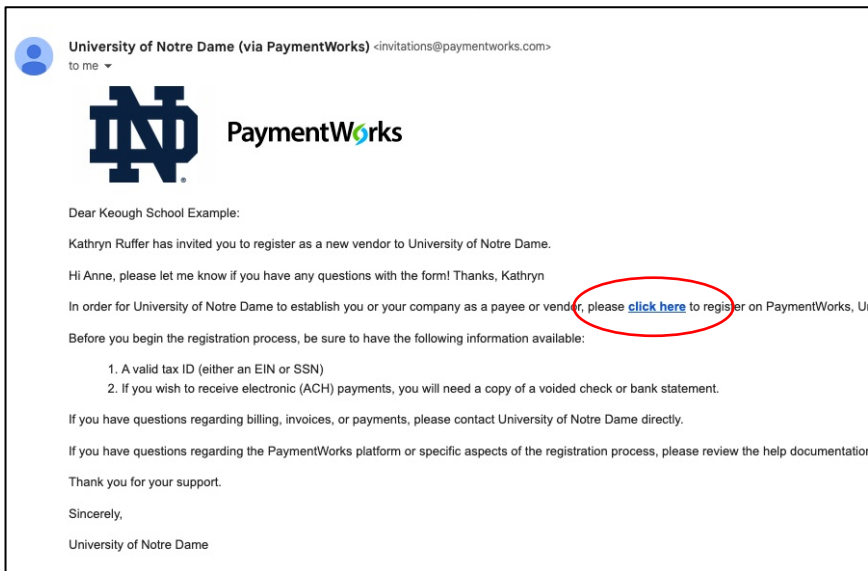
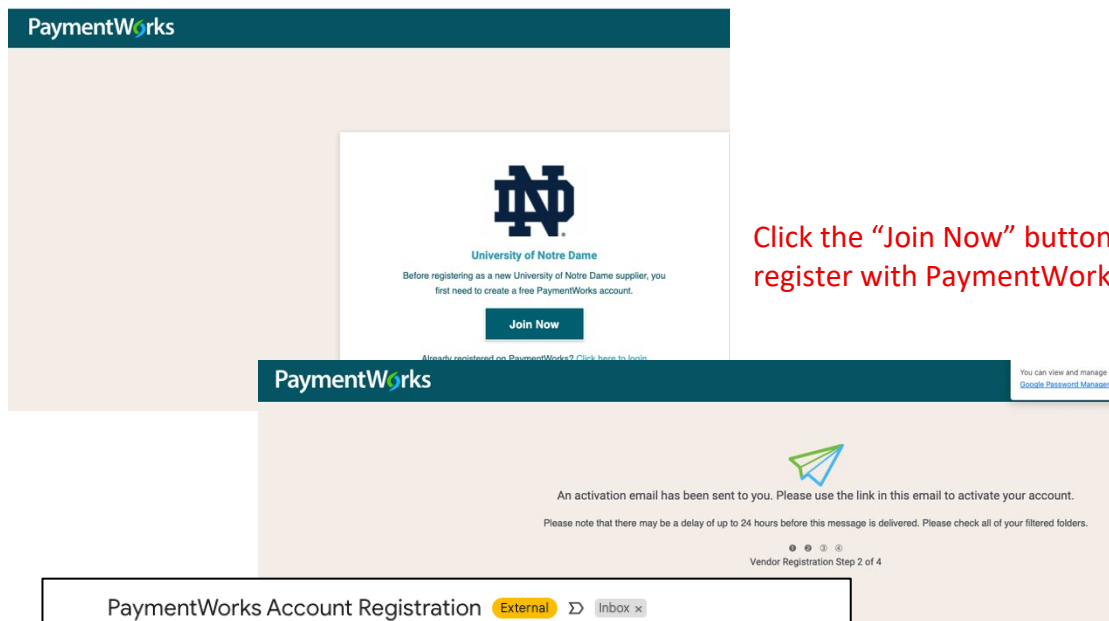


