Initial Adjustment ORI Date of Incident / / / Month   Incident No. Page of of Same Incident   Offense Information   Enter an offense code and the number of victims for each bias motivated offense.   Offense Number   Code of victims   01 Murder   07 Motor Vehicle Theft   Offense #1 02   03 Robbery   09 Simple Assault   Offense #3 04   04 Aggravated Assault   01 Intimidation   Offense #5 06   06 Larceny-Theft   Check one location for Offense #1.   01 Air/Bus/Train Terminal   02 Bank/Savings and Loan   24 Specialty Store (TV, Fur, etc.) 25 Other/Unknown
Offense Information         Enter an offense code and the number of victims for each bias motivated offense.         Offense Number         Code       of victims         01 Murder       07 Motor Vehicle Theft         Offense #1       02 Rape         03 Robbery       09 Simple Assault         06 Interse #3       04 Aggravated Assault       10 Intimidation         06 Interse #4       05 Burglary       11 Destruction/Damage/Vandalism         06 Interse #5       06 Larceny-Theft         Location Information       24 Specialty Store (TV, Fur, etc.)
Enter an offense code and the number of victims for each bias motivated offense.         Offense       Number         Code       of victims         01       Murder       07         Offense #1       02       Rape       08         Offense #2       03       Robbery       09       Simple Assault         Offense #3       04       Aggravated Assault       10       Intimidation         Offense #4       05       Burglary       11       Destruction/Damage/Vandalism         Offense #5       06       Larceny-Theft       Image: Content of the content
Offense       Number       01 Murder       07 Motor Vehicle Theft         Offense #1       02 Rape       08 Arson         Offense #2       03 Robbery       09 Simple Assault         Offense #3       04 Aggravated Assault       10 Intimidation         Offense #4       05 Burglary       11 Destruction/Damage/Vandalism         Offense #5       06 Larceny-Theft       11 Destruction/Damage/Vandalism         Cection Information         Offense #1.         01   Air/Bus/Train Terminal       24   Specialty Store (TV, Fuc.)
Code       of victims       01 Murder       07 Motor Vehicle Theft         Offense #1       02 Rape       08 Arson         Offense #2       03 Robbery       09 Simple Assault         Offense #3       04 Aggravated Assault       10 Intimidation         Offense #4       05 Burglary       11 Destruction/Damage/Vandalism         Offense #5       06 Larceny-Theft       11 Destruction/Damage/Vandalism         Location Information         Offense #1.         01       Air/Bus/Train Terminal       24
Offense #1 02 Rape 08 Arson   Offense #2 03 Robbery 09 Simple Assault   Offense #3 04 Aggravated Assault 10 Intimidation   Offense #4 0 05 Burglary 11 Destruction/Damage/Vandalism   Offense #5 0 06 Larceny-Theft <b>Location Information</b> Otheck one location for Offense #1. 04 Aggravated Assault   01 Air/Bus/Train Terminal 24   Specialty Store (TV, Fur, etc.)
Offense #2 03 Robbery 09 Simple Assault   Offense #3 04 Aggravated Assault 10 Intimidation   Offense #4 05 Burglary 11 Destruction/Damage/Vandalism   Offense #5 06 Larceny-Theft    Location Information  Check one location for Offense #1.  01 Air/Bus/Train Terminal  24 Specialty Store (TV, Fur, etc.)
Offense #3       04 Aggravated Assault       10 Intimidation         Offense #3       05 Burglary       11 Destruction/Damage/Vandalism         Offense #4       06 Larceny-Theft         Location Information         Check one location for Offense #1.         01       Air/Bus/Train Terminal       24       Specialty Store (TV, Fur, etc.)
Offense #4 05   Offense #5 06   Location Information    Check one location for Offense #1.   01 Air/Bus/Train Terminal    24  Specialty Store (TV, Fur, etc.)
Offense #5 06 Larceny-Theft   Location Information Check one location for Offense #1. 01
Location Information       Check one location for Offense #1.       01
Check one location for Offense #1.         01
01 🗌 Air/Bus/Train Terminal 24 🗌 Specialty Store (TV, Fur, etc.)
02 🗌 Bank/Savings and Loan 25 🗍 Other/Unknown
03 🗌 Bar/Night Club 37 🗌 Abandoned/Condemned Structure
04 Church/Synagogue/Temple/Mosque 38 Amusement Park
05 Commercial/Office Building 39 Arena/Stadium/Fairgrounds/Coliseum
06 Construction Site 40 ATM Separate from Bank
07 Convenience Store 41 Auto Dealership New/Used
08 Department/Discount Store 42 Camp/Campground
09 Drug Store/Dr.'s Office/Hospital 44 Daycare Facility
10 Image: Field/Woods45 Image: Dock/Wharf/Freight/Modal Terminal
11 Government/Public Building46 Gram Facility
12 Grocery/Supermarket47 Gambling Facility/Casino/Race Track
13   Highway/Road/Alley/Street   48   Industrial Site
$14 \square Hotel/Motel/etc.                                     $
15 🔲 Jail/Prison 50 🔲 Park/Playground
$16 \square Lake/Waterway \qquad 51 \square Rest Area$
17 $\Box$ Liquor Store 52 $\Box$ School-College/University
18 Parking Lot/Garage 53 School-Elementary/Secondary
19 In Rental Storage Facility   54 In Shelter-Mission/Homeless
20 Residence/Home   55 Shopping Mall
21 Restaurant 56 Tribal Lands
23 Service/Gas Station 57 Community Center

