Peer Review Board
Open Session Materials

November 16, 2022
Virtual Meeting
AICPA Peer Review Board
Open Session Agenda
Wednesday November 16, 2022
Teleconference

Date: Wednesday November 16, 2022
Time: 11:00AM – 1:00PM Eastern Time

1.1 Welcome Attendees and Roll Call of Board** – Mr. Kindem/Mr. Bluhm
1.2 Approval of Exposure Draft - Omnibus Enhancements and Technical Corrections* - Mr. Fawley
1.3 Task Force Updates*
  • Standards Task Force Report – Mr. Fawley
  • Oversight Task Force Report – Mr. Bluhm
    o A – AE Benchmark Revisions
  • Education and Communication Task Force Report – Ms. Brenner
1.4 Other Reports*
  • Operations Director’s Report – Ms. Thoresen
  • Report from State CPA Society CEOs – Ms. Pitter
  • Update on National Peer Review Committee – Mr. Wagner
  • Update on the Proposed Criteria for QCM Content – Ms. Rowley
1.5 Other Business** - Mr. Bluhm
1.6 For Informational Purposes*:
  A. Report on Firms Whose Enrollment was Dropped or Terminated
  B. Compliance Update - Firm Noncooperation
  C. Approved 2023 Association Information Forms for Associations of CPA Firms
  D. AICPA Peer Review Program is Hiring! Lead Manager Peer Review
1.7 Future Open Session Meetings**
  A. February 8, 2023 – Teleconference
  B. May 3, 2023 – Teleconference
  C. September 7, 2023 – Teleconference
  D. November 16, 2023 – Teleconference

* Included on SharePoint
** Verbal Discussion
*** Will be provided at a later date
Why is this on the Agenda?
In open session on February 2, 2022, the board approved final issuance of the clarified peer review standards (the standards), which have been effective for peer reviews commencing on or after May 1, 2022. Since then the Standards Task Force (STF) has monitored feedback from users to determine if certain enhancements or technical corrections to the requirements or application and other explanatory material were necessary. The purpose of this agenda item is to obtain approval from the board for issuance of the exposure draft presented in Agenda Item 1.2A, Peer Review Standards Update No. 1, Omnibus Enhancements and Technical Corrections (PRSU No. 1), which has been developed to update various areas in the standards for technical accuracy and to provide further clarification for end-users based on feedback received.

Process for Updating the Standards
As discussed by the board in February and during its most recent meeting on September 7, the board intends to expose changes to the requirements for public comment for a reasonable period in most circumstances. However, discretion will be exercised in determining whether it is appropriate to revise application and other explanatory material without exposure for public comment. Because the updates proposed in PRSU No. 1 include revisions to requirements and the STF believes the changes to application and other explanatory material are important, exposure for public comment is considered appropriate. Furthermore, PRSU No. 1 is intended to start the process of cataloguing revisions to the standards so that end-users may refer to these updates, if needed, to identify the nature, timing and extent of revisions to the standards.

Nature of Proposed Changes in PRSU No. 1
The detailed changes reflected in PRSU No. 1 are summarized in the explanatory memorandum of Agenda Item 1.2A, which are broadly characterized as the following:

- Clarifications to wording of extant requirements or application material to assist users with understanding the original intent
- The introduction of some new requirements or application material paragraphs for consistency with similar requirements in other sections of the standards
- Updates to the example familiarity threat policies and procedures that are utilized by AEs
- Other corrections to various paragraph references for technical accuracy

Feedback Received
The STF and AICPA staff have continually monitored feedback from users of the standards since final issuance, which was discussed in its meetings during August and October. As a result of those discussions, PRSU No. 1 was developed to propose changes considered appropriate to correct or enhance portions of the extant standards.

PRIMA Impact
No direct effect on PRIMA is expected from the proposed changes.

AE Impact
If approved by the board, AEs will consider and apply the revisions to the standards in their processes for administering peer reviews.
Communications Plan
Because the changes proposed within Agenda Item 1.2A are not considered controversial nor present any significant changes to extant requirements and application material, the issuance of the exposure draft will be communicated to users of the standards via traditional communication methods including AE alerts, reviewer alerts and notifications within the PRIMA system.

Manual Production Cycle (estimated)
May 2023.

