2023 W-2 and EARNINGS SUMMARY

Employee Ref W-2 Wage a Staten Copy C for employee's records.	nd Tax nent	2023 OMB No. 1545-0008
d Control number Dept.	Corp.	Employer use only
0000001066 UC3 D51100	CWYA	E S 420
c Employer's name, address, a	and ZIP co	
FRANKLIN TEMPLET ONE FRANKLIN PAR SAN MATEO, CA 944	KWAY 92	
UNIT 3,3227 BISHOP S CINCINNATI, OH 4522	ANTE STREET 0	
b Employer's FED ID number 94-3382187		yee's SSA number XXX-XX-6606
1 Wages, tips, other comp.	2 Federa	I income tax withheld
15052.50		1227.26
3 Social security wages	4 Social	security tax withheld
5 Medicare wages and tips	6 Medica	are tax withheld
7 Social security tips	8 Allocat	ted tips
9		ndent care benefits
11 Nonqualified plans	12a See in	structions for box 12 607.50
14 Other	12b	
	12c	
	12d 13 Stat emp	. Ret, plan 3rd party sick pay
15 State Employer's state ID no	16 State	
OH 52-561048 1		15052.50
17 State income tax	18 Local	wages, tips, etc.
371.72		15660.00
19 Local income tax 281.88	20 Local	ity name CINCINNATI
1 Wages, tips, other comp.	2 Federa	I income tax withheld

This summary section is included with your W-2 to help describe this portion in more detail. The reverse side includes general information that you may also find helpful. The following reflects your final pay stub, plus

any adjustments made by your employer.
GROSS PAY 15,660.00 SOCIAL SECURITY 0.00 TAX WITHHELD BOX 04 OF W-2 FED. INCOME 1,227.26 MEDICARE TAX 0.00 TAX WITHHELD WITHHELD BOX 02 OF W-2 BOX 06 OF W-2 STATE INCOME TAX SUI/SDI 0.00 371.72 BOX 17 OF W-2 BOX 14 OF W-2 LOCAL INCOME TAX BOX 19 OF W-2 281.88

> To change your employee W-4 profile information file a new W-4 with your payroll department

> > Social Security Number: XXX-XX-6606

SRI KARTHIKEYA KANTE **UNIT 3,3227 BISHOP STREET** CINCINNATI, OH 45220

© 2023 ADP, Inc.

PAGE 1 OF 1

1	Wages, tips, other co		2 Federa		x withheld 27.26
3	Social security wages	3	4 Social	security ta	x withheld
5	Medicare wages and	tips	6 Medica	re tax with	held
d	Control number	Dept.	Corp.	Employe	r use only
	0000001066 UC3	D51100	CWYA	E S	420
С	Employer's name, a FRANKLIN TEI ONE FRANKLI SAN MATEO, C	MPLETO N PARK	ON COM	PANIES	LLC

b Employer's FED ID number 94-3382187	a Employee's SSA number XXX-XX-6606
7 Social security tips	8 Allocated tips
9	10 Dependent care benefits
11 Nonqualified plans	12a See instructions for box 12
	D 607.50
14 Other	12b
	12c
	12d
	13 Stat emp. Ret. plan 3rd party sick pay
e/f Employee's name, address	and ZIP code
ODLICA DELINICENCA ICA	NITE

SRI KARTHIKEYA KANTE **UNIT 3,3227 BISHOP STREET** CINCINNATI, OH 45220

15 State	Employer's state ID no.	16	State wages, tips, etc.
OH	52-561048 1		15052.50
17 State	income tax	18	Local wages, tips, etc.
	371.72		15660.00
19 Local	income tax	20	Locality name
	281.88		CINCINNATI
	Federal Filing	\overline{c}	ony

Wage and Tax Statement

Copy B to be filed with employee's Federal Income Tax Return

1 Wages, tips, other co 15052		2 Federa	I income tax withheld 1227.26
3 Social security wage	s	4 Social	security tax withheld
5 Medicare wages and tips		6 Medicare tax withheld	
d Control number	Dept.	Corp.	Employer use only
0000001066 UC3	D51100	CWYA	E S 420
c Employer's name, address, and ZIP code			
c Employer's name, a	ıddress, a	nu ZIP co	ue

ONE FRANKLIN PARKWAY 920/1 SAN MATEO, CA 94403-1906

b Employer's FED ID number 94-3382187	a Employee's SSA number XXX-XX-6606
7 Social security tips	8 Allocated tips
9	10 Dependent care benefits
11 Nonqualified plans	12a
	D 607.50
14 Other	12b
	12c
	12d
	13 Stat emp. Ret. plan 3rd party sick pay
e/f Employee's name, address	and ZIP code

SRI KARTHIKEYA KANTE **UNIT 3,3227 BISHOP STREET** CINCINNATI, OH 45220

15 State	Employer's state ID no.	16	State wages, tips, etc.
ОН	52-561048 1		15052.50
17 State	income tax	18	Local wages, tips, etc.
	371.72		15660.00
19 Local	income tax	20	Locality name
	281.88		CINCINNATI
	OH State Filin	a	Conv

Wage and Tax Statement Copy 2 to be filed with employee's State Income Ta

2023 OMB No. 1545-0008	,
ax Return.	С

1	15052.50		2 Federal income tax withheld 1227.26		
3	Social security wage	s	4 Social security tax withheld		
5	Medicare wages and tips		6 Medicare tax withheld		
d	Control number	Dept.	Corp.	Employer use only	
	0000001066 UC3 D51100		CWYA	E S 420	
c Employer's name, address, ar			nd ZIP co	ode	
	EDANISH IN TE	401 57		DANIEGILO	

FRANKLIN TEMPLETON COMPANIES LLC **ONE FRANKLIN PARKWAY 920/1** SAN MATEO, CA 94403-1906

l				
b	Employer's FED ID number 94-3382187	a Emplo	yee's SS XXX-X	A number (X-6606
7 :	Social security tips	8 Alloca	ted tips	
9		10 Depe	ndent car	e benefits
11	Nonqualified plans	12a		
		D I		607.50
14	Other	12b		
		12c		
		12d		
		13 Stat em	p. Ret. plan X	3rd party sick pay
e/f	Employee's name, address	and ZIP o	ode	

SRI KARTHIKEYA KANTE **UNIT 3,3227 BISHOP STREET** CINCINNATI, OH 45220

15660.00 y name CINCINNATI
15660.00 y name
vages, lips, elc.
vages, tips, etc.
15052.50
/ages, tips, etc.

Wage and Tax Statement

Copy 2 to be filed with employee's City or Local Income Tax Return