

Annual Report 2018

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Inside our mobile clinic in Bosnia.
Photo: Christoph Löffler

DEAR READERS,

We were able to start the year 2018 with a bang. As the German finalist for the Creator Awards by WeWork, we were invited to participate in the global finals in New York. Great, we thought, a bit of networking, meeting other creative minds with great ideas, and enjoying the party after the award ceremony. That was all we had planned, as our presented project "Mobile Hospital" seemed rather hopeless against ideas and projects from all over the world, some of which had been prepared for years. Everything turned out differently...

We came in second place in the jury's ranking and suddenly found ourselves facing many incredulous looks within the team and with an additional €420,000. And now what? Continuing as before was not an option for us, so in March, we took a long weekend for reflection, brainstorming, and planning. Our mobile concept had proven itself in Iraq, but it needed to be significantly streamlined and built more modularly. We wanted to finally make our workshop a place where ideas and implementation were only a few meters apart. Long-term, secure job prospects for our employees were a particularly urgent wish for us. Remaining flexible and innovative, staying close to the needs of the people on the ground, and developing solutions together with them, was and still is our goal. Strengthened by this "emergency fund," suddenly many things seemed possible that had seemed absurd in December 2017.

We were able to implement many of these things this year. We had to react to some projects more quickly and flexibly than expected, while others we were able to plan and continue with a lot of lead time. Overall, 2018 was another milestone for us towards more stability and continuity. Our projects for Syria and Iraq have been continued or completed, and over the summer, our simple workshop at Holzmarkt became the first Crisis Response Makerspace of a humanitarian aid organization in Europe. Collaboration with various universities is also helping us to be better positioned in our project work.

Of course, our work in the field of humanitarian emergency aid is not free from setbacks. However, thanks to growing structures and an ever-widening base of supporters from all over the world, we are better positioned than ever to turn these setbacks into opportunities. Also - and especially - thanks to you! Therefore, we look forward to the coming year with excitement, as major events cast their shadows ahead.



Sebastian Jünemann, CEO CADUS



Treating a frostbite patient in the mobile clinic.
Photo: Roman Kutzowitz

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CADUS – REDEFINE GLOBAL SOLIDARITY

The Crisis Response Makerspace in Berlin is getting a new coat of paint. Photo: Till Rimmele

What is CADUS?

CADUS is a nonprofit and independent aid organization based in Berlin. Our work focuses primarily on supporting people in crisis situations. We define a crisis as emergency situations such as sudden onset disasters, war-related crises, and humanitarian crises related to displacement and

migration. Additionally, we understand crisis in a broader sense. We view ecological and political dynamics as essential factors that can lead to a crisis. For us, crises are a multifaceted phenomenon, always rooted in complex social and ecological processes.

Flexibility and mobility

We aim to provide humanitarian aid where little to no assistance is available. Modular and flexible concepts enable us to respond quickly and effectively to complex and dynamic crisis situations. Moreover, these approaches allow us to address some of the greatest challenges in today's human-

itarian work, such as asymmetric warfare or targeted attacks on humanitarian actors, not just reactively but proactively. In this way, we strive to be as prepared as possible for a wide range of scenarios in an emergency.

Knowledge, Structure, and Technology Transfer

For us, humanitarian work is not a one-sided transfer from highly professionalized Western organizations to “needy,” “passive” recipients. We aim to develop new innovative projects together with local communities that are both adapted to local conditions and actively shaped by the recipients of humanitarian aid. Essential to this process is the exchange between CADUS as a humanitar-

ian organization and those directly affected by crises. Simultaneously, this transfer also means interdisciplinarity for us. Individuals from various backgrounds, such as students, hackers, or technicians, possess specific expertise which, when brought together, have great potential. This creates the possibility of developing new and sustainable solutions to humanitarian problems.

Innovation and development

We aim to rethink problem-solving. Innovation should emerge through interdisciplinary action. Organizations and individuals should have the opportunity to implement humanitarian solutions, especially when structural disadvantages or lack of financial resources prevent active participation in humanitarian work and its traditional structures. Consequently, our premise is to make all solutions we develop available as blueprints and open source for others.