Effective Date
As proposed, the effective date of the update to the standards is upon final approval by the board, which is tentatively expected to occur during its open session meeting on May 3, 2023. If approved, the standards will be updated and available to users as part of the May 2023 PRPM update.

Board Consideration
The STF asks the board to consider approving for issuance the exposure draft presented in Agenda Item 1.2A with comments due by January 31, 2023, noting that
1. Revisions proposed are not deemed to be extensive or controversial in nature
2. A shorter exposure period (e.g. 30-45 days) would result in a lower response rate due to the timing of issuance and holiday season over the end of November and December, and beyond January 31 is not considered necessary as the extent of changes proposed do not appear to require significant time to review and provide comments.
EXPOSURE DRAFT

Proposed Peer Review Standards
Update No. 1, Omnibus Enhancements and Technical Corrections

(Amends AICPA Standards for Performing and Reporting on Peer Reviews, Effective for Peer Reviews Commencing on or After May 1, 2022)

November 16, 2022

Comments are requested by January 31, 2023

Prepared by the AICPA Peer Review Board for comment from interested persons.

Comments should be addressed to Brad Coffey at PR_expdraft@aicpa.org
Introduction

This memorandum provides a summary of proposed Peer Review Standards Update (PRSU) No. 1, *Omnibus Technical Corrections*, to be applied to the AICPA Standards for Performing and Reporting on Peer Reviews (standards) issued by the AICPA Peer Review Board (board) and solicits input from all interested parties regarding this exposure draft and proposed revisions to the standards.

A copy of this exposure draft and the extant standards (effective for peer reviews commencing on or after May 1, 2022) are also available on the AICPA Peer Review website at [www.aicpa.org/InterestAreas/PeerReview/Pages/PeerReviewHome.aspx](http://www.aicpa.org/InterestAreas/PeerReview/Pages/PeerReviewHome.aspx).

Background

The AICPA Peer Review Program (program) monitors the quality of reviewed firms’ accounting and auditing engagements and evaluates the systems of quality control under which those engagements are performed. Participation in the program is mandatory for AICPA membership, as explained in paragraph .03 of PR-C section 100, *Concepts Common to All Peer Reviews*,¹ and peer reviews are now required for licensure in nearly all state licensing jurisdictions.

Summary of Proposed Changes

Corrections have been made to various paragraph references for accurate cross-referencing, and the following summary represents additional revisions that the board believes to be appropriate for clarification and technical accuracy.

**PR-C Section 100, Concepts Common to All Peer Reviews**

- Paragraph .09 and paragraph .A11 are revised to further clarify the scope of engagements under PCAOB standards that require a system review.
- Paragraph .11 is revised to further clarify RAB member voting responsibilities for consent agenda items.

**PR-C Section 200, General Principles and Responsibilities for Reviewers**

- Paragraph .05f is revised to further clarify the requirement related to reviewer qualifications.

**PR-C Section 210, General Principles and Responsibilities for Reviewers — System Reviews**

- Paragraphs .05 and .06 are revised with reference to additional application and other explanatory material that describes that, in rare circumstances, exceptions to reviewer

¹ All PR-C sections can be found in AICPA Professional Standards.
qualifications may be approved by the AICPA prior to the commencement of a review. This change is for consistency with extant paragraph .A1 in section 200.

- Paragraph .06b is revised to further clarify the requirement for reviewers to have current involvement in must-select engagements, when applicable.
- Paragraph .17 is revised to further clarify the requirement for reviewers to assess the design of a firm’s quality control policies and procedures as part of planning a peer review.
- Paragraph .36 is revised to introduce a new paragraph .A31 of application and other explanatory material indicating that reviewers may consider appendix A in section 220 when evaluating certain engagements in system reviews.
- Paragraph .71 is revised to further clarify the requirement for additional documents team captains are to submit when a review is administered by the National Peer Review Committee.
- Paragraph .A69.09 (in appendix C) is revised to remove the statement that indicates priority in a reviewer’s engagement selection should be given to SOC 1® engagements when the population of engagements includes both SOC 1 and SOC 2® engagements. Instead, reviewers are expected to consider whether selecting one or both engagements is appropriate based on identified peer review risks.

