

UNC System Office Supplier Master Form

The following information is required for any entity doing business with the UNC System Office. Please complete <u>all</u> sections. Payments could be subject to 28% backup withholding and penalties by the IRS if all information is not provided. ALL SUPPLIER PAYMENTS WILL BE MADE ELECTRONICALLY. SEE INSTRUCTION SHEET FOR MORE INFORMATION - LINK IS LISTED BELOW.

upplier Name: ba if applicable:
SN/TIN/EIN:
W-9 Designation (Check one - should match the signed W-9 form)
Individual/Sole Proprietor C Corp Other Single Membership LLC S Corp Partnership LLC taxes as C Corp Trust/Estate LLC taxed as S Corp Non-Profit LLC Taxed as Partnership
Scope of Work (select all that apply)
Services explain: Rental Payments Award, Honorarium, Prize or Stipend Only travel/expense reimbursement (no compensation) Attorney services or for legal settlements Other
Verification of Foreign Status (answer all questions)
(check one in each column) Are you a foreign entity/company? Do you report your IRS designation using: Yes W-8 No W-9 Will you issue an invoice from a foreign address? Yes Yes If yes, contact UNC System Office Controller: accountinghelp@northcarolina.edu or 919-962-4243 No
Will payment be made to a foreign address or be paid via international wire? Yes If yes, contact UNC System Office Controller: accountinghelp@northcarolina.edu or 919-962-4243 No
ALL SUPPLIERS MUST ANSWER YES OR NO TO THE FOLLOWING QUESTIONS
Are you a non-state resident business entity/individual (not based in NC)?
Is the work or are the services being performed in NC?
Is your work or are the services in connection with: A performance An entertainment or athletic event A speech Creation of a film, radio or television segment
Are you a: 1) licensed member of the clergy, a nonresident entity with NC Dept. of Revenue exemption (requires documentation); 2) an LLC with NC Secretary of State Certificate of Authority and id number (requires documentation); or 3) an exempt organization under NC G.S. 105-130.11? https://www.ncleg.gov/EnactedLegislation/Statutes/PDF/BySection/Chapter_105/GS_105-130.11.pdf
If yes to questions 1-3 and no to question 4, 4% of all applicable payments over \$1,500, cumulative in a calendar year, will be withheld
Certification (Signature, not typed name, is required) Under penalties of perjury, I certify that (1) the number shown above is my correct taxpayer identification number, (2) I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the IRS that I am subject to backup withholding; (3) I am a U.S. person (including a U.S. Resident Alien); and (4) the information provided is complete and accurate as of this date.
Date:
Signature: Printed Name:

Click link below for Instructions on how to complete form:

https://www.northcarolina.edu/wp-content/uploads/reports-and-documents/finance-documents/4-27-22-supplier-master-form-instructions.pdf