In short, our goal is a reflective approach in the field of humanitarian aid. This includes a focus on

involving local communities. We aim to address the causes, not just the symptoms. Moreover, we try to view our projects from different perspectives and consider all dimensions, including technical, social, economic, and ecological aspects. Only in this way can humanitarian work be effective and sustainable.

The humanitarian principles serve as the foundation for our work, and we believe they remain highly relevant today.

Impartiality

Human rights apply to everyone, regardless of what the person has done previously. As humanitarian aid workers, we are neither judges nor

enforcers. This means that we treat people based on necessity, not on their affiliation with any “ethnic,” religious, or political group.

Independence

It would be utopian to claim that humanitarian work takes place entirely free from financial constraints. For us, it is important to handle these monetary constraints transparently and openly. We are firmly opposed to funding that is tied to the interests of political or religious parties, regardless of which. In addition to private donations, we also fund our operations through international institutions committed to humanitarian

principles (such as United Nations institutions). Furthermore, we accept funds from foundations and the private sector. The fundamental prerequisite is that under no circumstances should these funds influence or direct our work and how it is carried out. Moreover, companies and foundations that support us must not be in conflict with the values and principles we uphold.

Neutrality

In our missions, we do not discriminate based on people’s origin, political, or religious affiliation. Humanitarian aid means that every person has

the right to help and support. We openly criticize structures and policies that cause suffering, as they are often the reason our work is neces-

sary. Our goal is clear: ultimately, we aim to make ourselves redundant. This is only possible for us if we stand in solidarity with the people who are in crisis and in need of support. This solidarity drives us to act humanely. For us, humanity is not just about the short-term alleviation of suffering

but about working together with those affected to prevent it. CADUS is a signatory organization of the Code of Conduct for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations in Disaster Relief, and is thus committed to the humanitarian principles.

Why do we exist? What are our goals?

Many of us have worked in humanitarian contexts before and have faced various dissatisfactions. We founded our own organization to openly and freely address these dissatisfactions. Additionally, we exist because we came together from a completely different context, which brings a very special drive to our work. Most of us are familiar with organizing small, large, and major events within the musical (sub-)culture.

When organizing large festivals, the same essentials are needed as in crisis intervention in humanitarian aid: all the trades surrounding daily life. This includes power supply, water supply and disposal, and food supply for very large groups.

Therefore, we have specialists in all the areas that are also required in humanitarian aid.

On the other hand, we bring something that we often missed in humanitarian aid. In organizing and conducting major events, unforeseen things frequently arise, plans don't work as expected, and extremely quick solutions must be found for unanticipated or unprecedented problems. Here, we experience an enthusiasm for innovation that we previously missed in our humanitarian contexts. This enthusiasm for innovation, this joy in finding new ways and solutions, is what we brought into the humanitarian context with the founding of CADUS.

Who is behind CADUS?

CADUS e.V. is a nonprofit association registered at the Charlottenburg District Court in Berlin. It is officially represented by four board members:

Matthias Grott, Simone Schrempf, Anna Sauerwein, and Jonas Grünwald. However, we are much more than just these four individuals; we are a diverse group of people from various social backgrounds and different skills. Our team includes paramedics, graphic designers, biologists, engineers, and fundraisers, united by the goal of creating unconventional and critical humanitarian aid.

The management is led by Sebastian Jünemann. Sebastian successfully completed studies in biology, pedagogy, and organizational psychology, but his heart has always primarily been in emergency medicine. Since 1999, he has regularly been involved in humanitarian aid for various organizations and has continuously worked in a leadership



The crew prepares for their next day on duty.
Photo: Christian Vagt

role in emergency medical services alongside his studies. In 2014, he, along with some friends, initiated the founding of CADUS.

Verena Lauble has been the deputy managing director of CADUS since the beginning of the year and is also the head of the operational area. Verena studied international economics and relations before working in project management in Mexico in 2011. Following her work abroad, she pursued a master's degree in peace and conflict studies and undertook various project assignments in Greece and Serbia, before joining our team in September 2017.

Supporters

Our work would not be possible without the large number of supporters. Only through their efforts are we able to manage the high workload and diverse projects despite our small team size and limited financial resources. Our supporters are as diverse as our fields of activity. From hackers and doctors to technicians, a wide range of people are part of CADUS, contributing their time and energy to make CADUS what it is today. Over the past few years, we have grown from a small group with an idea into an internationally active humanitarian organization, pursuing new approaches in humanitarian work and saving hundreds of lives in Iraq and Syria.



