



STATEMENT STUDIES SUBMISSION TRANSMITTAL FORM

Please complete, scan, and email this form with your submission.

	DATE:
EMAIL TO: <u>ESTATEMENTSTUDIES@RMAHQ.ORG</u>	
BANK NAME: BANK ADDRESS:	
RMA MEMBER #: RMA CHAPTER #: SUBMISSION GOAL: SUBMISSIONS ENCLOSED:	
# Handwritten/typed: # Hard-copy Spreadsheet or Application	
# Bridge Program: # Microsoft Access table, etc:	
Software Program Used (Vendor & Version): TOTAL SUBMITTED:	
Name of contact completing this form: Phone: Fax	
Email Address:	





AT6	TEMENT STUDIES CONTRACTOR % OF COMPLETION ACCOUNTING, DATA SU	BMISSION FORM
	Bank Name	7 RMA CHAPTER#
2	Address	
3	City State Zip	
4	Company Name (actual or coded)	8 RMA MEMBER#
	LEGAL FORM (Check one) □ Corporation □ Proprietorship □ Partnership □ Other (Specify—Including Subchapter S Corp.)	9 FISCAL YEAR CODE (Check one) 4/1-9/30 □ 1 10/1-3/31 □2
6	Describe Type of Contractor	10 □NAICS or □SIC #
11	TYPE OF FINANCIAL STATEMENT (Please check one; see instructions for details.)	
• • •	□Unqualified □Reviewed □Compiled □Tax Return □Other	
	ASSETS (IN THOUSANDS). USE PARENTHESES TO INDICATE LOSSES, CREDITS, ETC.	Year-end Date
12		
13	Accounts Receivable—Progress Billings	
14	· · · · · · · · · · · · · · · · · · ·	
15	Inventory	
16		
17	All Other Current	
18	Fixed Assets (net)	
19	Joint Ventures & Investments	
20	Intangibles	
21	All Other Noncurrent	
_22	TOTAL ASSETS LIABILITIES (IN THOUSANDS). USE PARENTHESES TO INDICATE LOSSES, CREDITS, ETC.	THERE IS NO UPPER LIMIT ON
23		THERE IS NO OFFER LIMIT ON
23 24		
25		
26	,	
27	Income Taxes Payable	
28	Current Maturities—L/T/D	
	All Other Current	
30	Long-Term Debt	
31	Deferred Taxes	
~~		
32	All Other Noncurrent	
33	Net Worth	
	Net Worth	
33 34	Net Worth	%-OF-COMPLETION ONLY
33 34 35	Net Worth	
33 34 35 36	Net Worth	%-OF-COMPLETION ONLY
33 34 35 36 37	Net Worth	%-OF-COMPLETION ONLY
33 34 35 36 37 38	Net Worth	%-OF-COMPLETION ONLY
33 34 35 36 37 38 39 Ple	Net Worth	%-OF-COMPLETION ONLY
33 34 35 36 37 38 39 Ple	Net Worth TOTAL LIABILITIES & NET WORTH INCOME DATA (IN THOUSANDS). USE PARENTHESES TO INDICATE LOSSES, CREDITS, ETC. Contract Revenues Gross Profit Operating Profit Profit Before Taxes Income Taxes—Corporations Only ase itemize the following specific annual expenses included in the above Income Data (lines 35 to 39). Be cert penses incurred during the past year. Do not leave blank—if zero, so indicate. If unavailable, use N/A. (IN THOUSANDS)	%-OF-COMPLETION ONLY
33 34 35 36 37 38 39 Ple	Net Worth	%-OF-COMPLETION ONLY
33 34 35 36 37 38 39 Ple exp	Net Worth	%-OF-COMPLETION ONLY
33 34 35 36 37 38 39 Ple exp 40 41 42	Net Worth	%-OF-COMPLETION ONLY ain to provide only those
33 34 35 36 37 38 39 Ple exp	Net Worth	%-OF-COMPLETION ONLY ain to provide only those
33 34 35 36 37 38 39 Ple exp 40 41 42	Net Worth	%-OF-COMPLETION ONLY ain to provide only those

Return completed statements to:

By Email:

estatementstudies@rmahq.org

By Mail:

RMA, Statement Studies Unit, Commerce Center 2005 Market Street, Ste 36 Philadelphia, PA 19103-1628



