



# Baden-Württemberg

LANDESAMT FÜR BESOLDUNG UND VERSORGUNG

## Erklärung zur Auszahlung der Bezüge und Sozialversicherung — Declaration for the Payment of Remuneration and regarding Social Security

Please note:

1. The fields outlined in red are mandatory fields and must be completed (only visible in the electronic form). If mandatory fields are left blank, the payment of your remuneration may be delayed or even impossible. Before completing the form, please make sure to save it on your computer.

2. We require the following information for the payment of your remuneration. Please visit <https://lbv.landbw.de/das-lbv/kontakt/datenschutz> for information on data protection and the relevant legal provisions on the basis of which your data are collected.

All questions must be answered, unless marked as optional.

3. Please read the explanatory notes attached, to which the asterisks (\*) in the relevant section headlines refer.

Please check  or fill in as appropriate

### Information for the payment of remuneration

#### 1 Personal data

Last name		First name	Personnel number / area of work
Name at birth		Date of birth	Phone number (optional)
Address (street, ZIP code, city)			Nationality
Place of birth	Country of birth	Gender	Academic degrees (optional)
Name of employer and place of work			
Marital status Fill in this section only if you are entitled to receive family-related benefits. Otherwise, this information is optional.			
<input type="checkbox"/> not married <input type="checkbox"/> married <input type="checkbox"/> registered partnership <input type="checkbox"/> divorced / marriage annulled or declared null and void <input type="checkbox"/> widowed			

#### 2 Bank details

Bank: _____	BIC: _____
<small>✓ The German IBAN ends here!</small>	
IBAN: _____	

#### 3 Tax details

My tax identification number: _____
This employment is my
<input type="checkbox"/> main employment (employer is my "main employer"). Taxes will be calculated on the basis of your individual tax criteria.
<input type="checkbox"/> secondary employment (employer is my "secondary employer"). Taxes will be calculated on the basis of tax bracket 6.
My tax criteria:
Tax bracket: _____ Religion (my own / my spouse's): _____ / _____

LBV 42101bs – 04/24

#### 4 Details regarding social security

##### 4.1 Details regarding your social security number

Have you been assigned a (European) insurance number by the statutory pension insurance?

- Yes, my insurance number is: \_\_\_\_\_
- No insurance number has been assigned to me so far.

##### 4.2 Details regarding your health insurance — Please make sure to always indicate your health insurance details!

- My current/last **statutory** health insurance provider is/was the following (including insurance under a family insurance scheme, if applicable):

\_\_\_\_\_  
Name, place of business of health insurance provider

- As a foreign citizen, I am currently insured with the following statutory health insurance provider on the basis of an agreement with a foreign country:

\_\_\_\_\_  
Name, place of business of health insurance provider

- I am currently **not** insured with any statutory health insurance scheme.  
Were pension and/or unemployment insurance contributions paid to a statutory health insurance provider (AOK, Ersatzkasse, etc.) during your last employment? Please refer to your last social security statement to establish to which provider the contributions were paid.
- No  
 Yes

\_\_\_\_\_  
Name, place of business of health insurance provider

##### 4.3 Details regarding your private health insurance

- I am currently insured with a private health insurance provider.  
Proof is attached.
- I am entitled to daily sickness allowance.  
Proof is attached.
- I am not entitled to daily sickness allowance.

Were you exempt from statutory health insurance on **31 December 2002** because your annual income exceeded the annual earning limit and you had **your own** private health insurance with a private health insurance provider? Please note that this does not include **additional** private insurance.

- No  
 Yes, proof is attached.

##### 4.4 Details regarding your occupation — Please complete all information below to avoid possible disadvantages.

###### 4.4.1\* In addition to this employment, I am

- an employee (including marginal employment ("Minijob") and short-term employment) or a trainee
- No  
 Yes

I have an additional job:

No.	From - to	Legal relationship	Hours per week	Monthly remuneration (gross)	Amount of expected one-off payments, e.g., holiday allowance, benefits (gross)
1					
Employer and employer's address					
2					
Employer and employer's address					

The jobs listed above are subject to the following insurance categories:

Please state the single-digit contribution category key (*Beitragsgruppenschlüssel*) and the person group key (*Personengruppenschlüssel*) as indicated on your social security registration confirmation (e.g. "DEÜV-Meldung").

No.	KV	RV	AV	PV	PGS
1					
2					

KV = health insurance (**K**ranken**v**ersicherung)

RV = pension insurance (**R**enten**v**ersicherung)

AV = unemployment insurance (**A**rbeitslos**e**n**v**ersicherung)

PV = long-term care insurance (**P**flege**v**ersicherung)

PGS = person group key (**P**erson**e**n**g**rup**p**e**n**s**ch**lüs**s**e**l**)

- self-employed / a freelancer

No

Yes, I am working as \_\_\_\_\_

Hours per week: \_\_\_\_\_ hours

Monthly income: \_\_\_\_\_ euros

- a civil servant

No

Yes

Employer: \_\_\_\_\_

Personnel number: \_\_\_\_\_

**4.4.2 In addition to this employment, I am**

a recipient of widow's pension or orphan's pension.

