Carnegie Mellon University
Finance Division

Accounts Payable
Domestic Supplier Form

Purpose of form: ☐ Provide information for a new supplier ☐ Update information for existing supplier

Legal Name _____ **DBA (Doing Business As, if applicable)** _____

Is Supplier a US citizen or entity? ☐ Yes ☐ No

If **YES**, a completed Form W-9 must be completed and attached.
If **NO**, and…

(1) Individual is performing services IN the U.S; the **Foreign National Information Form for Non-employees** must be completed and attached.
(2) Individual is performing services OUTSIDE the U.S; the **Foreign Source Income Form** must be completed and attached.
(3) Supplier is an entity, **Form W-8** must be completed and attached.

NOTE: W-9 or W-8 forms can be found at: **http://www.irs.gov/formspubs/index.html** or **http://www.cmu.edu/finance/forms**

If payments to Supplier should be made to an address different than that listed on Supplier's completed Form W-9/W-8, please state payment address here:

State what you will be providing to Carnegie Mellon: ☐ Product ☐ Service ☐ Both

Description: _____

CMU will be issuing your payment via Electronic Funds Transfer (EFT). Please provide the banking information below. There is not an option to receive payment via check.

Bank Name: _____ Bank Routing Number: _____

Bank Address: _____ Bank Account Number: _____

City, State, Zip: _____ Account Type: ☐ Checking ☐ Savings

Email remittance to: _____ Currency: _____ Ledger: _____

Note: A CMU Accounts Payable representative will contact the supplier to verify the banking information provided on the form. If the supplier does not verify banking information, the supplier will not be set up and payment will not be processed.

Is supplier subject to PA Income Tax Withholding? ☐ Yes ☐ No Instructions for PA 1099 MISC Exemption Certificate can be found on the Accounts Payable site or in the Supplier Information Package - US [.pdf].

Minority/Disadvantaged Business Information (select all applicable)

☐ Large business concern ☐ Small business concern ☐ Women-owned ☐ Veteran-owned ☐ HUBzone ☐ HBCU/MI

☐ Service Disabled Veteran-owned ☐ Disadvantaged/Minority ☐ Black American ☐ Asian American ☐ Hispanic American ☐ Native American

☐ Alaskan Native Corp ☐ _____ **View Minority/Disadvantaged Business Definitions.** Type of Organization:

Is Supplier in the System for Award Management (SAM.gov)? ☐ Yes ☐ No (https://www.sam.gov/SAM) Please provide a copy of certification with this form.

By signing below, Supplier acknowledges that it has received and reviewed the university's FCPA Guidance and COVID-19 Mitigation Protocols.

Do you anticipate that it will be necessary to interact with any foreign officials on behalf of Carnegie Mellon University? ☐ Yes ☐ No

Is any owner (or family member of an owner) an official of a foreign government? ☐ Yes ☐ No

Description: _____

Signature & Agreement: By signing this form, Supplier agrees that the information provided on this form is true and correct. The Supplier agrees to timely submit updated information in the event the information provided is no longer true and correct by completing and returning to CMU an updated Supplier Information Form.

_____ _____ _____

Signature of Supplier Authorized Representative **Name & Title (Printed or Typed)** Date

CMU Purchasing Contact Name: _____ **Email/Phone:** _____

Official Use Only: If applicable, FCPA Review (Print Name): _____

Supplier # Assigned: _____ Approved by: _____

Maintained by: _____ Date: _____

Supplier in EPLS? ☐ Yes ☐ No Bank in EPLS? ☐ Yes ☐ No Ledger: _____

ICC Required? ☐ Yes ☐ No

Please submit this form from a CMU email address to Accounts Payable at ap-supplier-doc@andrew.cmu.edu.

Updated by Accounts Payable: 12.19.2023