

As a prospective supplier to Sherwin-Williams you want to make sure your information is accurate. The Supplier Portal lets you easily view and maintain your company's records with self-service profile management. The following registration process is the first step to be added into the system. Once approved you will gain access to your company's profile and be able to self-maintain your information.



High Level Process Flow:



An Invitation request is initiated by a Sherwin-Williams buyer

Below is a sample registration invitation email notification which the intended supplier would get.



As a supplier contact follow the "Supplier Registration Application" Link to complete the registration form.

Upon clicking the link, below login page will display:



First Prompt:

SHERWIN-WILLIAMS.						
	Welcome to the QA B2B Portal					
	Log In User ID					
	Password					
	Forgot Password?					
	Manage Account					
	Privacy Policy Copyright ©2020 The Sherwin-Williams Company					

Fill in UserID and Password provided in the invitation email message:

SHERWIN-WILLIAMS.				
Welcome to the QA B2B Portal				
Log In User ID				
CONTACTNAME@SUPPLIER.COM				
Forgot Password?				
Log In				
Manage Account				
Privacy Policy Copyright ©2020 The Sherwin-Williams Company				



Second Prompt: Enter your credentials once again:

SHERWIN-WILLIAMS.				
Manage Account				
To change your password please provide your User ID and current password, then click the submit button to continue. User ID CONTACTNAME@SUPPLIER.COM				
Password				
Submit Cancel				
Having trouble? Visit our FAQ section Copyright © 2020 The Sherwin-Williams Company.				

Enter a new password of your choice.

SHERWIN-WILLIAMS.				
Manage Account				
In order for our partners and retailers to manage their own web account, we allow you to update your password. Read about our password suggestions 1 New Password Confirm Password Submit Cancel				
Having trouble? Visit our FAQ section Copyright © 2020 The Sherwin-Williams Company.				

Note: This password will be used going forward for logging into the supplier portal.



A Success message will be displayed when complete.

SHERWIN-WILLIAMS.			
Success			
You have successfully completed modifications to your web account.			
Back to Application			
Having trouble? Visit our FAQ section			
Copyright © 2020 The Sherwin-Williams Company.			

Click on "Back to Application"

Enter your initial user ID and the newly created password:

Sherwin-Williams.					
Welcome to the QA B2B Portal					
Log In User ID					
Password					
Forgot Password?					
Privacy Policy Copyright ©2020 The Sherwin-Williams Company					
Copyright ©2020 The Sherwin-Williams Company					



Acknowledge the Terms of Use:

SHERWIN-WILLIAMS.				
Terms and Conditions				
We may the the target of the start of t				

Now that you have passed the login process, you can begin to fill out the registration form:

SHERWIN-WILLIAMS. iSupplier Portal			📄 Close
Prospective Supplier Registration:	Current Status		Respond
Thank you for registering with us. Here's the current	status of your registration request.		×
Registration Details and Status			
Company Name	SUPPLIER NAME	Status Supplier to	Provide Details
Contact Information			
Email	CONTACTNAME@SUPPLIER.COM	Phone Area Code	
First Name	FIRSTNAME	Phone Number	
Last Name	LASTNAME	Phone Extension	
Status History			
重 2			
Date	Status		Note
21-SEP-2020	Invitation Sent		

Click on "Respond" button to begin completing your registration process



SHERWIN-WILLIAM5. iSupplier Portal			📄 Close
Basic Information Prospective Supplier Registration	Company Details	Additional Information	Attachments Step 1 of 4 Negt
* Indicates required field			×
Either Taxpayer ID or Tax Registration Number must be provided.			
* Company N * Tax Coi Tax Registration Nu Taxpay Dun & Bradstreet Nu Contact Information	ame SUPPLIER NAME Enter your Trade or OBA name in UPPERCASE. * This is your business name as listed on your involce to customers netry netry Non-US firms should provide their Tax Registration Number. Provide their Tax Registration Number. Requested format is XX-XXXXXX for EIN or XXX-XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	SN.	
First N * Last N * Phone Country/Area * Phone Nu Phone Exter	Imail CONTACTNAME@SUPPLIER.COM Iame FIRSTNAME ILASTNAME US, Canada and Jamaica format: XXX for area code only, "Enter country code here if it is a value other than 001" US, Canada and Jamaica format: XXX (no dashes) Sion		