The CADUS team in 2018. Photo: Christoph Löffler

How we work

As a small project with tangible and manageable task distribution, our focus has always been on the personal freedom of all employees and supporters. In recent years, we have steadily grown and faced the accompanying challenges.

Today, we have a structure based on collegial cooperation due to shared values and goals. We divide our responsibilities into five departments, within which we structure our work. These five departments are in regular communication with each other. This exchange and the resulting outcomes are coordinated, managed, and evaluated by the management, which serves as the interface for all areas of work.

The day-to-day management of CADUS is the responsibility of the CEO and the deputy management. They act as the interface for all work areas and are primarily accountable to the

board. CADUS is divided into the following five departments: Finance and Accounting, External Communication, Operations, as well as the newly established departments of Human Resources and Crisis Response Makerspace.

The Operations department is our largest, with the most sub-groups involved. This includes primarily Project Management and the Safety and Security area. Research and development now take place both in our own spaces in the Makerspace and at universities across Germany, and thematically, it has been moved to the Crisis Response Makerspace department. The Human Resources department encompasses training for volunteers and employees, coordination of further education, and the continuous expansion of our pool of specialists, from technicians to translators to internists. The Communications department includes both public relations and fundraising.

1. The handover of the Mobile Hospital to our partner organization KRC. Photo: KRC
2. Working in the Makerspace. Photo: Till Rimmele

3. A doctor prepares for treatment in our mobile clinic. Photo: Christian Löffler
4. The Makerspace gets a new coat of paint. Photo: Till Rimmele







OUR PROJECTS

Syrien, Mobile Hospital

The Mobile Hospital at its destination in northeastern Syria. Photo:: KRC

After the end of the mission in Iraq, which concluded with a joint project between the University of Mosul and CADUS to fund the new university library, we still faced the challenge of transferring our mobile hospital to Syria. In early February, after countless hours of preparation, discussions with institutions, and partial re-equipping, all the necessary permits were obtained, and the border crossing could take place. Due to the military escalation around Afrin, there was uncertainty about where the mobile hospital could be most effectively deployed and how it would be jointly used by CADUS and the Kurdish Red Crescent.

At the end of March, we agreed to donate the mobile hospital, along with its equipment and urgently needed consumables, directly to the Kurdish Red Crescent for use as a trauma stabilization point. In early May, the mobile hospital arrived in Qamishli, northeastern Syria, and after several days of technical briefing, it was handed over to our partner organization. In June, a public handover took place following a medical briefing, before the mobile hospital, now officially operated

by the Kurdish Red Crescent, headed towards the refugee camps around Tal Rif'at.

The camps in the area held by the Syrian Democratic Forces (SDF) were established following the Turkish occupation in and around Afrin. Since the summer of 2018, the mobile hospital has been providing general, pediatric, and emergency medical care to the camp population. This marks the completion of our first major project. In 2015, we approached this idea with the desire to offer more than just medical aid shipments to the population in the political project of Rojava. Our goal, by which we have been measured, was to develop a sustainable solution tailored to the wishes and circumstances of our Kurdish partner organizations, deploy it, and leave it on site. Despite many detours, we have achieved this.

While our project in 2016 was characterized by a frontline stance against ISIS, the parameters shifted in 2018. General medical care for particularly vulnerable populations (people in flight) replaced acute trauma care immediately behind the front line. Both are immensely important, especially when a conflict escalates.

Handover of the Mobile Hospital to our partner organization. Photo: KRC

Syria, PHC Raqqa

The relative pacification of the conflict in large parts of northeastern Syria has fortunately reduced the need for acute trauma care, such as what we provided in Iraq in 2017. However, general medical care, especially in heavily contested larger cities like Ain Issa, Tabka, and Raqqa, remains precarious even after the end of hostilities. Many health facilities have been destroyed or rendered unusable due to urban combat and bombings, and consistent access for all segments of the population was not available under the so-called Islamic State.

Against this backdrop, we were approached by UN organizations at the beginning of the year to consider establishing a medical care station in the recently recaptured areas of northeastern Syria. After an assessment, the joint choice fell on Raqqa, which at that time was over 80% destroyed in parts of the city center yet still housed nearly a quarter million residents.

