





<u>Declaration of economic need in accordance with § 53 No. 2 AO in conjunction with § 28 SGB XII</u> (please note the instructions and explanations at the end of the form for completing the declaration)

The Amadeu Antonio Foundation is only able to support individuals who have a low income and no high level of assets within the framework of the *Berlin Emergency Aid Fund*. Institutions / associations can be supported if they operate on a non-profit basis. For this to be checked, please provide us with the following information under Point 10. Explanations on how to fill in the form can be found in the appendix.

1. Name:

2.

Information on receipts from the state:			
I receive the following state benefits (please attach proof):			
Citizen's Income (Bürgergeld, SGB II)			
Basic income support, social benefits, additional needs (Grundsicherung, Sozialleistungen,			
Mehrbedarf SGB XII)			
Housing benefit (Wohngeld WoGG)			
Supplementary subsistence assistance for the disabled and surviving dependents (§27a BVG)			
Child supplement (Kinderzuschlag § 6a BKGG, not child benefit)			

If you receive any of the above benefits, you do not need to complete Points 3 and 4 and can proceed directly to Point 5.

3. Information on permissible statutory allowances and income:

(only for persons who do not receive any of the benefits mentioned under Point 1)

a) These persons live in my household and this results in the following allowances for me:

	Statutory allowance per person	Number of persons in the household (incl. applicant)	Number of persons multiplied by the permissible amount of allowance
Adult single person	€2815.00		
Adult partnered persons (e.g. marriage, partnership, cohabitation) in needs group Adult unmarried children	€2024.00 €1804.00		
from 18-24 years of age at home	€1804.00		
Children from 14-17 years	€1884.00		
Children from 6-13 years	€1560.00		
Children from 0-5 years	€1428.00		
Total amount	-	-	

	b) The total sum of all financial income and rece amounts to:	ipts of the persons living in my household
4.	Information on private assets:	
	(not applicable for recipients of the support ben	efit mentioned under Point 1)
	My assets cannot be used for current maintenar	nce and I do not have assets with a market value
	exceeding 15,500 Euro (this does not include: m	emorabilia, household effects, owner-occupied house or
_	condominium, reserve for adequate old-age pro	vision):
	Yes, my assets are less than 15,500€.	
Ī	No, my assets are more than 15,500€	
5.	Declaration of economic need of assistance in a	ccordance with § 53 (2) AO in conjunction with§ 28 SGB
	XII:	
	The total income (gross) and receipts of all person	ons in my household - minus maintenance payments I
	·	enance payments I have received - do not exceed the
		ulated under Point 3 and I do not hold any assets. As such,
	I am in need within the meaning of the Fiscal Co	de (A0):
	YesNo	
6.	Signature	
	I have submitted the necessary evidence of my i	ncome and receipts for verification. I confirm the
	accuracy of the information provided.	
	Date, Place	Signature of the Applicant







Application for emergency aid for victims of hate violence in Berlin

First name, family nam	ne			
Address (street, postco				
Phone number	<u> </u>			
E-mail address				
Pronoun/title **				
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5. What harm or restriction has arisen for you as a result of the crime/threat? (damage to property, psychological damage, threatening situations, etc.) 6. What measures do you need the financial support for? Repair of minor property damage Psychological care Medical treatment Implementation of minor security measures Legal advice Supervision	4.	What indications are there about the perpetrators and their motives? Is there anything to suggest that the perpetrators actions were based on prejudice-based (racist, anti-semitic, LGBTI*-hostile, homeless-hostile, etc.) motives or as an expression against democratic and human rights principles (statements made prior to, during and after the crime, symbols, clothing, etc.)?
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 ☐ Medical treatment ☐ Implementation of minor security measures ☐ Legal advice ☐ Supervision 		Repair of minor property damage
 □ Implementation of minor security measures □ Legal advice □ Supervision 		Psychological care
☐ Legal advice ☐ Supervision		Medical treatment
☐ Supervision		
·		
□ Other		•
	Dle	ease list the costs for each measure in the table below

		Measure	Costs
	7.	Amount of application:	
	8.	Have you already taken advantage of a consultation?	
		Yes	
		No	
	If y	es, where and by whom (place of consultation):	
	an you opi	te: If you have not taken advantage of a consultation yet, you appointment with our advice center. If you do not wish to to u can also add to the application media reports about the inions of the (property) damage, documentation of the tocuments of the prosecutor's office/court, etc.	ake advantage of a consultant, ne incident, pictures or expert
9.	Ha	ve you applied for funding at the Berlin emergency aid fund	before?
		Yes No	
	If y	res, when (year):	
	10.	Consents:	
l de	eclar	y certify that the funds requested, if granted, will be used ore myself willing to provide proof in the form of an original internal form.	
		Yes □ No □	
		rstand, that in case I receive public benefits from the state, I sible authority about the funding by the emergency aid fund Yes No No No No No No No N	