1. Email sent from PaymentWorks

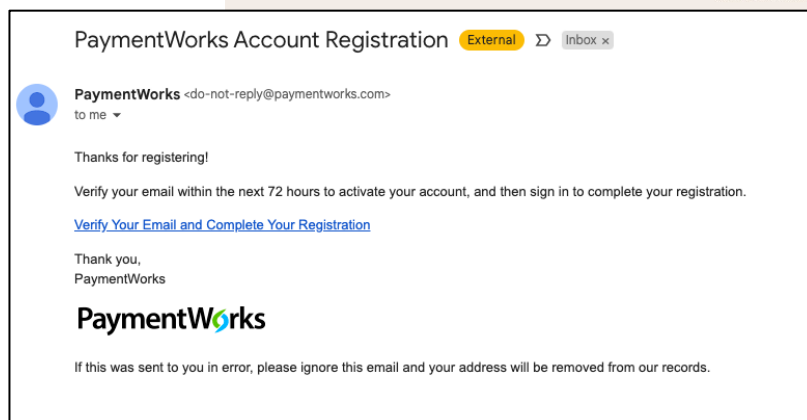


You will receive an email from invitations@paymentworks.com. If you do not see the email in your Inbox, be sure to check your SPAM folder.

2. Login or Create a PaymentWorks account



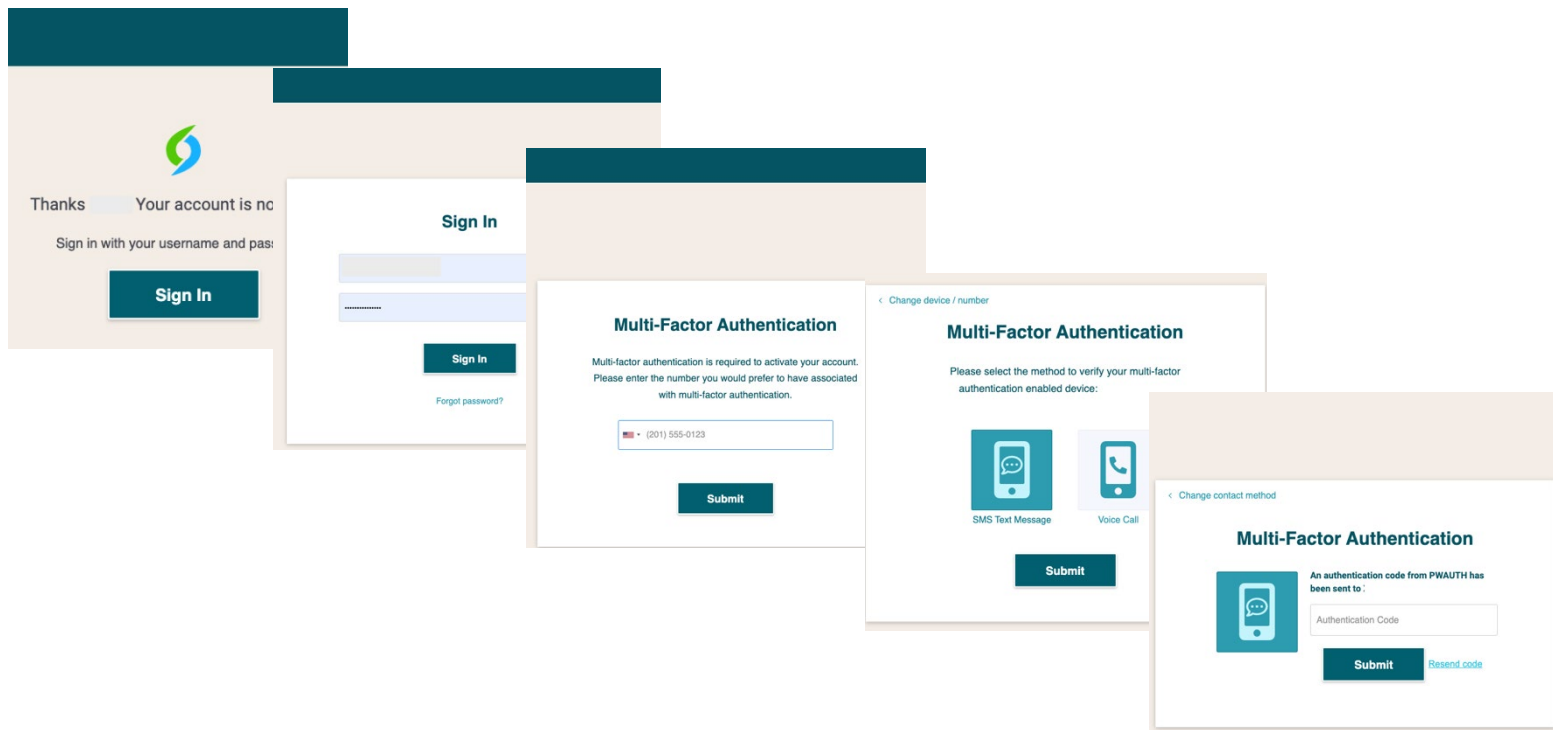
Click the “Join Now” button if this is the first time you register with PaymentWorks.



