

## STATEMENT STUDIES SUBMISSION TRANSMITTAL FORM

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

	DATE:
EMAIL TO: <u>ESTATEMENTSTUDIES@PROSIGHT.OR</u>	<u> </u>
BANK NAME: BANK ADDRESS:	
PROSIGHT MEMBER #: PROSIGHT CHAPTER #: 2026 SUBMISSION GOAL: SUBMISSIONS ENCLOSED:	
# Handwritten/typed: _ # Hard-copy Spreadsheet or Application Generated:	
# bridge Program.	
# Microsoft Access table, etc: Software Program Used (Vendor & Version): TOTAL SUBMITTED:	
Name of contact completing this form: Phone: Fax	
Email Address:	



1	EMENT STUDIES CONTRACTOR % OF COMPLETION ACCOUNTING, DATA SU	
	Bank Name	7 ProSight CHAPTER #
	Address	
	City State Zip Zip	
4	Company Name (actual or coded) State (of Co.) Zip (of Co.)	8 ProSight 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
	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	Cash & Equivalents	
13	Accounts Receivable—Progress Billings	
14	Accounts Receivable—Current Retention	
15	Inventory	
16	Costs & Estimated Earnings in Excess of Billings	
17	All Other Current	
18		
19	Fixed Assets (net)	
20	Intangibles	
21 22	All Other Noncurrent	
22	TOTAL ASSETSLIABILITIES (IN THOUSANDS). USE PARENTHESES TO INDICATE LOSSES, CREDITS, ETC.	THERE IS NO UPPER LIMIT OF
23	Notes Payable—Short Term	THERE IS NO SITE EXCEINITION
24	Accounts Payable—Trade	
25	Accounts Payable—Retention	
26	Billings in Excess of Costs & Estimated Earnings	
27	Income Taxes Payable	
28	Current Maturities—L/T/D	
	All Other Current	
^^	Long-Term Debt	
	Deferred Taxes	
31		
31 32	All Other Noncurrent	
31 32 33	Net Worth	
31 32 33	Net WorthTOTAL LIABILITIES & NET WORTH	
31 32 33 34	Net Worth	
31 32 33 34	Net WorthTOTAL LIABILITIES & NET WORTH	
31 32 33 34	Net Worth	%-OF-COMPLETION ONLY
31 32 33 34 35 36	Net Worth  TOTAL LIABILITIES & NET WORTH.  INCOME DATA (IN THOUSANDS). USE PARENTHESES TO INDICATE LOSSES, CREDITS, ETC.  Contract Revenues  Gross Profit  Operating Profit.	%-OF-COMPLETION ONLY
31 32 33 34 35 36 37 38	Net Worth	%-OF-COMPLETION ONLY
31 32 33 34 35 36 37 38 39	Net Worth	%-OF-COMPLETION ONLY
31 32 33 34 35 36 37 38 39	Net Worth	%-OF-COMPLETION ONLY
31 32 33 34 35 36 37 38 39	Net Worth	%-OF-COMPLETION ONLY
31 32 33 34 35 36 37 38 39 Plea	Net Worth	%-OF-COMPLETION ONLY
37 38 39 Plea exp	Net Worth	%-OF-COMPLETION ONLY
31 32 33 34 35 36 37 38 39 Plea	Net Worth	%-OF-COMPLETION ONLY

## Return completed statements to:

By Email: <a href="mailto:estatementstudies@prosightfa.org">estatementstudies@prosightfa.org</a>

By Mail:

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

## 2026 CONTRACTOR DEFINITIONS

- **1-3** Fill in this information clearly and completely. Do not use unrecognizable abbreviations. Show the correct zip code.
- 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, ProSight prefers that you use a code devised by your bank.
- 5 Check (□) 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 ProSight chapter number. This number and your bank's ProSight member number (8) must be consistent on all the forms submitted by your bank.
- 8 Your bank's ProSight member number.
- 9 Check (

  ) the appropriate box to indicate the period into which the firm's fiscal year-end falls:
  - April 1, 2025 to September 30, 2025 check □ 1
  - October 1, 2025 to March 31, 2026 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. ProSight 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