PR-C Section 220, General Principles and Responsibilities for Reviewers — Engagement Reviews

- A new paragraph .06 is added to introduce a requirement that review captains are to meet training requirements established by the board, with reference to additional application and other explanatory material that describes in rare circumstances, exceptions to reviewer qualifications may be approved by the AICPA prior to the commencement of a review. This change is for consistency with extant paragraph .A1 in section 200.
- Paragraph .35 is added to introduce a requirement for review captains to submit additional documentation when an engagement review is administered by the National Peer Review Committee. This change is for consistency with the extant requirement for system reviews in paragraph .71 of section 210.
- Paragraph .A8 is revised to further clarify that matters are to be disposed of as either a finding or deficiency.
- Paragraph .A29 (appendix A) is revised to include an additional example of noncompliance that would result in a deficiency when materiality is not documented on review engagements and to further clarify section headings to state whether the example matters would generally result in a finding or a deficiency.

PR-C Section 300, General Principles and Responsibilities for Reviewed Firms

- Paragraph .20 is revised to further clarify the requirement for reviewed firms when resigning from the program.
• Paragraph .A15 is revised to further clarify the availability of information in the AICPA’s public files for firms that are no longer enrolled.
• Paragraph .A23 is revised to further clarify circumstances applicable to reviewed firms when resigning from the program.

PR-C Section 320, *General Principles and Responsibilities for Reviewed Firms — Engagement Reviews*

• Paragraph .A19 (exhibit A) is revised to further clarify the content of the firm representation letter that describes the scope of engagements under PCAOB standards. This change is for consistency with the revision previously described in paragraph .09 of section 100.

PR-C Section 400, *General Principles and Administration Responsibilities*

• Paragraph .21b is revised to further clarify qualifications of report acceptance body (RAB) members.
• Paragraph .21d introduces additional application and other explanatory material to provide consideration for administering entities (AEs) when exceptions to the requirement may apply. This change is for consistency with extant paragraph .A1 in section 200.
• Paragraph .25b is revised to further clarify the qualifications of RAB members with must-select experience.
• Paragraph .45g introduces additional application and other explanatory material to assist AEs with evaluating whether a technical reviewer has substantially met the requirement to annually participate in a peer review.
• Paragraph .A27 is revised to further clarify the role of a consultant when such individuals are used in RAB meetings to meet the requirement for must-select experience.
• Paragraph .A44 is revised to include the most current examples of familiarity threat policies and procedures.

PR-C Section 410, *The Report Acceptance Process*

• Paragraphs .14 and .15 are revised to relocate the examples for delayed or deferred acceptance to application and other explanatory material paragraphs .A8 and .A12, respectively.

PR-C Section 420, *Corrective Actions and Implementation Plans*

• Paragraph .08 is revised to further clarify the requirement for RABs to require firms to complete AICPA courses when nonconforming engagements are related to focus areas in the AICPA Enhancing Audit Quality Initiative.
• Paragraph .A16 (exhibit C) is revised to further clarify the description of allowable implementation plans for repeat findings that are not related to nonconforming engagements.
• Paragraph .A18 (appendix A) is revised to further clarify that the report of an outside party is to include the period ends of engagements reviewed, if applicable.

Comment Period
The comment period for this exposure draft ends on January 31, 2023.

Guide for Respondents
The board welcomes feedback from all interested parties on this proposal. Comments are most helpful when they refer to specific paragraphs, include the reasons for the comments, and, when appropriate, make specific suggestions for any proposed changes to wording.

Written comments on this exposure draft will become part of the public record of the AICPA and will be made available on the AICPA’s website. Please provide responses that are
• submitted as Microsoft Word documents by January 31, 2023, and
• directed to Brad Coffey at PR_expdraft@aicpa.org.

Effective Date
If approved by the board, the proposed enhancements and technical corrections are effective upon final approval and will be included as part of the Peer Review Program Manual (PRPM) update in May 2023.

Request for Comment
Please provide your views on the following:

1. The proposed changes described in this summary, including any suggestions for improving the understandability and applicability of the requirements or application and other explanatory material

2. The proposed effective date of May 31, 2023, coinciding with the May PRPM update
AICPA Peer Review Board

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2022–2023

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*Member — Peer Review Board Standards Task Force

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2022–2023

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AICPA Peer Review Program

Tim Kindem
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AICPA Peer Review Program
Proposed Peer Review Standards Update No. 1, 
Omnibus Enhancements and Technical 
Corrections

(Boldface italics denotes new language. Deleted text is shown in strikethrough.)