- Note : Please read carefully the notes mentioned under the field. This will help you in following guidelines and naming conventions.
- > The fields marked with '*' are mandatory.

Company Details Instructions:

- 1) Enter Company name in UPPERCASE. Mandatory
- 2) Select Tax country
- 3) Tax Registration Number field is applicable for Non-US suppliers
- 4) Tax Payers ID is applicable for US suppliers
- 5) Enter the DUNS & Bradstreet Number as applicable



Contact Information Instructions:

Contact Information	
Email	CONTACTNAME@SUPPLIER.COM
* First Name	FIRSTNAME
* Last Name	LASTNAME
* Phone Country/Area Code	
	US, Canada and Jamaica format: XXX for area code only. * Enter country code here if it is a value other than 001 *
* Phone Number	
	US, Canada and Jamaica format: XXX XXXX (no dashes)
Phone Extension	

1) Give the Supplier Contact Primary user's email address

- 2) Input the supplier user's First Name
- 3) Input the supplier user's Last Name
- 4) Input supplier user's Phone Country/Area Code
- 5) Input supplier user's Phone number
- 6) Optionally give the Phone Extension

Click on 'Next' button.

SHERWIN-WILLIAMS. iSupplier Portal			📄 Close 🛛 🔅
Basic Information	Company Details	Additional Information	Attachments
* Indicates required field			Step 1 of 4 Next

Enter Company Details:

SHERWIN-WILLIAMS.	iSupplier Portal					R	Close	٩
	Basic Information		Company Details	Add	ilitional Information	Attachm	ients	
Prospective Supp	lier Registration: Additional E	etails				Save For Later B	ack Step 2 o	of 4 Next
		* Supplier Type Company Name Tax Country Tax Registration Number Taxpayer ID DUNS Number Alternate Supplier Name Note to Buyer	RAW MATERIAL SUPPLIER NAME United States 343566777889					
Address Book								
Provide the remittance add	fress for your firm. Additional addresses may all	so be added, but a minimum o	one address is required in order to submit this registration.					
Create 💢 🈂					-		-	
CLEVELAND	101 STREET NA	ME, CLEVELAND OH 44115	Jnited States		RFQ Only	Update 🧷	Dele	te
Contact Directory	teeree is required for your firm Diagonallek k	he lindate button and come	ate all details for that initial person's contact information					
The As wast one contact	a person is required to your lim. Please click t	ne opulate putton and comp	are an details for that initial person's contact information.					
Create M 2	Lost Name	Dhana	Emoli		Beruises Liess Assount	Undete	Delete	
FIRSTNAME	LASTNAME	216-566 2000	CONTACTNAME@SUPPLIER.COM		Requires User Account	Opdate	Delete	

Instructions: Fill in additional details



Enter Supplier Address:

Click on Create button below or Yellow Pencil to update exiting one.