For this project, we decided for the first time to use a new concept for us: working with local implementation partners. In simple terms, CADUS handles administrative work, procurement, coordination with donors, and strategic planning of the overall project, while local professionals carry

out the medical work. This approach reduces costs by eliminating the need for international staff transfers, ensures continuous work in the deployment area, and enables people to once again support themselves rather than rely on aid. This is a critical factor, especially in areas recovering from conflicts.

Set up as a "Primary Health Care Station," the practice is most comparable to a general medical practice in Germany. It handles everything that can be treated on an outpatient basis, with referrals to specialized clinics within Raqqa for specific procedures. From April to December, an average of nearly 100 people were treated per day, amounting to 17,000 cases over the entire period, or 7% of the total population. Most of our patients were children (54%), with predominant cases being internal medicine (40%) and emergency care (17%).

At the time of writing, discussions are ongoing about extending the project into the third quarter of 2019, depending on funding from UN organizations and access via the Iraqi-Syrian border. We hope to continue supporting and expanding the urgently needed medical care in Raqqa together with our project partners in 2019.



Bosnia

The situation at the European external border constantly concerns us at CADUS, especially with our project in Bosnia. Alongside our projects in Syria and Iraq, Bosnia might not seem like a logical place for CADUS to operate. However, current European migration policies prevent people fleeing war, violence, or hunger from crossing the borders of the European Union, resulting in more and more people being stranded in Bosnia.

In early October, we sent a small assessment team to get a clear picture of the situation. This assessment revealed significant gaps in the medical care for refugees, problems that were only expected to worsen with the approaching winter. Bosnia-Herzegovina, a country that experienced the horrors of war not too long ago, is one of the poorest countries in Europe and has very limited resources to support the passing refugees.

For the mission in Bosnia, we converted a van into a mobile treatment room in our Makerspace in October. Additionally, we equipped our pickup truck with a structure to transport the necessary materials. With these two vehicles, we launched our “Emergency Response Balkan” mission in mid-November. Shortly after our arrival, the first cold wave hit, bringing severe cases of frostbite and highlighting the urgent need for our work in Sarajevo.

By the end of December, our team had conducted 1,088 consultations and established a stable foundation for continuing the project into the early months of 2019.



Crisis Response Makerspace

The workshop at Holzmarkt, which was so central to converting our two trucks into a mobile hospital, has, in our opinion, much greater potential. In line with our motto of continuously improving and developing technical aspects within the project area, 2018 was dedicated to creating a space where various civil society groups, universities, and NGOs can come together and develop ideas. We have established a place where we can quickly build concepts like mobile clinics or pickup truck structures independently, where there is room for experimentation, and where like-minded individuals can think and tinker over projects together. The Crisis Response Makerspace is intended to practically address our needs from fieldwork through collaborative work and become a hub for generating new project ideas. Therefore, we have and will continue to host a weekly open day where building projects are executed, plans are devised, and connections are made.

Equipping the workshop with the necessary machines was a long process, but we are now capable of carrying out both metal and woodwork independently. Welding, sawing, milling, drilling – all possible.

This year, we accomplished a lot, even if not on the scale of our mammoth “Mobile Hospital” project. We designed and built frames for pickups to enable our equipment to be transferred from larger equipment to smaller, all-terrain vehicles. This allows our teams to bring exactly what they need into an area, adapting to the situation. We also converted a refrigerated truck into a shower truck and completed it in our Makerspace. Together with the mobile medical transporter, this vehicle will soon be deployed to the European external borders, such as in the Balkans, to provide basic hygiene services to refugees.

Additionally, as part of the EMT 1 classification (see below), our hospital system underwent a thorough revision. Much of what we had already designed and planned needs to be adapted, made



Welding in the Makerspace. Photo: Christoph Löffler

smaller, and more mobile. Some areas, such as water supply, wastewater, and hygiene, are being completely redeveloped. Our goal is to work with the highest possible quality while minimizing material bulk. Other organizations may have almost unlimited storage and transport capabilities but take longer to set up. Our small size should become our strength; we aim to be handy, highly mobile, and quick to set up. This also means that almost everything needs to fit into boxes that can be moved by a maximum of six people.