PR-C Section 100, Concepts Common to All Peer Reviews

[Paragraphs .01–.08 are unchanged.]

.09 Firms that perform engagements under the Statements on Auditing Standards (SASs) or Government Auditing Standards, examinations under the Statements on Standards for Attestation Engagements (SSAEs), or audits or examination engagements under PCAOB standards as their highest level of service must have system reviews. Firms are eligible to have engagement reviews if the highest level of service does not require a system review and is performed that perform services under the SSARSs or services under the SSAEs, or is an other attestation engagement under PCAOB standards not included in system reviews as their highest level of service are eligible to have engagement reviews. (Ref: par. .A11)

[Paragraph .10 is unchanged.]

.11 For the purposes of all sections of these standards, the following terms have the meanings attributed as follows:

[The content of other definitions in this paragraph is unchanged.]

Consent agenda. A list of reviews, corrective actions, implementation plans, and other items that allows RAB members to vote on all items at one time without discussion, however, any RAB member may extract any item from the consent agenda for discussion and a separate vote if necessary; failing to respond to a call for vote should not be considered an affirmative response. The following minimum criteria must be met for a review to be accepted using a consent agenda: (Ref: par. .A17)

- A report rating of pass
- No matters for further consideration (MFCs)
- Without reviewer performance feedback
Items related to corrective actions and implementation plans should be accepted using a consent agenda only if

- there are clearly identifiable actions or procedures that could be accepted by the technical reviewer or CPA on staff (see paragraph .0508 of PR-C section 420, *Corrective Actions and Implementation Plans*),
- requests to waive corrective actions or implementation plans are specific and easy to understand, or (Ref: par. .A18)
- there is no apparent reason that requests to extend due dates should not or would not be approved by the RAB. (Ref: par. .A19)

Other items may be approved using a consent agenda if there are clearly identifiable actions that do not require discussion, assessment, or a vote by the full peer review committee.

[Paragraphs .12–.53 and .A1–.A10 are unchanged.]

**.A11** The type of peer review is determined based on the engagements performed as the firm’s highest level of service, as shown in the following chart:

<table>
<thead>
<tr>
<th>Engagements as the Firm’s Highest Level of Service</th>
<th>System Review</th>
<th>Engagement Review</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Statements on Auditing Standards (SASs)</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Engagements</td>
<td>X</td>
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<tr>
<td><strong>Government Auditing Standards (GAS)</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Financial audits</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Attestation engagements (examination, review, or agreed-upon procedures under GAS)</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Performance audits</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td><strong>Statements on Standards for Attestation Engagements (SSAEs)</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Examination engagements</td>
<td>X</td>
<td></td>
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<tr>
<td>Review engagements</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Agreed-upon procedures engagements</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>
### Engagements as the Firm’s Highest Level of Service

<table>
<thead>
<tr>
<th></th>
<th>System Review</th>
<th>Engagement Review</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>PCAOB Standards</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Audits</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td><strong>Examinations</strong></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Other attestation engagements (reviews, attest, or agreed-upon procedures engagements under PCAOB standards)</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td><strong>Statements on Standards for Accounting and Review Services (SSARSs)</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reviews of financial statements</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Compilation engagements</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Preparation of financial statements engagements</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

If a firm is required to have a system review, all the engagements listed in the preceding table would be subject to selection for review based on periods ending during the year under review, except for financial forecasts, projections, and agreed-upon procedures engagements. Financial forecasts, projections, and agreed-upon procedures engagements with accountant’s report dates during the year under review would be subject to selection.

[Paragraphs .A12–.A56 are unchanged.]

### PR-C Section 200, General Principles and Responsibilities for Reviewers

[Paragraphs .01–.04 are unchanged.]