dress Name	Address Details			Purpose	Update	Delete
EVELAND	101 STREET NAME, CLE	EVELAND OH 44115 United States		RFQ Only	1	î
BIOW Supplier Add	lress Deta	ils page will display:			1	
Jpdate Address				S TIP **	* Please confirm that the addres	s is accurate
Indicates required field						
	* Address Name	CLEVELAND	* Phone Country/Area Code			
		Enter complete address in UPPERCASE. Address name should be the city referenced.		US, Canada and Jamaica format: XXX for area * Enter country code here if it is a value other t	a code only than 001 *	
		Example 1: first Cloveland address: CLEVELAND01.	* Phone Number			
		Example 2: second Cleveland address: CLEVELAND02.		US, Canada and Jamaica format: XXX XXXX	(no dashes)	
	Country	United States V	Fax Area Code			
	* Address Line 1	101 STREET NAME	Fax Number			
	Address Line 2		Email Address	Provide a neneral email address where you we	nuld like to receive Purchase	
	Address Line 3			Orders.	July into to receive Pullifiabe	
	Address Line 4			Purchasing Address		
	* City/Town/Locality	CLEVELAND		Purchase Orders will be sent to locations	designated as Purchasing	
	County	CUYAHOGA		Addresses. Purchasing Addresses must b for that location.	e the physical street address	
	* State/Region	OH	_	Payment Address		
		Please use valid US State and Territory abbreviations.		Invoice Payment will be remitted to Paym Payment Address may be a physical street	en Addresses via USPS. at address or PO Box.	
	Province			RFQ Only Address		
	* Postal Cada	Hease use valid Canadian Province and Territory abbreviations.		RFQ Only Addresses are sales office loca Request For Proposals	tions designated to receive	
	Postal Code	Please add zip plus 4 for all United States Postal Codes.		condensary con a cohorana		
dditional Attributes						
NOAM MSA						
	Stores Supplier N	lumber (MSA#)				

- 1) Give an address name in uppercase, It should be the city referenced.
- 2) Input the country of the supplier.
- 3) Input the Supplier Address Line 1 field.
- 4) Optionally fill in the Address line 2, Address Line 3 & Address Line 4 fields as applicable.
- 5) Input the City/ Town/ Locality.
- 6) Input the County as applicable.
- 7) Input the Supplier State/Region as per the US state and territory abbreviations.
- 8) Give the Postal Code.
- 9) Input the Phone Country/ Area code, enter the country code here if it is other than '001'
- 10) Input the Phone number in US format with no dashes.
- 11) Optionally fill in the Fax Area code; Fax Number & email address (give a general email address where you would like to receive the purchase orders.)
- 12) Check in the purpose of the supplier address for Purchase orders (Purchase orders will be sent to this address) as well as Payment address and uncheck the RFQ only address.



Update the contact directory of the Supplier User Contact:

Click on update as shown below

Contact Directory					
TIP At least one contact pe	rson is required for your firm. Please click	the Update button and complete all	details for that initial person's contact information.		
Create 💢 🎜					
First Name	Last Name 🛆	Phone	Email	Requires User Ac	count Update Delete
FIRSTNAME	LASTNAME	216-566 2000	CONTACTNAME@SUPPLIER.COM	•	
					X
SHERWIN-WILLIAMS. is	upplier Portal				Dise
Update Contact					Cancel App
* Indicates required field					
Contact Title	\checkmark	* Phone Country/Area Code	216		
* First Name	FIRSTNAME		US, Canada and Jamaica format: XXX for area code only. * Enter country code here if it is a value other than 001 *		
Middle Name		* Phone Number	566 2000		
* Last Name	LASTNAME		US, Canada and Jamaica format: XXX XXXX (no dashes)		
Alternate Name		Phone Extension			
Job Title		Alternate Phone Area Code			
* Department	~	Alternate Phone Number			
Contact Email	CONTACTNAME@SUPPLIER.COM	Fax Area Code			
URL		Pax Number			
Supplier User Account	t				
Create User Account Fo	r The Contact				
Select 'Requires User Accourt	If for those in your firm who will need access to up	date your firm's Supplier Profile information.			
Addresses For the Co	ntact				
STIP Please select the app	opriate work address location for this pers	on. At least one address must be assoc	ated with this contact.		
🔜 🗉 😂					
Address Name			Address Details		Remove
No results found.					

- 1) Update the Job Title and Department.
- 2) If needed, please add other contacts by pressing 'Create' button
- 3) Select/Unselect' Requires User Account' for those in your firm who will need access to update your firm's Supplier Profile information.