I agree to the processing and storage of personal data for the purpose of processing my application. I have read and noted the relevant information on data processing concerning my application in accordance with Art. 12 ff. GDPR (https://www.amadeu-antonio-

stiftung.de/informationen/). This consent is required for the application to be processed. More information can be found on data processing at the Amadeu Antonio foundation in accordance with Art. 12 ff. GDPR (https://www.amadeu-antonio-stiftung.de/datenschutz/pflichtinformationen/) and the data protection statement
(https://www.amadeu-antonio-stiftung.de/datenschutz/).
Yes □
No □
11. * Voluntary information for statistical purposes
In the following, you have the opportunity to provide information about yourself, whereby we are interested in taking into account how you identify yourself (self-identification). We collect this data for statistical purposes in order to improve the support offered by the Emergency Aid Fund. The information is provided on a voluntary basis.
Age
Gender identity
Sexual identity
Religious affiliation
Community affiliation
Which forms of discriminations are you affected by?
Have charges been filed?
Yes □
No □
12. Signature
Place, date, applicant

Appendix:

Explanations and instructions for filling out the declaration of need for economic assistance in accordance with § 53 of the German Fiscal Code (AO)

Information on the legal framework:

As a *non-profit* organisation, the Amadeu Foundation can provide financial support to individuals within the framework of *charitable* purposes. A person can only be supported if s/he can be classified as *economically in need of assistance* in accordance with § 53 No. 2 of the German Fiscal Code (AO).

When am I considered to be in need of economic assistance?

You can be classified as being in need of economic assistance if your monthly financial income / remuneration does not exceed the upper limit set for this by law (called *allowances*) and you do not hold any assets that you can use for your current expenses. For the calculation of your total income / remuneration and the allowances permitted for you, it is important how many and which persons live together with you in a common household.

Who counts as a member of the joint household?

Persons are legally counted as a household if they have a common residence and live in an economic community, i.e. that they jointly take care of the expenses of living. This is also called a *needs* community.

Re Point 2: state receipts

Please enter under Point 2 whether you are a recipient of one or more of the benefits mentioned (multiple answers are possible). Please attach proof in the form of an official benefit notification. If you receive one of the benefits mentioned, you do not need to fill in Point 3 and Point 4 and can go straight to Point 5.

Re Point 3 a): Persons in the household, statutory allowances

If you are not a recipient of one of the state benefits mentioned under Point 2, please enter the number of persons living in your household under Point 3 a) and calculate the legally permissible upper limit for your monthly income, i.e. the permissible *tax-free amounts*. Under "Total amount", please add up all the allowances mentioned.

<u>Information on the statutory allowances per person:</u>

Adult single person or single parent: € 2510.00

Adult partnered persons in a needs community (spouse/life partner): €1804.00

Children in household up to the age of 6: €172.00

Children in household from the age of 7 to the age of 14: €1392.00 Children in household from the age of 15 to the age of 18: €1680.00 Unmarried children in household from the age of 18 onwards: €1608.00

Re Point 3 b): Total income

Under Point 3 b), please state the total sum of all income from you and the persons in your household. Income includes: income from self-employment, from non-self-employment, from renting and leasing as well as social benefits, unemployment benefit 1

benefits, child benefit, parental benefit, maternity benefit, sickness benefit, alimony, BAföG, etc.

Please attach proof of all income.

Information on proof of income and receipts:

For dependent employees:

current proof of earnings from employer, e.g. pay slip

For the self-employed:

most recent annual income tax assessment available

In the case of income / remuneration such as pensions, annuities, retirement benefits,etc.: corresponding notices from the competent authority.

For recipients of state benefits: current official benefit notification

Re Point 4: Assets

Indicate under Point 4 whether you have any assets. This refers to assets that you can use for your living expenses.

Such assets include, among others: non-owner-occupied houses and real estate, small assets (also cash assets and assets under a protection scheme), bank and savings deposits, shares, fixed-interest securities, building society savings contracts with details of the current surrender value.

This does not include: memorabilia, household effects, owner-occupied house or condominium (appropriate house property within the meaning of § 90 (2) No.8 SGB XII), reserve for appropriate old-age provision.

Re Point 5: Declaration of need for economic assistance

If you are a recipient of one or more of the benefits listed under Point 2, please tick "yes" here. Please attach proof of the benefit relationship in the form of an official benefit notification.

If you are not a recipient of one of the aforementioned benefits, please decide whether the total monthly gross income and benefits of you and all persons in your household are lower or higher than the total sum of the permissible allowances calculated by you under Point 3. If your income is lower or equal, tick "yes", if your income is higher, tick "no".