#### Reviewer Qualifications

.05 To qualify as a reviewer, CPAs should consider whether their day-to-day involvement in their firm’s accounting and auditing practice is sufficiently comprehensive to enable them to perform a peer review with professional expertise. At a minimum, a reviewer should meet the following qualifications: (Ref: par. .A1)
a. Be a member of the AICPA in good standing, licensed to practice as a CPA, and employed by or an owner of a firm enrolled in the program. (Ref: par. .A2)

b. Be in public practice as a partner, manager, or person with equivalent responsibilities in the accounting or auditing practice or carrying out a quality control function in the CPA’s firm. (Ref: par. .A3)

c. Have current practice experience by performing or supervising accounting or auditing engagements in the CPA’s firm or carrying out a quality control function in the firm, with reports dated within the last 18 months. (Ref: par. .A4)

d. Have spent the last five years in the practice of public accounting in the accounting or auditing function.

e. Be employed by or be the owner of a firm that has received a report with a peer review rating of pass or pass with scope limitations for its most recent peer review. (The report should have been accepted timely.) (Ref: par. .A5–.A6)

f. Possess appropriate experience and current knowledge of professional standards and experience related to the kind of practice and the industries of the engagements to be reviewed. (Ref: par. .A7)

g. Obtain at least 48 hours of AICPA-required continuing professional education (CPE) every 3 years in subjects relating to accounting, auditing, and quality control with a minimum of 8 hours in any 1 year.

h. Be free of restrictions from regulatory or governmental bodies on the CPA’s ability to practice public accounting. (Ref: par. .A8)

i. Provide qualifications and experience via a reviewer resume.

[Paragraphs .06–.38 and .A1–.A45 are unchanged.]

**PR-C Section 210, General Principles and Responsibilities for Reviewers — System Reviews**

[Paragraphs .01–.05 are unchanged.]

**Reviewer Qualifications for Team Captains**

.05 In addition to meeting the requirements in section 200, a team captain must be a partner and complete initial and ongoing peer review training that meets the requirements established by the board. (Ref: par. .A1–.A2)

**Reviewer Qualifications for Must-Select and Must-Cover Engagements**
In addition to the qualifications discussed in section 200, a reviewer of must-select engagements should meet the following criteria: (Ref: par. .A2)

a. Have completed additional training focused on must-select engagements that meets the requirements of the board. (Ref: par. .A32)

b. Be presently–currently involved in one of the following areas in the must-select engagements in the reviewer’s firm:
   i. Supervising or performing engagements
   ii. Performing engagement quality control reviews on engagements
   iii. Performing the inspection of must-select engagements as part of the firm’s monitoring process

c. Be employed by or be an owner of a firm that is a member of the respective audit quality center, if applicable.

[Paragraphs .07–.16 are unchanged.]

To assess control risk, the reviewer should consider the results of the team captain’s assessment of the firm’s design of and compliance with its policies and procedures according to quality control standards established by the AICPA. (Ref: par. .A1140)

[Paragraphs .18–.35 are unchanged.]

The reviewer should evaluate each engagement selected for review. The evaluation should include the following: (Ref: par. .A32)

a. Consideration of the financial statements or information and the related accountants’ reports

b. Review of accounting and audit documentation required by the applicable professional standards

c. Consideration of information related to the engagement obtained through the peer review, including but not limited to engagement profile information, representations made by the firm, and other inquiries

[Paragraphs .37–.70 are unchanged.]

For all reviews administered by the National Peer Review Committee, the team captain should submit the following documents in addition to those required by paragraph .70, as applicable: (Ref: par. .A6866)

a. All documents required by paragraph .70 to be submitted for system reviews

b. Engagement questionnaires or checklists
c. Quality control documents and related practice aids

d. Staff and focus group interview forms

e. Planning documents

f. Any other documents considered relevant by the team captain

[Paragraph .A1 is unchanged.]

.A2 In rare circumstances, an exception to the reviewer qualification requirements described in paragraphs .05–.08 may be approved by the AICPA prior to commencement of the peer review. The request must be made in writing and should thoroughly explain why the exception should be approved.

[Paragraphs .A2–.A30 are renumbered to .A3–.A31. The content is unchanged.]

.A32 When reviewing engagements subject to the Statements on Standards for Accounting and Review Services, team captains may refer to examples of noncompliance with applicable professional standards in appendix A of section 220 to assist with concluding whether the engagement is performed and reported on in conformity with applicable professional standards in all material respects.

[Paragraphs .A31–.A68 are renumbered to .A33–.A70. The content is unchanged.]