No

Yes

Paying office: \_\_\_\_\_

Personnel number: \_\_\_\_\_

a pensioner.

No

Yes

I have attached a copy of the notice of my pension (*Rentenbescheid*) (without annexes).

a school student.

A letter of confirmation is attached.

a college/university student.

A current "detailed" enrollment certificate such as the one required for federal student aid (BAföG) is attached.

It is a

first degree program which I have **not** yet completed.

- postgraduate or second degree program which requires a college/university exam for completion. Proof is attached.
- postgraduate or second degree program which **does not require** a college/university exam for completion.
- doctoral program.
- part-time degree program (e.g., distance learning).
- in the voluntary military service.
- completing a voluntary service (*Freiwilliges Soziales Jahr, Freiwilliges Ökologisches Jahr, Bundesfreiwilligendienst* or another voluntary service). Proof is attached.
- a homemaker.
- on parental leave from \_\_\_\_\_ until \_\_\_\_\_
- registered with the Federal Employment Agency.
  - I am entitled to unemployment benefits (section 27 subsection 5 of Book III of the German Social Code (*Sozialgesetzbuch – Drittes Buch, SGB III*)). Proof is attached.

**4.4.3 Fill in this section only if the employment you just started with the Land of Baden-Württemberg is an internship.**

Is the internship a mandatory internship prescribed by your vocational training/examination/study regulations?

- No
- Yes, proof is attached.

Is this your first mandatory internship?

- No
- Yes

**4.5\* Fill in this section only if the employment you just started with the Land of Baden-Württemberg constitutes short-term employment according to section 8 subsection 1 no. 2 of Book IV of the German Social Code (*Sozialgesetzbuch – Viertes Buch, SGB IV*), i.e.**

- it is limited to a maximum term of three months or
- it is limited to a maximum term of 70 working days (if you do not work at least five days per week).

I had other jobs during the calendar year before my current employment.

- No
- Yes

Duration from – until (dd.mm.yyyy)	Hours per week	Number of working days per week	Average monthly remuneration and/or income from self-employment
-			

Contribution category key SV (social security, *Sozialversicherung*)

The jobs listed above are subject to the following insurance categories:

Please state the single-digit contribution category key (*Beitragsgruppenschlüssel*) and the person group key (*Personengruppenschlüssel*) as indicated on your social security registration confirmation (e.g., "DEÜV-Meldung").

No.	KV	RV	AV	PV	PGS	
1						KV = health insurance ( <i>Krankenversicherung</i> )
2						RV = pension insurance ( <i>Rentenversicherung</i> )
						AV = unemployment insurance ( <i>Arbeitslosenversicherung</i> )
						PV = long-term care insurance ( <i>Pflegeversicherung</i> )
						PGS = person group key ( <i>Personengruppenschlüssel</i> )

During the following periods, I received benefits under SGB III from the Federal Employment Agency and/or was registered as job-seeking or was available to the Employment Agency for work:

from \_\_\_\_\_ until \_\_\_\_\_

from \_\_\_\_\_ until \_\_\_\_\_

Relevant proof is attached (e.g., pay slips or confirmation from the Employment Agency).

**Fill in this section only if you have just left school** (Proof of secondary education is attached.)

Once my current employment ends, I intend to

- complete a voluntary military service or another voluntary service (e.g., *Freiwilliges Soziales Jahr, Freiwilliges Ökologisches Jahr, Bundesfreiwilligendienst*).
- pursue further secondary or higher education.

**4.6\*** **Fill in this section only in case you are marginally employed according to section 8 subsection 1 no. 1 SGB IV.**

- I wish to be exempted from paying statutory pension insurance. I have read no. 3 of the explanatory notes and I will request the exemption by filling in form LBV 45201.
- I have already filed a request for exemption from compulsory statutory pension insurance for the job stated in 4.4.1.
  - No
  - Yes, a copy of the request is attached.
- I wish to pay the costs incurring due to flat taxation and will request it by filling in form LBV 47101.

**4.7\*** **Fill in this section only if you are at least 23 years old or if you had at least 2 children before you turned 23.**

- I am not a parent.
- Proof of parenthood is attached (birth certificate of the child).
- I confirm that, at the time I start this job, I am a parent of the following number of children under the age of 25 taken into account for reduced insurance contribution rates:
  - 2 children
  - 3 children
  - 4 children
  - 5 children or more

I am obliged to immediately report any changes.