Update Business classification:

Check the boxes whichever are applicable for your business.

assification	Applicable	Minority Type	Certificate Number	Certifying Agency	Expiration Date
Small Disadvantaged Business					6
3 Labor Surplus Area Firm					60 C
Q DoT Certified Disadvantaged Business Enterprise					60 6
lub Zone					60 6
finority Owned		Native American 🔻			60 C
ervice-disabled Veteran Owned					60
mall Business					6°a
eteran Owned					5°
/omen Owned					60 C

Update Products and Services:

Code No results found.		ucts and Services	Delete
SHERWIN-V	VILLIAMS. iSupplier Portal		🕵 Close
Add Proc	lucts and Services: : (SUPPLIER NAME)		Cancel App
 Browse Al Seach for 	Products & Services Specific Code and Product		
12			Rows 1 to 30
Code	Products and Services	View Sub-Categories A	pplicable
1110	Minerals and ores and metals		
1111	Earth and stone	2 ₇₀	
1214	Elements and gases		
1216	Additives	20	
1217	Colorants	<i>b</i>	
1218	Waxes and oils		0
1010	Solvents	30	0
1219		20	
1235	Compounds and mixtures		
1219 1235 1311	Compounds and mixtures Resins and rosins and other resin derived materials	70	

Instructions:

/

- 1) Check if you are browsing all products and services or search for specific code and product as shown above
- 2) Click on the view Sub-Categories
- 3) Select the category under which the supplier or the business they come under.

Click on 'Applicable' checkbox and Press 'Apply' button.

Add Products and Services: 1110 :Minerals and ores and metals (TESTSUPPLIER)						
X 2						
Code	Products and Services	View Sub-Categories	Applicable			
00	General					
15	Minerals					

Return to Parent Category



Update Banking Details (Mandatory):

nk Account Number	Currency	Bank Account Name	Bank Name	Bank Number	Branch Name	Branch Number	Update Re
results found.							
HERWIN-WILLIAMS. iSupplier P	ortal						Close
Add Products and Services: : (SUPPLIER	IAME) >						
Create Bank Account							Canc
* Indicates required field							
		* Country	\sim				
			Account is used for foreign payr	ments			
			Account definition must include bank a	and branch information.			
Bank			Br	ranch			
New Bank			(New Branch			
 Existing Bank 				 Existing Branch 			
	Bank Name				Branch Name		
					Routing Number		
					SWIFT Code		
					branen type AbA	-	
Bank Account							
		* Account Number					
		Account Name					
		Currency	\sim				
Show Account Details							
Comments							

Instructions:

- 1) Enter your banking detail
- 2) Click on applicable checkbox and press 'Apply' button.
- 3) Fill out EFT Agreement Or/ And PNC VCC program form. You will need to attach at Attachment Step. Reference page 12.

Banking Details								
At least one entry is required.								
Create 🐹 😂								
Bank Account Number	Currency	Bank Account Name	Bank Name	Bank Number	Branch Name	Branch Number	Update	Remove
3344434344			CITI2		BRANH2		1	1
								_

Click on 'Next' button to move to 'Additional Information' page:

Save For Later Back Step 2 of Next



Supplier Profile Attributes

Enter Employee contacts:

Sherwin-Williams Employee Contacts							
* Contact Name	*Email	Delete					
MR TEST SHERWIN	TEST@SHERWIN.COM	Î					

Instructions:

- 1) Enter Sherwin Williams contact name.
- 2) Input Sherwin Williams contact email id.