# If more than one offense occurred, enter a location code for each additional offense having a different location than Offense #1.

	Location		
	Code		
Offense #2			
Offense #3			
Offense #4			
Offense #5			

#### **Bias Motivation Information**

#### Check up to five bias motivations for Offense #1.

### Race

- 11 🗌 Anti-White
- 12 Anti-Black or African American
- 13 🔲 Anti-American Indian or Alaska Native
- 14 🗌 Anti-Asian
- 15 🗌 Anti-Multiple Races, Group
- 16 🗌 Anti-Native Hawaiian or Other Pacific Islander

# Religion

- 21 🗌 Anti-Jewish
- 22 🗌 Anti-Catholic
- 23 🗌 Anti-Protestant
- 24 🗌 Anti-Islamic (Muslim)
- 25 🗌 Anti-Other Religion
- 26 🔲 Anti-Multiple Religions, Group
- 27 🔲 Anti-Atheism/Agnosticism

# Ethnicity

- 32 🗌 Anti-Hispanic or Latino
- 33 🗌 Anti-Not Hispanic or Latino

# **Sexual Orientation**

- 41 🗌 Anti-Gay (Male)
- 42 🗌 Anti-Lesbian
- 43 🔲 Anti-Lesbian, Gay, Bisexual, or Transgender (Mixed Group)
- 44 🗌 Anti-Heterosexual
- 45 🗌 Anti-Bisexual

# Disability

- 51 🗌 Anti-Physical Disability
- 52 🗌 Anti-Mental Disability

## Gender

- 61 🗌 Anti-Male
- 62 🗌 Anti-Female

# **Gender Identity**

- 71 🗌 Anti-Transgender
- 72 🗌 Anti-Gender Non-Conforming

# If more than one offense occurred, enter up to five bias motivations for each additional offense having a different bias motivation than Offense #1.

	Bias	Bias	Bias	Bias	Bias
	#1	#2	#3	#4	#5
Offense #2					
Offense #3					
Offense #4					
Offense #5					

## Victim Information

#### Check all applicable victim types for each offense listed above.

		Offense	Offense	Offense	Offense	Offense
		#1	#2	#3	#4	#5
1	Individual*					
2	Business					
3	Financial Institution					
4	Government					
5	<b>Religious</b> Organization					
7	Other					
8	Unknown					

## \*Indicate the number of Individuals (persons) who were victims in the incident.

Total number of victims.

Total number of victims 18 and over.

Total number of victims under 18.

## **Offender Information**

### Indicate the number of Individuals (persons) who were offenders in the incident.

Total number of offenders. If unknown, enter 00.

Total number of offenders 18 and over. If unknown, enter 00.

Total number of offenders under 18. If unknown, enter 00.

## **Race and Ethnicity of Offender or Offender Group**

## Check one race and one ethnicity.

### Race

- 1 🗌 White
- 2 🔲 Black or African American
- 3 🔲 American Indian or Alaska Native
- 4 🗌 Asian
- 5 🔲 Group of Multiple Races
- 6 🔲 Unknown
- 7 🔲 Native Hawaiian or Other Pacific Islander

# Ethnicity

- H 🗌 Hispanic or Latino
- N 🔲 Not Hispanic or Latino
- M 🔲 Group of Multiple Ethnicities
- U 🗌 Unknown

This report is authorized by Title 28, Section 534, U.S. Code, and the Hate Crime Statistics Act of 1990. Even though you are not required to respond, your cooperation in using this form to report hate crimes known to law enforcement during the quarter will assist the FBI in compiling timely, comprehensive, and accurate data regarding the incidence and prevalence of hate crime throughout the Nation. Please submit this report quarterly, by the 15th day after the close of the quarter, and any questions to the FBI, Criminal Justice Information Services Division, Attention: Uniform Crime Reports/Module E-3, 1000 Custer Hollow Road, Clarksburg, West Virginia 26306; telephone 304-625-4830, facsimile 304-625-3566. Under the Paperwork Reduction Act, you are not required to complete this form unless it contains a valid OMB control number. The form takes approximately 7 minutes to complete. Instructions for preparing the form appear below.