CONTRACTOR DEFINITIONS

- **1-3** Fill in this information clearly and completely. Do not use unrecognizable abbreviations. Show the correct zip code.
- 4 Identify the firm for which you are submitting data, including its state and zip code. You may use the actual name of the firm, but to ensure complete confidentiality, RMA prefers that you use a code devised by your bank.
- **5** Check (\square) one box to indicate the firm's legal form of organization.
- **6** Provide a full description of the type of contractor. An agency report is usually a good source for this information.
- 7 Enter your RMA chapter number. This number and your bank's RMA member number (8) must be consistent on all the forms submitted by your bank.
- 8 Your bank's RMA member number.
- 9 Check (II) the appropriate box to indicate the period into which the firm's fiscal year-end falls:
 - April 1 to September 30 check □ 1
 - October 1 to March 31 check □ 2
- 10 The SIC or 6-digit NAICS number must be entered on all forms.
- 11 Check the appropriate box for which you are supplying data: U = Unqualified; R = Reviewed; C = Compiled; T = Tax Return; O = Other.
- 12 All Cash, Marketable Securities, and other near-cash items. Excludes Sinking Funds.
- **13** Amounts billed on current contracts excluding retention.
- 14 Amounts held back by customers on current contracts as retention.
- **15** Costs attributable to equipment, small tools, supplies, and other deferred costs related to contracts in
 - progress wherein a portion of the cost applies to work not yet performed.
- **16** The difference between the total of costs and recognized estimated earnings to date and the total billings to date.
- 17 Any other Current Assets. Does not include Prepaid Items.
- **18** All property, plant, leasehold improvements and equipment, net of accumulated depreciation or depletion.
- **19** The total of investments and equity in joint ventures.
- 20 Intangible Assets, including goodwill, trademarks, patents, catalogs, brands, copyrights, formulas, franchises, and mailing lists, net of accumulated amortization.
- 21 Prepaid Items and other Noncurrent Assets.
- 22 Sum of 12 through 21. Must agree with 34.
- **23** All short-term note obligations, including bank and commercial paper. Does not include Trade Notes

Payable.

- **24** Open accounts and note obligations due to the trade.
- 25 Amounts held back as retention in payments to subcontractors on current contracts.
- 26 The difference between the total billings to date and the total of costs and recognized estimated earnings to date.
- 27 Income taxes, including current portion of deferred taxes.
- 28 The portion of Long-Term Obligations that is due within the next fiscal year.
- 29 Any other Current Liabilities, including bank overdrafts and accrued expenses.
- **30** All Senior Debt, including bonds, debentures, bank debt, mortgages, deferred portions of long-term debt, and capital lease obligations.
- 31 Total of all Deferred Taxes.
- **32** Any other Noncurrent Liabilities, including subordinated debt, and liability reserves.
- 33 Difference between Total Assets and Total Liabilities. Minority interest is included here.
- 34 Sum of 23 through 33. Must agree with 22.
- **35** REVENUES RECOGNIZED UNDER % OF COMPLETION METHOD.
- **36** Contract Revenues (**35**) minus Cost of Revenues. If, because of its nature, a firm does not have a Cost of Revenues figure, enter the Contract Revenues figure again on **36**. Reclassify any miscellaneous expense items that may have been shown in Cost of Revenues.





- **37** Gross Profit (**36**) minus Operating Expenses (including all Selling, General & Administrative Expenses and Depreciation). Do not include Interest Expense here.
- 38 This figure may differ from Operating Profit because of miscellaneous Other Income and Expenses (net). This includes such items as Interest Expense, Miscellaneous Expenses not included in General & Administrative Expenses, netted against recoveries, Interest Income, Dividends Received, and Miscellaneous Income. Enter only the Earnings Before Taxes figure. RMA will calculate the Other Income and Expenses (net) figure.
- **39** For corporations only (excluding Subchapter S Corporations), do one of the following:
 - a) Enter the actual tax, if you know it, on 39.
 - b) Enter "0" (the figure zero) on **39** if you know that no taxes were owed.
 - c) Enter a figure (in parentheses) on **39** if there was a net tax credit.
 - d) Enter "N/A" on **39** if you know that taxes were paid, but you do not know the amount. In other words, do not estimate.

Itemized Expense Data: 40 through 42 are for itemizing annual expense data that are included in the Income Data section. Do not leave this section blank. If the expense was zero (actual or through rounding), please so indicate by entering a "0." If the figure is unknown, enter "N/A." USE ANNUAL EXPENSES ONLY.

- **40** The sum of all such noncash expenses incurred during the year covered by the statement. USE ANNUAL EXPENSES ONLY, not accumulated totals from the balance sheet.
- 41 The sum of all Interest Expenses incurred during the year. Do not net against Interest Income.
- **42** Total salaries, bonuses, commissions, and other monetary remuneration to all officers, directors, and/or owners of the firm during the year covered by the statement. This would include drawings of partners and proprietors.

This space is provided to explain any item(s) that may have significantly altered the normal composition of the firm's statements. Please refer specifically to the fiscal year under discussion. If more space is needed, please attach additional sheets