

STATEMENT STUDIES SUBMISSION TRANSMITTAL FORM

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

DATE: _____

EMAIL TO: ESTATEMENTSTUDIES@PROSIGHT.ORG

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:

STATEMENT STUDIES NON-CONTRACTOR (General) DATA SUBMISSION FORM

1 Bank Name 2 Address..... 3 City State Zip 4 Company Name (actual or coded)..... State (of Co.)..... Zip (of Co.)..... 5 LEGAL FORM (Check one) ☐ Corporation ☐ Proprietorship ☐ Partnership ☐ Other (Specify—including Subchapter S Corp.)..... 6 Describe Primary Product or Service Rendered (Optional).....	7 PROSIGHT CHAPTER # 8 PROSIGHT MEMBER # 9 FISCAL YEAR CODE (Check one) 4/1-9/30 ☐ 1 10/1-3/31 ☐ 2 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.	
12 Cash & Equivalents 13 Trade Receivables—(net) 14 Inventory..... 15 All Other Current..... 16 Fixed Assets (net) 17 Intangibles 18 All Other Noncurrent 19 TOTAL ASSETS	4/1/25-3/31/26
LIABILITIES (IN THOUSANDS). USE PARENTHESES TO INDICATE LOSSES, CREDITS, ETC.	
20 Notes Payable—Short Term..... 21 Current Maturities—L/T/D..... 22 Trade Payables 23 Income Taxes Payable 24 All Other Current..... 25 Long-Term Debt..... 26 Deferred Taxes 27 All Other Noncurrent 28 Net Worth..... 29 TOTAL LIABILITIES & NET WORTH.....	
INCOME DATA (IN THOUSANDS). USE PARENTHESES TO INDICATE LOSSES, CREDITS, ETC.	
30 Net Sales 31 Gross Profit..... 32 Operating Profit 33 Profit Before Taxes 34 Income Taxes—Corporations Only	
Please itemize the following specific annual expenses included in the above Income Data (lines 30 to 34). Be certain to provide only those expenses incurred during the past year. Do not leave blank—if zero, so indicate. If unavailable, use N/A.	
(IN THOUSANDS)	
35 Depreciation/Depletion/Amortization Expense..... 36 Interest Expense 37 Total Compensation Paid to Officers, Directors, and/or Owners..... 38 Explanation of Unusual Items:	

2026 NON-CONTRACTOR (General) 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, 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** List the firm's primary product or service. 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 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 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. Exclude Sinking Funds.
- 13** All accounts from trade, net of allowance for doubtful accounts.
- 14** Anything constituting Inventory for the firm in question.
- 15** Any other Current Assets. Do not show Prepaid Items here.
- 16** All property, plant, leasehold improvements and equipment, net of accumulated depreciation or depletion.
- 17** Intangible Assets, including goodwill, trademarks, patents, catalogs, brands, copyrights, formulas, franchises, and mailing lists, net of accumulated amortization.
- 18** Prepaid Items and any other Noncurrent Assets.
- 19** Sum of **12** through **18**. Must agree with **29**.
- 20** All Short-Term Note Obligations, including bank and commercial paper. Do not show Trade Notes Payable here.
- 21** The portion of Long-Term Obligations that is due within the next fiscal year.
- 22** Open accounts due to the trade.
- 23** Income taxes, including current portion of deferred taxes.
- 24** Any other Current Liabilities, including bank overdrafts and accrued expenses.
- 25** All Senior Debt, including bonds, debentures, bank debt, mortgages, deferred portions of long-term debt, and capital lease obligations.
- 26** All deferred taxes.
- 27** Any other Noncurrent Liabilities, including Subordinated Debt and Liability Reserves.
- 28** Difference between Total Liabilities (**20** through **27**) and Total Assets (**19**). Minority interest is included here.
- 29** Sum of **20** through **28**. Must agree with **19**.
- 30** Gross Sales, net of Returns and Discounts allowed, if any.
- 31** Net Sales (**30**) minus Cost of Sales. If, because of its nature, a firm does not have a Cost of Sales figure, enter the Net Sales figure again on **31**. Reclassify any miscellaneous expense items that may have been shown in Cost of Sales.
- 32** Gross Profit (**31**) minus Operating Expenses (including all Selling, General & Administrative Expenses and Depreciation). Do not include Interest Expense here.
- 33** 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.

- 34** For corporations only (excluding Subchapter S Corporations), do one of the following:
- a) Enter the actual tax, if you know it, on **34**.
 - b) Enter "0" (the figure zero) on **34** if you know that no taxes were owed.
 - c) Enter a figure (in parentheses) on **34** if there was a net tax credit.
 - d) Enter "N/A" on **34** if you know that taxes were paid, but you do not know the amount. In other words, do not estimate.

Itemized Expense Data: 35 through 37 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 indicate this by entering a "0." If the figure is unknown, enter "N/A." USE ANNUAL EXPENSES ONLY.

- 35** 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.
- 36** The sum of all Interest Expenses incurred during the year. Do not net against Interest Income.
- 37** 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 sheet.