A converted van served as a mobile clinic for the mission. Photo: Christoph Löffler



The test drop in Switzerland.
Photo: Ruben Neugebauer

AERU (Airborne Emergency Response Unit)

In the AERU project, CADUS, in collaboration with the Swiss Humanitarian Pilots Initiative (HPI), developed an airdrop system for medical emergency aid. This system utilizes used emergency parachutes that are no longer safe for human use. A box is dropped with these parachutes, equipped with a special absorption layer to cushion the impact.

HPI took on the task of designing the harness system for the parachute and its attachment to the box. CADUS was responsible for developing a suitable cushioning layer. Honeycomb paper (corrugated cardboard) was quickly identified as a suitable material for absorbing the impact energy. Through drop tests with various weights and impact angles, the impact area and the required material properties were precisely determined. From these tests, a physical approach was developed to estimate the G-force acceleration upon impact, the cross-sectional area, and the material layer thickness. This allows the cushioning layer to be adjusted to the weight of the box, enabling

the safe airdrop of high-quality and sensitive medical equipment. In collaboration with HPI pilots, CADUS conducted initial test drops from a propeller plane in Switzerland in September 2018. These drops were supervised and approved by the Swiss Federal Office of Civil Aviation. CADUS is now recognized as an organization with civilian airdrop capabilities in Switzerland. This civilian airdrop system aims to improve medical emergency care in isolated regions, such as those affected by earthquakes or floods. It also enables doctors and paramedics to quickly reach the affected area via regular parachute jumps. Further test drops are planned to test the system under real conditions and to measure the accelerations that occur. Of particular interest are the accelerations observed when the parachute opens.

REMO²HBO

The remo²hbo research project, based at HTW Berlin and Beuth University of Applied Sciences Berlin, emerged from our experiences during our first training missions in northeastern Syria

in 2015/16. This experience fueled the desire to provide medical technology to economically weaker regions outside traditional markets, making it accessible to the local population

The presentation of remo²hbo. Photo: CADUS

Following the project's launch last year and the development of the requirements profile for the measuring devices, these considerations have now been practically implemented. According to the requirements profile, the components of a vital parameter measuring device were designed and tested, primarily at Beuth University, while the software development was collaboratively handled at the Center for Biomedical Image and Information Processing (CBMI). Throughout the year, the project was presented at scientific symposia and, by the end of the year, it entered the final testing phase before prototype manufacturing.

Once the first measuring devices are produced and presented at trade fairs, we hope to collab-

University projects

Building on the research project for constructing robust vital parameter measuring devices, several other projects at HTW Berlin started this year. In collaboration with the "Industrial Design" program, a practical thesis was developed, focusing on a modular transport box for humanitarian missions. The "Emergency Box," which can be integrated into other transport modules and features innovative design, was conceptualized at HTW and prototyped in the CADUS Makerspace. This marks the first completed technical project in cooperation with universities, with CADUS playing a leading role in its development, design, and manufacturing. As part of our "Mobile Hospital 2.0," it is set to become a core element of our logistics once mass production is complete.

