

SC BOO\$T Payment Guide

1

Once you receive your email from donotreply@dss.sc.gov click the link in the email.

2

Here you will fill in your case number that is included in the email.

3

Then fill in the last 4 of your SSN.

4

In the yellow box at the top of the page is a link to a W-9 click on that link that will open a new page.

Click "<https://www.irs.gov/pub/irs-pdf/fw9.pdf>"

DSS Provider Portal

EN ES

/BOO\$T/Bonus Confirmation

SC BOO\$T Wage Enhancement Bonus Confirmation

Attention!

BEFORE you begin, you will need to complete an I.R.S. Form W-9. The completed Form W-9 must be uploaded in order for you to complete your authorization. You can download the blank form from the I.R.S. here: <https://www.irs.gov/pub/irs-pdf/fw9.pdf>

Case Confirmation

To confirm your identity, please provide your case number and the last 4 digits of your SSN:

Case Number: * Last 4 Digits of Your SSN: *

Case Number is required

DSS SOUTH CAROLINA DEPARTMENT OF SOCIAL SERVICES Privacy Disclaimer Report Fraud

5

This page will allow you to fill in your information and once complete save it to your computer.

Form W-9
Request for Taxpayer Identification Number and Certification
Give Form to the requester. Do not send to the IRS.

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

2. Business name/registered entity name, if different from above

3. Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.

4. Exemptions (boxes apply only to certain entities, not individuals; see instructions on page 3).

5. Address (number, street, and apt. or suite no.) See instructions.

6. City, state, and ZIP code

7. List account number(s) here (optional)

8. Requester's name and address (optional)

9. Social security number

10. Employer identification number

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and

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 Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and

3. I am a U.S. citizen or other U.S. person (defined below); and

4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Sign Here

Signature of U.S. person Date

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN). To report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1099-T (tuition)
- Form 1099-C (cancelled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding later.

Cell No. 10231X Form W-9 (Rev. 10-2018)

6

Then go back to the SC BOO\$T Wage Enhancement Bonus Confirmation page and click the blue "Authenticate" box. Once you click "Authenticate" it will then take you to the next page.

7

Here you will enter your full SSN (twice).

8

Then click the blue "select your file" box so that you can upload your completed W-9 that you just saved to your computer.

DSS Provider Portal EN ES

/BOO\$T/Bonus Confirmation

SC BOO\$T Wage Enhancement Bonus Confirmation

Attention!
BEFORE you begin, you will need to complete an I.R.S. Form W-9. The completed Form W-9 must be uploaded in order for you to complete your authorization. You can download the blank form from the I.R.S. here: <https://www.irs.gov/pub/irs-pdf/fw9.pdf>

Case Confirmation
To confirm your identity, please provide your case number and the last 4 digits of your SSN:
Case Number: * Last 4 Digits of Your SSN: *

Authorization
Name: Phone: Mailing Address:
Please confirm that the above information is correct. If it is correct, then please provide your complete SSN below:
SSN (digits only): * Re-enter SSN: *
Complete SSN is required

Now use the Select W-9 File button to upload a copy of your I.R.S. Form W-9.

DSS SOUTH CAROLINA DEPARTMENT OF SOCIAL SERVICES Privacy Disclaimer Report Fraud
Copyright © 2024 South Carolina Department of Social Services

9

Once you have uploaded your W-9, click the blue submit button below. Please allow 6 to 8 weeks for your payment to be mailed directly to you.

DSS Provider Portal EN ES

/BOO\$T/Bonus Confirmation

SC BOO\$T Wage Enhancement Bonus Confirmation

Attention!
BEFORE you begin, you will need to complete an I.R.S. Form W-9. The completed Form W-9 must be uploaded in order for you to complete your authorization. You can download the blank form from the I.R.S. here: <https://www.irs.gov/pub/irs-pdf/fw9.pdf>

Case Confirmation
To confirm your identity, please provide your case number and the last 4 digits of your SSN:
Case Number: * Last 4 Digits of Your SSN: *

Authorization
Name: Phone: Mailing Address:
Please confirm that the above information is correct. If it is correct, then please provide your complete SSN below:
SSN (digits only): * Re-enter SSN: *
Complete SSN is required

Now use the Select W-9 File button to upload a copy of your I.R.S. Form W-9.

DSS SOUTH CAROLINA DEPARTMENT OF SOCIAL SERVICES Privacy Disclaimer Report Fraud
Copyright © 2024 South Carolina Department of Social Services