**4.8\*** **Fill in this section only if your entitlement to receive a pension for the employment in question has been approved.**

- My entitlement to receive a pension has been approved.
  - I have attached a copy of the notice of approval.

**4.9** **Fill in this section only if you are entitled to receive continued payment of remuneration as well as financial assistance (*Beihilfe*) or medical care in cases of illness under civil service provisions.**

- Yes, proof is attached.

**4.10** **Fill in this section only if you have been exempted from compulsory statutory insurance upon your own request.**

- Upon request, I was exempted from paying statutory insurance contributions for
  - health insurance
  - long-term care insurance
  - statutory pension insurance

I have attached a copy of the relevant notice of exemption.

**4.11\* Fill in this section only if you are a member of an insurance or pension company of your professional group.**

- I have already been exempted from compulsory statutory pension insurance for my new employment.
  - I have attached a copy of the notice of exemption.
  - I have attached a membership certificate from my occupational pension fund.
- I will request to be exempted from compulsory statutory pension insurance.
  - I will submit a copy of the notice of exemption as soon as possible.
  - I have attached a membership certificate from my occupational pension fund.

**4.12 Fill in this section only if you are not a citizen of an EU member state.**

Does your current employment serve your vocational training or continuing professional development under a development aid program and is it funded from respective resources?

- No
- Yes, I have attached a confirmation from the funding body, institution or organization.

**Declaration**

I am aware that the details I provided in this form may influence the amount I am paid. I confirm that the information provided above is both accurate and complete. I am obliged to inform the Landesamt für Besoldung und Versorgung immediately of any changes in the circumstances declared above, particularly of any additional employment I might take up. Furthermore, I am aware that I will have to pay social security contributions retroactively if I fail to provide complete information or to report changes.

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Date, Signature

**Landesamt für Besoldung und  
Versorgung Baden-Württemberg  
70730 Fellbach**

## (\*) Explanatory Notes for the Declaration regarding Social Security

Regarding numbers 4.4.1, 4.5 and 4.6

### Marginal employment according to section 8 SGB IV

#### 1. Legal definition

According to section 8 SGB IV – as amended on 1 April 2003 – **marginal employment** is defined as follows:

- 1) The salary does not exceed **the applicable marginal salary threshold (*Geringfügigkeitsgrenze*) (section 8 subsection 1a SGB IV) (employment with marginal salary)**. The mini-job center (Minijob-Zentrale) of Bundesknappschaft (statutory health insurance provider) provides further information at [www.minijob-zentrale.de](http://www.minijob-zentrale.de) (in German).
- 2) The employment within the calendar year is limited to a maximum of **3 months or 70 working days** due to its nature or prior contractual agreement, unless the job is carried out **as a profession** and the salary exceeds the limit stated in number 1 (**short-term employment**).

#### 2. Scope

According to judgments by the Federal Social Court, a job is carried out **as a profession** if it provides the employee's main source of income or to such extent that their economic standing depends to a large extent on the employment in question. Therefore, the employment must make up a significant part of the person's financial resources, taking into account their entire income and assets.

According to judgments by the Federal Social Court, a job is not considered short-term employment if the number of workdays exceeds 70 days within one calendar year **of permanent employment** or of a **regularly recurring employment relationship**.

If a person has several marginal jobs according to section 1 number 1 **or** section 1 number 2, these must be **added up**. If the person carries out only one marginal job in addition to a non-marginal job subject to compulsory insurance (main employment), these jobs are not added up.

If, however, several marginal jobs are carried out in addition to non-marginal (main) employment subject to compulsory insurance, the marginal job that was taken up first remains free of compulsory statutory insurance. The remaining marginal jobs must be added to the non-marginal employment, provided the latter is subject to compulsory insurance.

The abovementioned provisions apply accordingly in the case of self-employment.

**This does not apply to unemployment insurance.**

#### 3. Exemption from compulsory statutory pension insurance

Employees in marginal employment (mini-job) are generally subject to compulsory statutory insurance and full payment of statutory pension insurance contributions. The pension insurance share to be paid by the employee amounts to 3.6 percent of the remuneration (or 13.6 percent for employees in marginal employment in private households). This amount is the difference between the employer's flat-rate share (15 percent for marginal employment in trade or business / 5 percent for employment in private households) and the full pension insurance contribution of 18.6 percent. Full pension insurance contributions have to be paid starting at a minimum remuneration of EUR 175.

#### Advantages of the full payment of pension insurance contributions

By paying statutory insurance shares, employees acquire contribution periods in the statutory pension insurance scheme. This means that the period of employment will count fully towards the fulfillment of the different qualification periods (minimum period of insurance). Compulsory contribution periods are for example prerequisites for

- early retirement,
- entitlements to rehabilitation benefits (concerning medical care and work life),
- the entitlement to transitional allowance in case of rehabilitation measures of the statutory pension insurance,
- the entitlement to a pension in case of reduced earning capacity,
- the entitlement to have part of the remuneration paid into a company pension plan and
- the fulfillment of the conditions for a private pension plan with state incentives (for example *Riester* pension plan) for the employee and, if applicable, also for their spouse.