Within seconds, an email will be sent to you.

Be sure to click the ‘Verify’ link within 72 hours.

3. You are now able to sign in to PaymentWorks, using Multi-Factor Authentication



4. Once signed in, you will access the Home screen

Home

My Payee Profile

Customers

Invoices

Remittances

News

Messages

Account

Home

Customers

View your customers and pending registrations

Customer	Registration Submission Date ↓	Status
University of Notre Dame (Dev)		% Not Connected

Rows per page: 5 Total Rows: 1

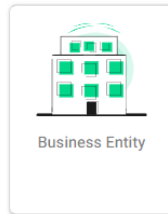
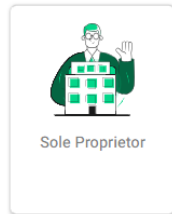
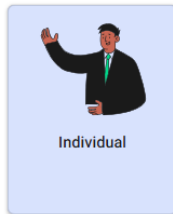
Go to Customers

Click "Start Registration" to begin entering your information

5. Enter your Tax Information

How should we classify you for payments and tax reporting?

This helps us gather the correct information to complete your profile and get you paid.



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Click “Individual” for payment of honoraria, or any other payment to an individual.

Where are you responsible for tax reporting?

For individuals, this is usually your home country.

For businesses and sole proprietors using a business tax ID, choose the country where your business is registered.

All fields marked with an asterisk (*) are required.

Country of Origin or Organization *

Q United Kingdom

Gather the following before starting to help you complete your form:

- ☒ Your Non-US Tax ID
OR Individual Taxpayer Identification Number (ITIN)
OR Social Security Number (SSN), if applicable
- ☒ Passport, if applicable
- ☒ Visa, if applicable
- ☒ Form 8233, if applicable
- ☒ W-8BEN

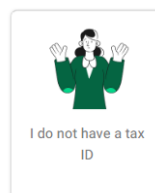
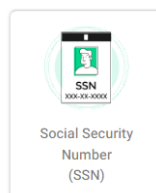
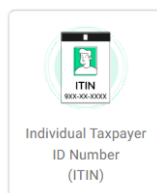
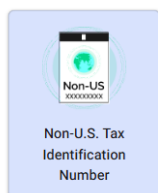
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Select your home country.

What is your tax ID type?

Provide your tax identification number.



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Select “Non-U.S. Tax Identification Number”, unless you have an Individual Taxpayer Identification Number (ITIN) or a United States Social Security Number (SSN). If you do not have a tax ID, select “I do not have a tax ID” and one will be generated for you for purposes of this form.

Provide your legal name and Tax Identification Number

These should be entered exactly as they appear in your tax documentation.

