



SECTION 1: CONTACT INFORMATION AND TAXPAYER IDENTIFICATION NUMBER

NAME (as shown on your income tax return). Name is required on this line; do not leave this line blank.

BUSINESS NAME/ disregarded entity name, if different from above.

PRIMARY ADDRESS (number, street, and apt or suite no)

REMITTANCE ADDRESS (number, street, and apt or suite no)

CITY, STATE, and ZIP CODE

REMITTANCE CITY, STATE, and ZIP CODE

PHONE

EMAIL ADDRESS

SOCIAL SECURITY NUMBER

OR

EMPLOYER IDENTIFICATION NUMBER

New Mexico CRS TAX ID (if applicable)

SSN input boxes

EIN input boxes

Tax ID input boxes

TAX CLASSIFICATION (check only one)

- INDIVIDUAL/SOLE PROPRIETOR or single-member LLC
PARTNERSHIP
LIMITED LIABILITY COMPANY
501(C)3/NON-PROFIT ORGANIZATION
C CORPORATION
S CORPORATION
TRUST/ESTATE
OTHER (SEE INSTRUCTIONS)

EXEMPTIONS (codes apply to certain entities, not individuals; see instructions)

EXEMPT PAYEE CODE (if any)

EXEMPTION FROM FATCA REPORTING CODE (if any)

Note: For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single- member owner.

SECTION 2: BUSINESS DEMOGRAPHICS (CHECK ALL THAT APPLY)

- Local Business
Doing Business Locally
Woman Owned Business
Minority Business Enterprise (MBE) Owned
LGBTQ+ Owned Business
None of the Above Categories Apply

If your business is MBE-owned, please specify the race/ethnicity of minority owner(s). Check all that apply:

- Hispanic American
Native American
Black or African American
Asian-Indian American
Asian-Pacific American

SECTION 3: PURCHASE ORDERS (COMPLETE ONLY IF YOU ACCEPT POs)

ELECTRONIC POs AND INVOICES (select one)

- Transcepta (preferred method)
Email

PO CONTACT INFORMATION

FULL NAME

EMAIL ADDRESS

SECTION 4: CERTIFICATION

Under penalties of perjury, I certify that:

- 1. The number shown on this form is my correct taxpayer identification number...
2. I am not subject to backup withholding because...
3. I am a U.S. citizen or other U.S. person...
4. The FATCA code(s) entered on this form... is correct.

Certification Instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because of underreporting interest or dividends on your tax return.

The Internal Revenue Service does not require your consent to any provision on this document other than the certifications required to avoid backup withholding.

SIGNATURE of U.S. person

DATE

PRINT NAME

TITLE

Section 1 – Contact Information and Taxpayer Identification Number

Information on how to fill out Section 1 can be found at: <https://www.irs.gov/pub/irs-pdf/fw9.pdf>

Section 2 – Business Demographics

- A. Select all for which the business has self-certified or for which it believes it is eligible.
- B. The Greater Albuquerque Metropolitan Area includes all locations within the City of Albuquerque and Bernalillo County.
- C. A local business is a business that is headquartered *and* maintains its principal office and place of business in the Greater Albuquerque Metropolitan Area.
- D. A place of business is a location which is staffed and open to the public on a regular basis, if applicable.
- E. Minority is defined to include Hispanic Americans, Black or African Americans, Native Americans, Asian-Pacific Americans, and Asian-Indian Americans.
- F. LGBTQ+ is defined to include all gender and sexual minorities including lesbian, gay, bisexual, transgender, queer, questioning, intersex, and asexual people.

Section 3 – Purchase Orders

- A. To obtain purchase orders and procurement contracts electronically, suppliers must provide a current e-mail address on.
- B. Transcepta is an electronic purchase order and invoicing system that delivers purchase orders from the City to suppliers and in turn, receives inbound invoices, and purchase order acknowledgments from City suppliers. Transcepta also provides a portal for suppliers to view POs and invoices and check payment status. To participate in Transcepta follow the instructions at <http://connect.transcepta.com/abq/>

Section 4 – Certification

Form must be fully completed and signed to be processed (electronic signatures are accepted - just follow prompts provided when signature box is selected). Completed forms should be sent to the City Purchasing Division by clicking on the button or directly emailing (supplierssetup@cabq.gov).