

44444	For Official Use Only ▶ OMB No. 1545-0008		
a Employer's name, address, and ZIP code EXECUTIVE SOFTWARE GUILD INC 200 GREAT RD STE 225 BEDFORD MA 01730		c Tax year/Form corrected 2019 / W-2	d Employee's correct SSN
		e Corrected SSN and/or name (Check this box and complete boxes f and/or g if incorrect on form previously filed.) <input type="checkbox"/> Complete boxes f and/or g only if incorrect on form previously filed ▶	
		f Employee's previously reported SSN 	
b Employer's Federal EIN 27-3051304		g Employee's previously reported name 	
		h Employee's first name and initial RAJASHEKAR REDDY	Last name JANKI
		Suff. 14185 DALLAS PARKWAY SUITE 300 DALLAS, TX 7524 i Employee's address and ZIP code	
Note: Only complete money fields that are being corrected (exception: for corrections involving MQGE, see the General Instructions for Forms W-2 and W-3, under Specific Instructions for Form W-2c, boxes 5 and 6).			
Previously reported		Correct information	
1 Wages, tips, other compensation	1 Wages, tips, other compensation	2 Federal income tax withheld	2 Federal income tax withheld
3 Social security wages 10,580.00	3 Social security wages 4,980.00	4 Social security tax withheld 655.96	4 Social security tax withheld 308.76
5 Medicare wages and tips 10,580	5 Medicare wages and tips 4,980.00	6 Medicare tax withheld 153.41	6 Medicare tax withheld 72.21
7 Social security tips	7 Social security tips	8 Allocated tips	8 Allocated tips
9	9	10 Dependent care benefits	10 Dependent care benefits
11 Nonqualified plans	11 Nonqualified plans	12a See instructions for box 12	12a See instructions for box 12
13 Statutory employee <input type="checkbox"/> Retirement plan <input type="checkbox"/> Third-party sick pay <input type="checkbox"/>	13 Statutory employee <input type="checkbox"/> Retirement plan <input type="checkbox"/> Third-party sick pay <input type="checkbox"/>	12b	12b
14 Other (see instructions)	14 Other (see instructions)	12c	12c
		12d	12d
State Correction Information			
Previously reported		Correct information	
15 State	15 State	15 State	15 State
Employer's state ID number	Employer's state ID number	Employer's state ID number	Employer's state ID number
16 State wages, tips, etc.	16 State wages, tips, etc.	16 State wages, tips, etc.	16 State wages, tips, etc.
17 State income tax	17 State income tax	17 State income tax	17 State income tax
Locality Correction Information			
Previously reported		Correct information	
18 Local wages, tips, etc.	18 Local wages, tips, etc.	18 Local wages, tips, etc.	18 Local wages, tips, etc.
19 Local income tax	19 Local income tax	19 Local income tax	19 Local income tax
20 Locality name	20 Locality name	20 Locality name	20 Locality name

For Privacy Act and Paperwork Reduction Act Notice, see separate instructions.

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