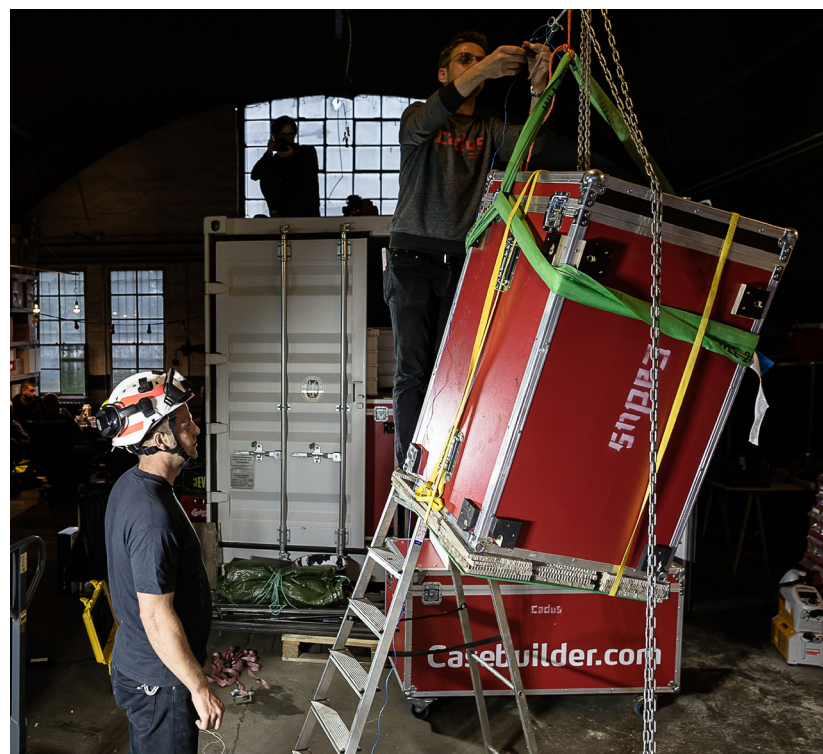
For the first time, CADUS established a teaching project at HTW this year. As part of the "General Scientific Supplementary Subjects" (AWE), which are mandatory for all students, a practical seminar was offered focusing on innovative solutions for humanitarian disaster relief. Together with the students, problem areas were analyzed, solutions were designed, and implemented in the Makerspace. This seminar resulted in a mobile toilet solution for field deployment and a geo-mapping app intended to provide access to information and humanitarian services in crisis regions.

The drop device is tested in the Makerspace before the flight. Photo: Till Rimmele



orate with our project partners to manufacture a small series and test them in our missions.

Another thesis from the Computer Science department focused on improving our crewing platform. It involved analyzing content weaknesses, developing and programming a simpler user interface, and ultimately integrating it into the existing app. This aims to simplify the registration of volunteers in our internal database, efficiently expanding the necessary pool of personnel for missions. Close collaboration with universities allows us to fulfill a long-held desire: to discuss needs observed during our missions with researchers and industry promptly and, ideally, develop new concepts that can be deployed on-site. In this way, we aim to be a small innovation engine while focusing on the actual needs of those affected.



EMT Classification

In October 2018, CADUS began the process of classification by the World Health Organization (WHO) as a Type 1 Mobile Emergency Medical Team (EMT). The classification is a relatively new procedure through which the WHO aims to ensure the quality of humanitarian aid in disasters and crises. In the future, only organizations that have successfully undergone the classification process will have access to disaster areas.

In 2017, during a field visit by the WHO to our Trauma Stabilization Point in Mosul, a representative suggested that CADUS participate in the procedure to be eligible for future humanitarian missions requested by the WHO. We then applied to join the process. In September 2018, a contract was signed between WHO and CADUS, establishing a one-year mentoring program leading up to the classification day in 2019. The first visit by our mentor took place in October, where an “inventory” was conducted to determine in which areas CADUS was ready for classification and where

improvements were needed.

Following this, we set to work reviewing and improving our guidelines, equipment, and practices in human resources, technical solutions, and medical standards. For CADUS, the mentoring program represents an opportunity to further enhance our structure and operations under expert guidance, enabling us to better meet our commitment to providing high-quality humanitarian aid.

Additionally, the EMT initiative has proven to be an opportunity to expand our network and engage with other Emergency Medical Teams and stakeholders in humanitarian aid. CADUS is a founding member of the D-EMT initiative, which aims to network and cooperate German EMTs. Our participation in an earthquake emergency exercise in Armenia in December 2018 brought valuable new contacts and insights for further areas of responsibility.

E-Learning Platform and Telemedicine

At the end of 2015, it became extremely difficult for CADUS to cross the border into Syria, which halted the medical training for local first responders that had just begun. In response, we started developing an e-learning platform in 2016, which was further expanded in 2018.

The project aims to train paramedics who can provide initial medical care in the future. Learning materials on our e-learning platform are accessible via mobile devices, even without a constant internet connection. Course participants can

use the local server as a library to download all the materials they need to their smartphones. Once a learning unit is completed, the acquired knowledge is tested and reinforced. Test results are synchronized with the server as soon as an internet connection is available again. This minimizes the prerequisites for training medical personnel and enables knowledge transfer. Thus, educational operations can be maintained independently of political changes regarding physical presence.



In 2018, the learning materials on the e-learning platform were expanded in content and graphics and revised didactically. The platform operator further developed the technical side and resolved technical issues.

