

44444	For Official Use Only OMB No. 1545-0008		
a Employer's name, address, and ZIP code SYSTECHCORP INC 50 CRAGWOOD ROAD SUITE 216 SOUTH PLAINFIELD NJ 07080		c Tax year/Form corrected 2023 / W-2	d Employee's correct SSN 620-99-8693
		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 identification number (EIN) 83-2945717		g Employee's previously reported name	
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).		h Employee's name, street, city, state and ZIP code VISHAL DHIMAN 6584 W COTSFIELD AVE LAS VEGAS NV 89139	
Previously reported	Correct information	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	3 Social security wages	4 Social security tax withheld	4 Social security tax withheld
5 Medicare wages and tips	5 Medicare wages and tips	6 Medicare tax withheld	6 Medicare tax withheld
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	Previously reported	Correct information
15 State NJ	15 State	15 State	15 State
Employer's state ID number 832-945-717/000	Employer's state ID number	Employer's state ID number	Employer's state ID number
16 State wages, tips, etc. 15107.66	16 State wages, tips, etc. 0.00	16 State wages, tips, etc.	16 State wages, tips, etc.
17 State income tax 670.88	17 State income tax 0.00	17 State income tax	17 State income tax
Locality Correction Information			
Previously reported	Correct 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