First Name *
Middle Name
Last Name *
Date of Birth * 
Tax Number (5-20 characters) *
Confirm Tax Number (5-20 characters...)

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Enter your First and Last Name as it appears for your country's official purposes and the Tax Number you use in your home country. If you selected "I do not have a tax ID" on the previous screen, this will be generated for you.

Additional Information for Non-US Individuals

If you will be performing services in the U.S., we need additional details to determine your tax obligations.

 I am performing services in the US	 I am <u>not</u> performing services in the US
--	---

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IMPORTANT NOTE: If you are performing services in the US, we will need your Visa and passport documents to process your payment(s). However, if you have already sent (or plan to send) these documents directly to your Notre Dame contact, you do not need to upload them here. Simply select "I am not performing services in the US" to continue the registration.

W-8 Certification

Upload your completed W-8 form to certify your tax status.

If you are a non-U.S. taxpayer, please upload your completed W-8 BEN form to certify your tax status.

You may download a blank W-8 BEN [here](#).

 Please upload W-8 BEN. *

Supports PDF or image files. File size limit is 5 megabytes.

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[Save and Continue](#)

Non-US citizens must submit a W-8BEN. The form can be downloaded by clicking on the blue “[here](#)” next to W-8BEN. Fill-out the form (see below) and upload the signed form by clicking “Choose File” on this screen. To avoid delay, **be sure the form is signed** before uploading.

Form W-8BEN		Certificate of Foreign Status of Beneficial Owner for United States Tax Withholding and Reporting (Individuals)		OMB No. 1545-1621	
(Rev. October 2021)		► For use by individuals. Entities must use Form W-8BEN-E.			
Department of the Treasury Internal Revenue Service		► Go to www.irs.gov/FormW8BEN for instructions and the latest information.			
		► Give this form to the withholding agent or payer. Do not send to the IRS.			
Do NOT use this form if:				Instead, use Form:	
• You are NOT an individual				W-8BEN-E	
• You are a U.S. citizen or other U.S. person, including a resident alien individual				W-9	
• You are a beneficial owner claiming that income is effectively connected with the conduct of trade or business within the United States (other than personal services)				W-8ECI	
• You are a beneficial owner who is receiving compensation for personal services performed in the United States				8233 or W-4	
• You are a person acting as an intermediary				W-8IMY	
Note: If you are resident in a FATCA partner jurisdiction (that is, a Model 1 IGA jurisdiction with reciprocity), certain tax account information may be provided to your jurisdiction of residence.					
Part I Identification of Beneficial Owner (see instructions)					
1 Name of individual who is the beneficial owner		2 Country of citizenship			
3 Permanent residence address (street, apt. or suite no., or rural route). Do not use a P.O. box or in-care-of address.					
City or town, state or province. Include postal code where appropriate.				Country	
4 Mailing address (if different from above)					
City or town, state or province. Include postal code where appropriate.				Country	
5 U.S. taxpayer identification number (SSN or ITIN), if required (see instructions)					
6a Foreign tax identifying number (see instructions)		6b Check if FTIN not legally required ☐			
7 Reference number(s) (see instructions)		8 Date of birth (MM-DD-YYYY) (see instructions)			
Part II Claim of Tax Treaty Benefits (for chapter 3 purposes only) (see instructions)					
9 I certify that the beneficial owner is a resident of _____ within the meaning of the income tax treaty between the United States and that country.					
10 Special rates and conditions (if applicable—see instructions): The beneficial owner is claiming the provisions of Article and paragraph _____ of the treaty identified on line 9 above to claim a _____ % rate of withholding on (specify type of income): _____.					
Explain the additional conditions in the Article and paragraph the beneficial owner meets to be eligible for the rate of withholding: _____					
Part III Certification					
Under penalties of perjury, I declare that I have examined the information on this form and to the best of my knowledge and belief it is true, correct, and complete. I further certify under penalties of perjury that:					
• I am the individual that is the beneficial owner (or am authorized to sign for the individual that is the beneficial owner) of all the income or proceeds to which this form relates or am using this form to document myself for chapter 4 purposes;					
• The person named on line 1 of this form is not a U.S. person;					
• This form relates to:					
(a) income not effectively connected with the conduct of a trade or business in the United States;					
(b) income effectively connected with the conduct of a trade or business in the United States but is not subject to tax under an applicable income tax treaty;					
(c) the partner's share of a partnership's effectively connected taxable income; or					
(d) the partner's amount realized from the transfer of a partnership interest subject to withholding under section 1446(f);					
• The person named on line 1 of this form is a resident of the treaty country listed on line 9 of the form (if any) within the meaning of the income tax treaty between the United States and that country; and					
• For broker transactions or barter exchanges, the beneficial owner is an exempt foreign person as defined in the instructions.					
Furthermore, I authorize this form to be provided to any withholding agent that has control, receipt, or custody of the income of which I am the beneficial owner or any withholding agent that can disburse or make payments of the income of which I am the beneficial owner. I agree that I will submit a new form within 30 days if any certification made on this form becomes incorrect.					
☐ I certify that I have the capacity to sign for the person identified on line 1 of this form.					
Sign Here ►					
_____ Signature of beneficial owner (or individual authorized to sign for beneficial owner)				_____ Date (MM-DD-YYYY)	
_____ Print name of signer					
For Paperwork Reduction Act Notice, see separate instructions. Cat. No. 25047Z Form W-8BEN (Rev. 10-2021)					