The crowd-based telemedicine project was conceptually revised in 2018, and new partners were found for its implementation. The goal is to counteract the (temporary) shortage of experienced medical professionals in a specific area, such as Syria, and to network specialists from various medical fields online. Medical cases can be uploaded to a platform, and the connected, geographically dispersed doctors can take on

these cases according to their capacities and specializations. The platform aims to enable medical personnel on-site to receive telemedical support from around the world in real-time during emergencies. Beyond acute emergencies, rare diseases in a geographic area can be diagnosed and treated with the guidance of doctors from other regions with more experience in the relevant medical condition.

The year 2018 focused on expanding the medical equipment for the telemedicine project, attracting new cooperation partners affiliated with university hospitals. An intensive testing phase was initiated at the end of the year.

Equipment for missions is being packed.
Photo: Christoph Löffler



FINANCE REPORT

In 2018, our financial situation further stabilized. Winning a prize and receiving institutional funding for our activities in northeastern Syria led to

a steadying of our association's budget. A broad donor base also allowed us some budget flexibility and the expansion of our activities.

Income

In 2018, CADUS e.V. significantly increased its financial resources. The total financial volume amounted to €1,236,689. The largest influx came from a one-time prize money of €405,000. Additionally, institutionally funded project-related funds increased in 2018, mainly acquired in connection with our activities in northeastern Syria. CADUS e.V. also received moderate funding from private foundations in 2018. Moreover, the

number of regular donors continued to grow, and new long-term donors were acquired. We extend our heartfelt thanks to all our supporters for their contributions.

In 2018, we received:

234 Individual Donations

1194

20

1

Institutional Donation (WHO)

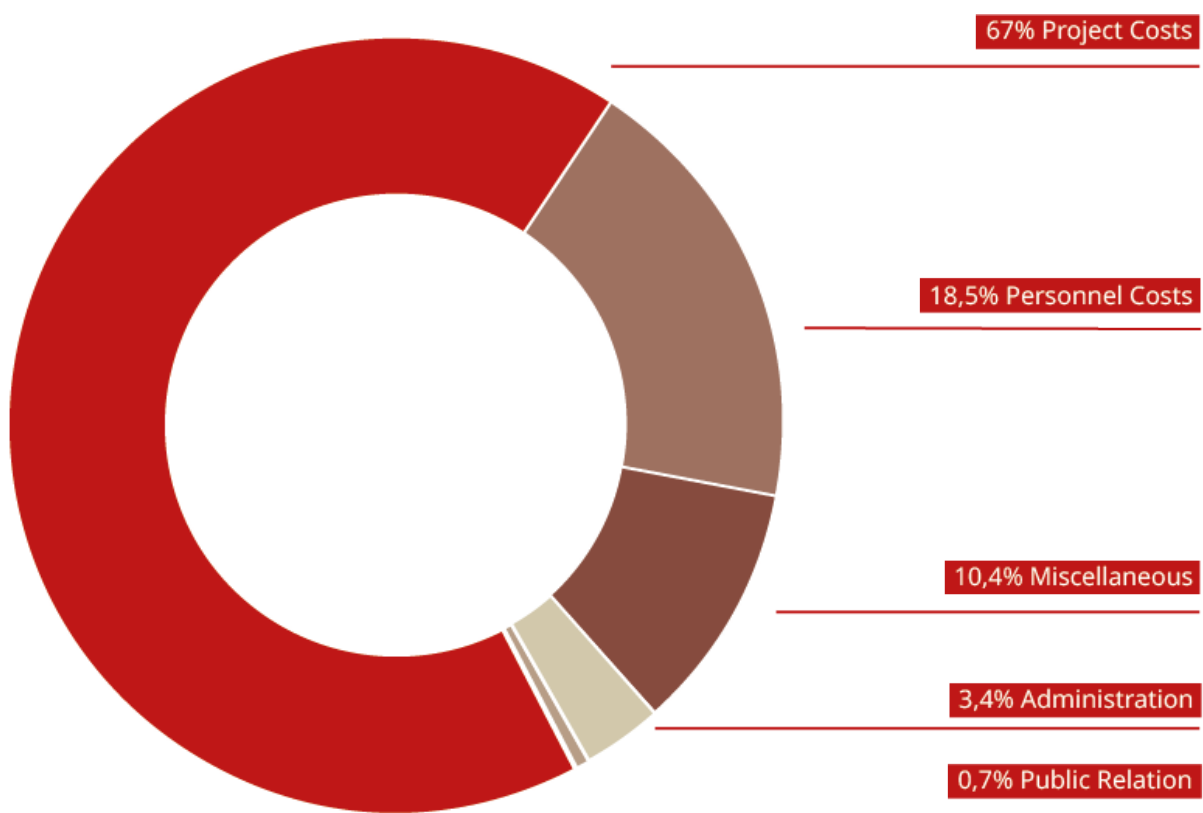
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other donations (Associations, Foundations, etc.)