Appendix C — Additional Requirements for Must-Select and Must-Cover Engagements (Ref: par. .27)

.A7169

[Paragraphs .01–.08 in appendix C are unchanged.]

Examinations of Service Organizations

.09 Due to the reliance of user entities on system and organization control (SOC) reports, particularly SOC 1® and SOC 2® reports, there is a significant public interest in examinations of service organizations relevant to user entities. If a firm performs an examination of one or more service organizations and issues a SOC 1 or SOC 2 report, at least one examination should be reviewed. If a firm performs both SOC 1 and SOC 2 engagements and a proper risk assessment determined that only one SOC engagement should be selected, a SOC 1 engagement should be reviewed due to the reliance on the report by other auditors.

[Paragraphs .10–.12 in appendix C are unchanged.]

[Paragraph .A70 is renumbered to .A72. The content is unchanged.]
PR-C Section 220, General Principles and Responsibilities for Reviewers — Engagement Reviews

[Paragraphs .01–.05 are unchanged.]

Reviewer Qualifications for Review Captains

.06 In addition to meeting the requirements in section 200, a review captain should complete initial and ongoing peer review training that meets the requirements established by the board. (Ref: par. .A2–.A3)

[Paragraphs .06–.34 are renumbered to .07–.35. The content is unchanged.]

.36 For all reviews administered by the National Peer Review Committee, the review captain should submit the following documents, as applicable: (Ref: par. .A30)

a. All documents required by paragraph .35 to be submitted for engagement reviews
b. Engagement questionnaires or checklists
c. Planning documents
d. Any other documents considered relevant by the review captain

[Paragraph .A1 is unchanged.]

.A2 Peer review training courses designed to meet the requirement are located on the Peer Review page of the AICPA website.

.A3 In rare circumstances, an exception may be approved by the AICPA prior to commencement of the peer review. The request must be made in writing and should thoroughly explain why the exception should be approved.

[Paragraphs .A2–.A7 are renumbered to .A4–.A9. The content is unchanged.]

.A108 One or more matters may be elevated to a finding or deficiency. To determine if whether a matter should be is elevated to a finding or deficiency, the review captain should considers the matter’s nature and relative importance, if the matter is material to the understanding of the report or financial statements, or if the matter represents the omission of a critical procedure including documentation.

[Paragraphs .A9–.A28 are renumbered to .A11–.A30. The content is unchanged.]

Appendix A — Examples of Noncompliance With Applicable Professional Standards

.A3129 The following is a list of examples of noncompliance with applicable professional standards. This is not an all-inclusive list, and the reviewer should decide if the noncompliance is
a matter, finding, or deficiency as described in paragraphs .2120–.2524 and by using the following guidance. (Ref: par. .2120–.2524 and .A97)

**List of Matters and Findings That Generally Would Not Result in a Deficiency-Finding**

[The content beneath the preceding heading is unchanged.]

**List of Matters and Findings That Generally Would Result in a Deficiency**

[All other content beneath the preceding heading is unchanged.]

**SSARSs Procedures (Including Documentation)**

- Failure to establish an understanding with management regarding the services to be performed through a written communication (for example, an engagement letter)
- Failure to document significant findings or issues
- Failure to document communications to the appropriate level of management regarding fraud or illegal acts that come to the accountant’s attention
- *For review engagements, failure to document materiality or to apply the established materiality when designing or evaluating the results of review procedures*
- For review engagements, failure to perform or document analytical and inquiry procedures, including the matters covered, and the development of and basis for the accountant’s expectations
- For review engagements, failure to document significant unusual matters and their disposition
- For review engagements, failure to obtain a client management representation letter
- Failure to obtain all required signatures on the engagement letter (or other suitable written agreement)

[Paragraph .A30 is renumbered to .A32. The content is unchanged.]

**PR-C Section 300, General Principles and Responsibilities for Reviewed Firms**

[Paragraphs .01–.19 are unchanged.]

**Resigning From the Program**
Agenda Item 1.2A

.20 A firm may resign from the program when it no longer performing engagements that require the firm to undergo a peer review. To resign from the program, a firm should submit a written request to the AE before the firm’s peer review has commenced. Before resigning, a firm should consult with its state board of accountancy to determine if it is in compliance with requirements of its state board of accountancy for there are rules that require enrollment in the program even if the firm does not perform services that include issuing reports or when it is no longer performing engagements that require a firm to undergo a peer review.