The W-8BEN form is required by the US Internal Revenue Service to certify your status as a foreign individual, for tax purposes.

The following are Required:

Part I. # 1, 2, 3, 8

Part III. Sign, Date, and Print Name

The following will only be needed if it applies to your case:

Part I. #4, 5, 6a, 6b, 7

Part II. If you worked inside the US and would like to benefit from a Tax Treaty.

For additional information about this form, consult the US Internal revenue Service website:

<https://www.irs.gov/pub/irs-pdf/iw8ben.pdf>

6. Enter your Personal Information and Addresses

Personal Information

This information is necessary for identity verification and communication purposes.

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Provide your phone number and email address. (Note that website URL is not required)

Description of Reason for Payment

Briefly describe the type of services you are providing or the reason you're being paid. This helps your customer understand the nature of the payment.

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Provide a short description such as “honoraria” or “travel expense reimbursement”.

Enter Your Primary Address

Enter your primary business address. This will be used for all official correspondence.

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Enter your home address

Enter Your Remittance Address

This is the address where payments should be sent.

Note: You are only required to enter one remittance address at this time. Once your profile is created, you will have the ability to manage and add additional remittance addresses as needed.

☒ Same as primary address

Enter Contact Details for Accounts Receivable

Please provide the contact details for Accounts Receivable related to this address. This should be someone responsible for accounts receivable who can handle billing and payment inquiries.

Contact Name *

Contact Email *

Contact Phone *

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Your Remittance Address can be the same as your home address. You can select “Same as primary address” for it to be automatically completed. Please provide your name, email and phone number.

Enter Your Order Address

This is the address where purchase orders should be sent. If it's the same as your primary and/or remittance address, you may select the checkbox that applies to skip additional entry.

Note: You are only required to enter one order address at this time. Once your profile is created, you will have the ability to manage and add additional order addresses as needed.

☒ Same as primary address

☐ Same as remittance address

☒ Order address will use the same address as your primary address.

Enter Contact Details for Order Address

Contact Name *

Contact Email *

Contact Phone *

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[Save and Continue](#)

Your Order Address will again be the same as your home address. You can select “Same as primary address” for it to be automatically completed. Please provide your name, email and phone number.

7. Enter the Payment/Bank information for Wire payments

In which country is your bank located?

This helps us choose the correct banking details and payment options for your account.

Country of Origin or Organization *

Q United Kingdom ▼

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Next

How would you like to receive payments?