Expenses

In line with the expansion of our activities and project work, our expenditures also increased, totaling approximately €1,011,233. Of this, €677,034 (67%) was directly allocated to projects (excluding salaries). Internal administration costs amounted to €34,745 (3.4% of total income). Only €6,916 (0.7% of total expenditures) was spent on public relations and representation. Personnel

costs totaled €187,168 (18.5% of total expenditures), of which €9,360 was paid as volunteer allowances and €4,800 as compensation for trainers. This highlights the professionalization that CADUS e.V. underwent in 2018. While a significant portion of the work was still performed on a purely voluntary basis in 2017, most activities could be financially compensated in 2018.



Income-expenditure surplus calculation

(all amounts in euros)

| | 2018 | 2017 |
|--|------------------|-------------------|
| A. Idealistic Area | | |
| I. Non-taxable Income | 1236689,17 | 100,00 |
| II. Non-deductible Expenses | | |
| | 46177,38 | 20494,08 |
| Depreciation | 187618,52 | 40382,93 |
| Personnel Costs | 80032,11 | 123130,83 |
| Travel Expenses | 39380,03 | 38970,14 |
| Room Costs | 704203,07 | 315913,12 |
| Other Expenses | 179278,06 | -538891,10 |
| Profit/Loss Idealistic Area | | |
| B. Tax-neutral Items | | |
| I. Idealistic Area | 0,00 | 801856,86 |
| | 22802,00 | 801856,86 |
| Tax-neutral Income | 22802,00 | 801856,86 |
| Non-deductible Expenses | | |
| Profit/Loss Tax-neutral Items | 0,00 | 2859,83 |
| C. Asset Management | 0,00 | -2859,83 |
| Expenses/Advertising Costs | | |
| Profit/Loss Asset Management | | |
| D. Other Business Operations | 0,00 | 2521,74 |
| I. Other Business Operation 1 | 0,00 | 3058,66 |
| | | |
| Revenue from Sales | 0,00 | 700,00 |
| Material Expenses | 0,00 | -1236,92 |
| II. Other Business Operation 2 | 156476,06 | 258969,01 |
| Material/Service Expenses | 15.647,61 | 0,00 |
| Profit/Loss Other Business Operations | 140828,45 | 0,00 |

Asset overview

(all amounts in euros)

| | 2018 | 2017 |
|-------------------------------------|------------------|-------------------|
| E. Annual Results | | |
| Allocation to Free Reserves | | |
| F. Retained Earnings | 141119,00 | 77391,00 |
| B. Current Assets | | |
| I. Receivables, Other Assets | 12178,14 | 7017,20 |
| II. Cash, Bank | 442241,77 | 280097,76 |
| | 0,00 | 0,00 |
| C. Prepaid Expenses | 0,00 | 102,04 |
| Balance of VAT Accounts | 595538,91 | 364608,00 |
| Liabilities | | |
| A. Club Assets | 44551,10 | 28903,49 |
| I. Profit Reserves | 326795,13 | 67826,12 |
| II. Retained Earnings | 0,00 | 258969,01 |
| III. Annual Result | | |
| | 8506,00 | 83251,56 |
| B. Liabilities | 0,00 | 112,67 |
| Bonds | 112,67 | 0,00 |
| Other Liabilities | 595538,91 | 364.608,00 |

The 2018 annual financial statements of CADUS e.V. were prepared by the auditing and tax consulting firm Kowert, Schwanke & von Schwerin and serve as the basis for the tax assessment by the Berlin Tax Office for Corporations I for the year 2018.

IMPRINT

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