits; via a [ServiceNow](#) ticket or fax 1-408-490-2794.

Employee Name (please print)

Domestic Partner Name (please print)

Employee Signature

Domestic Partner Signature

Date Signed

Requested Coverage Effective Date

Sworn and subscribed before me under penalty of perjury in the State of

_____, this _____ day of _____, 20_____.

Notary Public

NOTE: Alternatively, if you are a registered domestic partner, please open a [ServiceNow](#) ticket for further instruction.

Taxation of Domestic Partnership Coverage

The Internal Revenue Service (IRS) has determined that the cost of providing benefits for a domestic partner and their children is considered “imputed income,” which means it is typically subject to state* and federal taxes, including Social Security and Medicare (aka “FICA”) taxes. Nutanix is required to report the fair market premium value (FMV) of benefits provided to an employee’s domestic partner and to the domestic partner’s child(ren) as additional wages or “imputed income” to the IRS, resulting in increased taxable gross income for federal and state* income taxes.

The following chart shows the monthly/bi-monthly fair market premium value (FMV) of domestic partner benefits based on level of coverage for Nutanix’s medical, dental and vision plans. The imputed income tax is determined by using the amounts in the 2021 monthly/bi-monthly “Fair Market Value of Domestic Partner Benefits” columns.

Plan	Coverage	Monthly Imputed Income	Per Pay Period Imputed Income
-	-	-	-
UHC POS Plans (Select+ & Choice+)	EE+Domestic Partner	\$1,000.42	\$500.21
	EE+Domestic Partner Child(ren)	\$538.69	\$269.35
	EE+ Domestic Partner + DP Child(ren)	\$1,462.16	\$731.08
	EE+Child(ren)+Domestic Partner	\$923.47	\$461.74
	EE+Child(ren)+DP Child(ren)+DP	\$923.47	\$461.74
	EE+Child(ren)+DP Child(ren)	\$0.00	\$0.00
-	-	-	-
UHC PPO Plan (Hawaii)	EE+Domestic Partner	\$818.11	\$409.06
	EE+Domestic Partner Child(ren)	\$487.43	\$243.72
	EE+ Domestic Partner + DP Child(ren)	\$1,505.97	\$752.99
	EE+Child(ren)+Domestic Partner	\$1,018.54	\$509.27
	EE+Child(ren)+DP Child(ren)+DP	\$1,018.54	\$509.27
	EE+Child(ren)+DP Child(ren)	\$0.00	\$0.00
-	-	-	-
Kaiser HMO (NorCal & SoCal)	EE+Domestic Partner	\$776.31	\$388.16
	EE+Domestic Partner Child(ren)	\$427.69	\$213.85
	EE+ Domestic Partner + DP Child(ren)	\$1,124.94	\$562.47
	EE+Child(ren)+Domestic Partner	\$697.25	\$348.63
	EE+Child(ren)+DP Child(ren)+DP	\$697.25	\$348.63
	EE+Child(ren)+DP Child(ren)	\$0.00	\$0.00
-	-	-	-
Delta Dental	EE+Domestic Partner	\$53.20	\$26.60
	EE+Domestic Partner Child(ren)	\$66.89	\$33.45
	EE+ Domestic Partner + DP Child(ren)	\$129.33	\$64.67
	EE+Child(ren)+Domestic Partner	\$62.44	\$31.22
	EE+Child(ren)+DP Child(ren)+DP	\$62.44	\$31.22
	EE+Child(ren)+DP Child(ren)	\$0.00	\$0.00
-	-	-	-
VSP	EE+Domestic Partner	\$18.62	\$9.31
	EE+Domestic Partner Child(ren)	\$21.21	\$10.61

	EE+ Domestic Partner + DP Child(ren)	\$45.03	\$22.52
	EE+Child(ren)+Domestic Partner	\$23.82	\$11.91
	EE+Child(ren)+DP Child(ren)+DP	\$23.82	\$11.91
	EE+Child(ren)+DP Child(ren)	\$0.00	\$0.00
-	-	-	-

The coverage for your domestic partner and/or your domestic partner's child(ren) will be added to your taxable income based on the plan and level of coverage you elected.

For questions about:

Benefits [ServiceNow](#)

Taxation payroll@nutanix.com

*In some cases your domestic partner and/or domestic partner's child(ren) will qualify as tax dependent(s) under the Internal Revenue Code (IRC). It can be complex to determine whether an individual satisfies the definition of a tax dependent under the IRC and you may wish to consult a tax professional for advice on your personal situation before you declare that your domestic partner and/or his or her children are eligible for tax-free health coverage.

For more information about these rules and to determine whether your domestic partner or his or her child qualifies for tax free benefits, refer to IRS Publication 17 and/or IRS Publication 501 available at <https://www.irs.gov/Forms-&-Pubs> or consult with your personal tax advisor.