 **Wire** RECOMMENDED

Same-day bank transfer. Domestic and international. Bank fees may apply. Net 30

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If your bank is located outside the United States, you will be asked to select “Wire”.

Enter your bank details

Bank Validation for Wire to **United Kingdom**

Choose Your Banking Format:



SWIFT/BIC + ACCOUNT NUMBER

The BIC for Great Britain and Northern Ireland can be up to 11 digits. An example of the BIC is APNIGB21XXX.

The Account number for Great Britain and Northern Ireland can be up to 8 digits. An example of the Account number is 16838696.



IBAN

The IBAN for Great Britain and Northern Ireland can be up to 22 digits. An example of the IBAN is GB50LOYD30940816838696.

Account Holder Name *

SWIFT/BIC *

Account number *

Validate Bank Details

Note that you can provide either the SWIFT/BIC + Account Number or the IBAN.

Bank Details

We'll use this information to deposit funds into your foreign bank account. Please provide the required validation documentation.

 [Select a Bank Validation File *](#)

Accepted files: PDF, JPG, PNG

Instructions: Please ensure the validation file you are uploading is in English and that the bank information in it matches what has been entered on this form.

The document must clearly show:

- Your company name
- Your full bank account number (must be visible, not truncated or grayed out)
- A routing number that matches the payment method you selected (ACH or Wire)

Accepted documents:

- A voided check preprinted with your company name
- A bank statement showing the account and routing numbers
- A letter on bank letterhead with the required details
- A voided deposit slip preprinted with your company name
- A letter on your company's letterhead including the full bank account and routing number

Warning: An invalid file may cause your registration form to be returned and delay your registration approval process.

- ☐ Customers using PaymentWorks and the financial institution named herein are authorized to automatically deposit monies to my account.

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You may upload a copy of a bank statement with all financial information crossed out. The Name of the Account holder and the last digits of the account number must be visible and match the information entered above.

Where should we send payment notifications?

Where should we send payment notifications?

Payment Notification Email Address *

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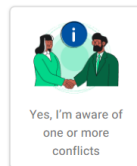
[Save and Continue](#)

We will send notification of the wire transfer to your email address.

8. Answer "NO" to the following miscellaneous questions

Are you aware of any potential conflicts of interest with University of Notre Dame (Dev)?

This includes any known connections between people at your organization and individuals affiliated with University of Notre Dame (Dev), even if you were not directly involved but are aware of the relationship.

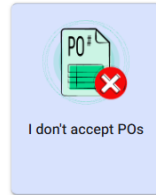
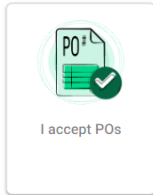


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[Save and Continue](#)

Do you or your business accept Purchase Orders (POs)?

This helps us determine if you're set up to receive and process Purchase Orders from customers.

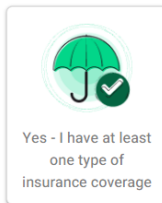


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Save and Continue

Do you have any insurance coverage to provide?

We'll help you create a digital record ("coverage card") for each type of insurance coverage you hold.



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Save and Continue

9. Final Step

Additional Information

All fields marked with a red asterisk (*) are required fields.

All other fields are optional.

Please contact the University of Notre Dame Procurement HelpDesk at buy@nd.edu if you have any questions specifically related to the purchase order questions.

Supplier Category*

Select an Option

Foreign Individual

Save and Continue

Select "Foreign Individual" and then be sure to select "Save and Continue" to submit the form.

- Home
- My Payee Profile
- Customers
- Invoices
- Remittances
- News
- Messages
- Account

Home

Customers

View your customers and pending registrations

Customer	Registration Submission Date ↓	Status
University of Notre Dame (Dev)	07/09/2026	Registration In Review

Rows per page: 5 Total Rows: 1

Go to Customers

Once it is submitted, you will be redirected to the Home screen where you will see "Registration in Review"