Moreover, the remuneration will count fully in the calculation of their pension.

### **Request for exemption from compulsory statutory pension insurance**

If an employee does not want to pay their statutory insurance share, they can be exempted. To this end, the employee has to fill out form 45201 for the LBV, declaring that they want to be exempted from paying statutory pension insurance. If the employee has several marginal jobs, the request for exemption can only be made for all marginal jobs simultaneously. The employee has to inform all other and future employers who engage them in marginal employment about the request for exemption. The exemption from compulsory statutory insurance is effective for the entire duration of the marginal employment and cannot be revoked.

The exemption is generally effective from the beginning of the calendar month in which it was received by the employer, and at the earliest from the beginning of the employment. For the exemption to become effective, the employer has to give notice of the exemption request to the mini-job center (Minijob-Zentrale) before the next salary payment, at the latest within 6 weeks after the receipt of the exemption request. Otherwise, the exemption will become effective one month later.

### **Consequences of the exemption from compulsory statutory pension insurance**

Employees with marginal employment who request the exemption from compulsory statutory pension insurance voluntarily waive the abovementioned advantages. In case of exemption, only the employer will pay the fixed payment of 15 percent (or 5 percent in case of employment in a private household) of the remuneration. The employee's share is not paid. As a consequence, the employee only acquires partial months for the fulfillment of the different qualification periods and the remuneration will only count partially in the calculation of their pension.

#### **Please note:**

Before employees decide to be exempted from compulsory statutory pension insurance contributions, they are advised to consult the Deutsche Rentenversicherung Advice Centre: +49 (0) 800 10004800 (calls free of charge). Please have your pension insurance number at hand.

### **Regarding number 4.7**

Since 1 January 2005, childless members who are at least 23 years old must pay a **surcharge** for statutory long-term care insurance. Childless members born before 1 January 1940 are exempt from this regulation. Since 1 July 2023, the surcharge amounts to 0.6 percent.

The employee does not have to pay the surcharge if they can prove to the employer that they are a parent. More information about 'providing proof of parenthood' is provided on the website of the LBV at [www.lbv.landbw.de/Pflegeversicherung](http://www.lbv.landbw.de/Pflegeversicherung) (in German). The employee must provide proof within three months after the beginning of the employment or after the birth of a child.

Since 1 July 2023, the contribution rates for insured individuals with at least two children are **reduced** by 0.25 percentage points for every child from the second to the fifth child until the end of the month in which the respective child reaches or would have reached the age of 25.

Since 1 July 2023, you must provide information about the number of children who can be taken into account in order for the reduction in contribution rates to be considered for your remuneration payment. Any changes must be reported immediately by completing form LBV 495 (the form is provided on the website of the LBV at [www.lbv.landbw.de/vordrucke](http://www.lbv.landbw.de/vordrucke)). If the form is submitted late, any reductions granted will be withdrawn immediately.

**Obligation to cooperate:** According to section 280 subsection 1 SGB IV, employees are obliged to provide their employer with the information and, if applicable, the necessary documents required for the notification procedure and the payment of contributions. In the case of several jobs, this applies with respect to all employers involved. According to section 111 subsection 1 number 4 SGB IV, employees commit a misdemeanor if they intentionally or recklessly provide incorrect or incomplete information, if they provide this information late, if they provide incomplete documents or if they provide the required documents late. This misdemeanor may be punished with a fine of up to five thousand euros in accordance with section 111 subsection 4 SGB IV. In addition, the provision of any incorrect information constitutes a violation of the employee's obligation under labor law and may have consequences under labor law, as well as other consequences. You are obliged to immediately inform the personnel department or the LBV of any changes in the circumstances declared above without being asked to do so.

### **Regarding number 4.9**

According to civil service provisions, pension benefits are, for example, retirement pensions or similar payments from the Bund, a Land, a municipality or an association of local governments or any other body, foundation or institution under public law.



**Regarding number 4.11**

Individuals who, due to a statutory obligation, are members of a public insurance institution set up specifically for a certain professional group may request to be exempted from compulsory pension insurance.

According to the decision of the Federal Social Court from 31 October 2012, a new exemption request has to be submitted to the Deutsche Rentenversicherung Bund with **every change of employment**.

According to section 6 subsection 4 SGB IV, the request has to be submitted within a period of three months. Otherwise, the exemption can only become effective on the date of the request, regardless of whether the material conditions for the exemption were fulfilled beforehand.

PLEASE FILL IN THE GERMAN FORM