[Paragraphs .21–.25 and .A1–.A14 are unchanged.]

.A15 The firm’s AE and AICPA staff may disclose to third parties the following information:

  a. The firm’s name and address
  b. Whether the firm is enrolled in the program
  c. The date of acceptance and period covered by the firm’s most recently accepted peer review
  d. The most recent date that the firm’s enrollment in the program has been dropped or terminated, if applicable

This information is available in the AICPA public file for all firms enrolled in the program and for a period of 42 months after a firm is no longer enrolled.

[Paragraphs .A16–.A22 are unchanged.]

.A23 A firm may resign from the program when it no longer performs engagements that require the firm to be enrolled in the program. The submission by the firm of a request to resign from the program once its peer review has commenced but has not been completed is considered not cooperating, and the firm’s enrollment is subject with the AE and may lead to the termination from the program as described in paragraph .14 of the firm’s enrollment in the program by a hearing panel of the board.

[Paragraph .A24 is unchanged.]

PR-C Section 310, General Principles and Responsibilities for Reviewed Firms — System Reviews

[Paragraphs .01–.18 and .A1–.A27 are unchanged.]

PR-C Section 320, General Principles and Responsibilities for Reviewed Firms — Engagement Reviews
Exhibit A — Illustrative Representation Letter

The following illustrative letter includes written representations that are required by paragraphs .16 and .17 of this PR-C section. The firm may tailor the language in this illustration and refer to attachments to the letter as long as adequate representations pertaining to the matters previously discussed, as applicable, are included to the satisfaction of the review captain.

[Entity Letterhead]

[Date of the Report]

To [Name of Review Captain]:

We are providing this letter in connection with the peer review of [name of firm] [applicable to engagements not subject to PCAOB permanent inspection (if applicable)] as of the date of this letter and for the year ended June 30, 20XX.

Management has fulfilled its responsibility for the design of and compliance with a system of quality control for our accounting practice that provides us with reasonable assurance of performing and reporting in conformity with applicable professional standards in all material respects.

We understand that we are responsible for complying with the rules and regulations of state boards of accountancy and other regulators. We have [no knowledge of][disclosed to you all known] situations in which [name of firm] or its personnel have not complied with the rules and regulations of state board(s) of accountancy or other regulatory bodies, including applicable firm and individual licensing requirements through the issuance dates of the reviewed engagements in each state in which it practices for the year under review.

We have provided to the review captain a list of all engagements with periods ending during (or, for financial forecasts or projections and agreed-upon procedures engagements, report dates in) the year under review, regardless of whether issued. This list included, but was not limited to, all engagements performed under Government Auditing Standards, audits of employee benefit plans, audits performed under FDICIA, and examinations of service organizations (SOC 1® and SOC 2® engagements), as applicable. The firm does not perform engagements under the Statements on Auditing Standards (SASs) or Government Auditing Standards, examinations under the Statements on Standards for Attestation Engagements (SSAEs), or audit or examination engagements under Public Company Accounting Oversight Board (PCAOB) standards that are not subject to permanent inspection by the PCAOB. We understand that failure to properly include these engagements on the list could be deemed as failure to cooperate. We also understand this may result in termination from the Peer Review Program and, if termination occurs, may result in an investigation of a possible violation by the appropriate regulatory, monitoring, and enforcement body.
[We confirm that it is our responsibility to remediate nonconforming engagements as stated by the firm in the Letter of Response (if applicable).]

We have discussed significant issues from reports and communications from regulatory, monitoring, and enforcement bodies with the review captain, if applicable. We have also provided the review captain with any other information requested, including communications or summaries of communications from regulatory, monitoring, or enforcement bodies relating to allegations or investigations of deficiencies in the conduct of an accounting, audit, or attestation engagement performed and reported on by the firm, whether the matter relates to the firm or its personnel, within three years preceding the current peer review year-end. We confirm that, to the best of our knowledge and belief, there are no known restrictions or limitations on the firm’s or its personnel’s ability to practice public accounting by regulatory, monitoring, or enforcement bodies within three years preceding the current peer review year-end.