Enter Company ownership:

Basic Information	Company Details	Additional Information		Attachments	
Supplier Profile Attributes	S		Save For Later	Back Step 3 of 4	Ne <u>x</u> t
* Indicates required field					
Supplier Registration					
Company Ownership					
	* Legal Entity Name	TESTSUPPLIER LLC			
	* Logal Structure	Enter n UPPERCASE This is Legal Name as listed on your W0/W8 from for income tax filing purpose.			
	* Business Type	Manufacturer			
	Is the company at least 51% owned by US Citizens?	Yes v			
	Principal Owner	Please specify if your company is at least 51% owned or controlled by one or more US Citizens ABC Please and the same of Benched Owner Survey company is at a Company in at a			
	Are you listed on the US Federal Government's System for Award Management (SAM)?	For smore information, please visit www.sam.gov			

- 1) Enter the Legal Entity Name under which the Supplier is registered. (Enter in uppercase. This is the Legal name as listed on your W9/WS for income tax filing).
- 2) Input the Legal Structure (Select from the drop down as applicable).
- 3) Select the Business type of the supplier as applicable.
- 4) Select if the company is at least 51% owned by a US citizen (Yes/No).
- 5) Input the Principal owner of the business if the company is not a corporation.
- 6) Yes/No if you are listed on the US federal Government's System for Award Management(SAM)



Enter Parent Company Information (Optional):

Company Ownership - Parent Company Information						
Organization Type	Headquarters and Single Location •					
	If your firm is not a subsidiary of another company, please select 'Headquarters or Single Location'. Otherwise select the appropriate Organization Type which describes your firm and provide information about your parent company below.					
Parent Company Country	Q L					
Parent Company Name						
Parent Company Address						
City						
State/Province/Region						
	Please use valid US and Canadian State, Province and Territory abbreviations.					
Postal Code						
Parent Company Phone						
	Include Country Code (Requested format for US, Canada and Jamaica: XXX-XXXX)					

Instructions:

- 1) Enter the organization type of the parent company.
- 2) Country in which the parent company is located in.
- 3) Input the name of the parent company.
- 4) Enter the city as applicable
- 5) Enter the State/Province/Region.
- 6) Enter the Postal code of the parent company.
- 7) Enter the Parent company's phone number.

Enter General Business Information (Optional):

General Business Information



- 1) Enter the number of employees in your organization
- 2) Input the Year established and Year of incorporation
- 3) Enter the country of Incorporation
- 4) Yes/No is your company Publicly Traded
- 5) Enter your stock symbol
- 6) Enter your company's website.



Risk Management (Applicable for Raw Material type suppliers):

Risk Management

Risk Management –General Questions

Does your company have a published Child and Forced Labor Polic?? Ores No Does your company have a documented Safety Program?

Risk Management:

- 1) Select Yes/No, Does your company have a published Child and Forced Labor policy?
- 2) Select Yes/No, Does your company have a documented Safety program?

Plant Region:

	Plant Region: Where are your plants located?				
	±				
	*Plant Name	*Country or Territory (ISO Code)	* State, Province or Region	*City	Delete
	XYZ PLANT	US 🚽 Q	GA	ATLANTA	Î
	Ports: If importing product, which shipping po	orts does your company utilize?			
토 월					
	*Port Usage Indicator Port N	Name	Port Code	Port Country or Territory (ISO Code)	Delete
	Primary Indicate 'Not Applicable' if no ports utilized Use Por	ut Name from http://www.worldportsource.com/countries.php	Use UIVLOCODE from http://www.worldportsource.com/countries.php	Q,	Î

Instructions:

- 1) Enter Plant name
- 2) Input the country or territory (ISO Code)
- 3) Input the State/Province or Region
- 4) Enter the City where it is located

** Use '+' sign to add more Plants.

Port: If importing products, which shipping port does your company utilize?

- 5) Enter Port Usage Indicator If it is not applicable, then select 'Not Applicable'
- 6) Input the Port Name
- 7) Input the Port Code
- 8) Enter the Port country or territory (ISO Code)** Use '+' sign to add more Ports.

Click on 'NEXT' button to move to the attachments window.