#### GENERAL

This report is separate from and in addition to the traditional Summary Reporting System submission. In hate crime reporting, there is no Hierarchy Rule. Offense data (not just arrest data) for Intimidation and Destruction/Damage/Vandalism of Property should be reported. On this form, all reportable bias motivated offenses should be included regardless of whether arrests have taken place. Please refer to the publication *Hate Crime Data Collection Guidelines and Training Manual* for additional information.

#### QUARTERLY HATE CRIME REPORT

At the end of each calendar quarter, each reporting agency should submit a single Quarterly Hate Crime Report, together with an individual Hate Crime Incident Report for each bias motivated incident identified during the quarter (if any). If no hate crimes occurred during the quarter, the agency should submit only the Quarterly Hate Crime Report.

The Quarterly Hate Crime Report should be used to identify your agency, to state the number of bias motivated incidents being reported for the calendar quarter, and to delete any incidents previously reported that have been determined during the reporting period not to have been motivated by bias.

#### HATE CRIME INCIDENT REPORT

The Incident Report should be used to report a bias motivated incident or to adjust information in a previously reported incident. Include additional information on separate paper if you feel it will add clarity to the report.

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1

## Instructions for preparing the Hate Crime Incident Report

#### **Administrative Information**

Report Type: (Required.) Indicate the type of report as Initial or Adjustment.

Initial-To report a hate crime incident.

**Adjustment-**To update a hate crime incident previously reported. (Note: This will delete the information already on file and insert the information provided in this report.)

**ORI Number:** (Required.) Enter the nine-character Originating Agency Identifier assigned to your agency.

**Date of Incident: (Required for Initial or Adjustment Reports.)** Provide the date of the hate crime incident in the format of MMDDYYYY.

**Incident Number:** (**Required for Initial or Adjustment Reports.**) Provide an identifying incident number, preferably your case or file number. The number can be up to 12 characters in length. Valid characters include: A through Z, 0 through 9, hyphens, and/or blanks.

Page of of same incident: If additional Incident Reports are used, make an appropriate entry into this portion.

#### **Offense Information**

**Offense Code:** Enter the two-digit offense code for each bias motivated offense. The offense codes that are specific to hate crime are: 01 Murder, 02 Rape, 03 Robbery, 04 Aggravated Assault, 05 Burglary, 06 Larceny-theft, 07 Motor Vehicle Theft, 08 Arson, 09 Simple Assault, 10 Intimidation, and 11 Destruction/Damage/Vandalism.

**Number of Victims:** Enter the number of victims for each bias motivated offense. The field allows for up to a three-digit number to be entered. Number of victims are inclusive of Individual, Business, Financial Institution, Government, Religious Organization, Other, and Unknown.

#### **Location Information**

Offense #1 Location: Check one location for Offense #1.

Additional Offense Locations: Enter a two-digit location code for each additional offense that has a different location than Offense #1.

#### **Bias Motivation Information**

Offense #1 Bias Motivation: Check up to five bias motivations for Offense #1.

Additional Offense Bias Motivations: Enter up to five two-digit bias motivation codes for each additional offense that has a different bias motivation than Offense #1.

## Victim Information

Victim Type: Check all applicable victim types identified within the incident.

**Number of Victims:** When victim type is individual enter the total number of individuals (persons) who were victims in the incident. Enter the total number of individuals (persons) who were victims in the incident that are 18 and over. Enter the total number of individuals (persons) who were victims in the incident that are under the age of 18.

#### **Offender Information**

**Number of Offenders:** Enter the total number of individuals (persons) who were offenders in the incident. If unknown, enter 00 in the two-digit field. Enter the total number of individuals (persons) who were offenders in the incident that were 18 and over. If unknown, enter 00 in the two-digit field. Enter the total number of individuals (persons) who were offenders in the incident that were under the age of 18. If unknown, enter 00 in the two-digit field. Incidents involving multiple offenders must not be coded as Unknown Offender. Indicate an Unknown Offender when nothing is known about the offender including the offender's race. When the Race of Offender(s) has been identified, indicate at least one offender.

#### **Race and Ethnicity of Offender or Offender Group**

**Race:** Check one race for the offender. If there was more than one offender, provide the race of the group as a whole. If the number of offenders is entered as Unknown Offender, then the offender's race must also be indicated as Unknown.

**Ethnicity:** Check one ethnicity for the offender. If there was more than one offender, provide the ethnicity of the group as a whole. If the number of offenders is entered as Unknown Offender, then the offender's ethnicity must also be indicated as Unknown.