SHERWIN WILLIAMS.	iSupplier Portal			Close
	Basic Information	Company Details	Additional Information Ilicking the Submit button, you are certifing that all information provided is complete, current and accrurate for this regis	Attachments tration. Submit Back Step 4 of 4
Attachmen © TIP Remind 1. W9 (U 2. Electr 3. Divers 4. Insura 5. ISO C 6. Consu 7. Perso * Supplie	ts er to all suppliers to attach the following documents: IS Companies) or W8 (Foreign Companies) // doing business onic Funds Transfer (EFT) Form (This form is available in She sity Certification rus Certificates uiting Services Agreement, if applicable inally identifiable information Agreement, if applicable ers providing goods or services within the United States are re-	In the US * win-Williams Website.) quired to upload and attach a current W9 for US bas	ied suppliers or W8 for non-US suppliers. Blank copies may be obtained from the IRS website (www.irs.gov).	
Add/View A	ttachment Files			

Note: Please read carefully the list of documents needed for your Registration.

Click on 'Add/View Attachment Files' button to upload the documents.

Below page will display:

Add Attachmen	t	×
Attachment Type Title	File ~	
Description		
Category	W9 ~	
*File	Choose File No file chosen	
	Cancel Add Another	Apply

- 1) While you upload a document, give it a title and a description of the uploaded document relates to the requested list of documents.
- 2) Input the Document category from the drop down
- 3) Enter the Expiration date of the document if applicable
- 4) Choose a file from where it has been stored.
- 5) Click on Apply.

Confirmation	×
Attachment 2020-09-21 12: has been added successfully but not committed; it would be committed when you commit the rest of the curre transaction.	
	Ok



Review & Acknowledgment:

Review & Acknowledgement

Title	Description	File Name	Reviewed & Acknowledged
PO General Terms and Conditions	Purchase Order General Terms and Conditions	Sherwin PO Terms & Conditions.xps	
SW Conflict Mineral Policy	Sherwin-Williams Conflict Mineral Policy	SW Conflict Mineral Policy.pdf	
		1	

Instructions:

- 1) Click on the files to download and review them
- 2) Check the box Reviewed & Acknowledged after reading all the listed documents.

Click on 'Submit' button

SHERWIN WILLIAMS.	i Supplier Portal		1	Close
				•
	Basic Information	Company Details	Additional Information	Attachments
		ITIP By clicking the 'Submit' but	tton, you are certifing that all information provided is complete, current and accrurate for this registra	tion. Submit Back Step 4 of 4

After Submitting you will get a Confirmation message shown below.

📭 Confirmation				
Thank you for registering your company. Your registration has been submitted for approval and you will be notified of your registration status via email in due course.				

Supplier Contact will receive below email:

Sample Email:

From: Workflow Mailer - <NoReplyTo@sherwin.com> Sent: Thursday, September 10, 2020 11:35 AM To: FirstName LastName <Contact@Supplier.com> Subject: For Your Information: Sherwin-Williams Supplier Collaboration Network: Registration Submitted

- To FirstName Lastname
- Sent 10-SEP-20 11:34:16
- ID 2646244

You have submitted information to register your firm as a prospective supplier to The Sherwin-Williams Company through the Sherwin-Williams Supplier Registration Application.

Now that you have completed your registration form, the information you provided will be validated by Sherwin-Williams to confirm its accuracy and compliance with Sherwin-Williams policies. This process takes approximately 3-5 business days after receipt of all requested documentation. During this time, you may be contacted to provide additional information. Use the following link to revise and/or track the progress of your registration:

Prospective Supplier Registration Status Page

If you have questions regarding your registration, please send an E-mail to Sherwin-Williams, at supplierregistration@sherwin.com For general information about Sherwin-Williams' Supplier Registration Program or to provide feedback, please send your comments to supplierregistration@sherwin.com

Thank you for your interest in partnering with The Sherwin-Williams Company