We understand the intended uses and limitations of the quality control materials we have developed or adopted. We have tailored and augmented the materials as appropriate such that the quality control materials encompass guidance that is sufficient to assist us in conforming with professional standards (including the Statements on Quality Control Standards) applicable to our accounting practice in all material respects.

Sincerely,

[Name of Reviewed Firm Representative(s)]

[Paragraph .A20 is unchanged.]

PR-C Section 400, General Principles and Administration Responsibilities

[Paragraphs .01–.20 are unchanged.]

Report Acceptance Body

Qualifications

.21 A RAB member should

a. be a member of the AICPA in good standing, licensed to practice as a CPA.

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fn 1 Firm representatives are members of management as described in paragraph .10 of section 300, General Principles and Responsibilities for Reviewed Firms.
b. be presently currently involved in public practice as a partner, manager, or person with equivalent responsibilities in the accounting or auditing practice or carrying out a quality control function in the member’s firm. (Ref: par. A23)

c. have spent the last five years in the practice of public accounting in the accounting or auditing function.

d. be employed by or be an owner of a firm that has received a report with a peer review rating of pass or pass with scope limitations for its most recent peer review. The report should have been accepted timely. (Ref: par. A24–A25)

e. complete RAB member training that meets the requirements established by the board.

f. agree to confidentiality and conflict-of-interest requirements of the program.

[Paragraphs .22–.24 are unchanged.]

.25 If a RAB meeting includes a third party to meet the requirement for must-select experience discussed in paragraph .24, that individual should meet the following qualifications:

a. Be a member of the AICPA in good standing, licensed to practice as a CPA, and employed by or an owner of a firm enrolled in the program.

b. Be presently currently involved in public practice in the must-select engagements as a partner, manager, or person with equivalent supervisory responsibilities or carrying out a quality control function in the individual’s firm.

c. Be employed by or an owner of a firm that has received a report with a peer review rating of pass or pass with scope limitations for its most recent system review. The report should have been accepted timely.

d. Agree to confidentiality and conflict-of-interest requirements of the program.

[Paragraphs .26–.30 are unchanged.]

.31 When considering replacing or waiving corrective actions or implementation plans, the RAB should do the following:

a. Review the facts and circumstances surrounding the deficiencies or findings.

b. Consider the reasons for the original action.

c. Consider replacing an action prior to waiving an action, if applicable. (See paragraph .1542 of section 420.)

[Paragraphs .32–.44 are unchanged.]

Technical Reviewer
Qualifications

.45 A technical reviewer should

a. be a member of the AICPA in good standing, licensed to practice as a CPA.

b. complete initial and ongoing peer review captain training that meets the requirements established by the board within 12 months preceding the commencement of the technical review. (Ref: par. .A38)

c. have an appropriate level of accounting and auditing knowledge and experience suitable for the work performed. (Ref: par. .A39)

d. complete initial technical reviewer training that meets the requirements established by the board within 12 months before serving as a technical reviewer and complete or attend one of the following every calendar year thereafter:
   
i. a technical reviewer update training course developed by the AICPA
   
ii. the annual AICPA peer review conference

e. obtain at least 48 hours of AICPA-required CPE every 3 years in subjects relating to accounting, auditing, and quality control, with a minimum of 8 hours in any 1 year.

f. obtain at least 8 hours of CPE every 2 years in subjects related to single audits, if performing the technical review of a peer review that includes single audit engagements. The required CPE hours should include completion of technical reviewer training for single audits, which should be completed prior to performing the technical reviewer’s first technical review of documents for a single audit engagement. (Ref: par. .A40)

g. annually participate in a peer review that is equivalent to the highest level of technical review performed. Participation includes the following: (Ref: par. .A42)
   
i. Reviewing and discussing the planning and scope of the peer review with the captain

ii. Reviewing the engagement checklists completed by the review team

iii. Attending meetings or participating in conference calls between the reviewer and reviewed firm to discuss issues encountered during the peer review

   iv. Attending the closing meeting and the exit conference

[Paragraphs .46–.54 and .A1–.A24 are unchanged.]

.A25 In rare circumstances, an exception may be approved by the AICPA when a request is submitted in writing that thoroughly explains why the exception should be approved for an individual who does not meet the required qualifications described in paragraph .21.
Report Acceptance Body Composition (Ref: par. .23–.25)

Current experience is described in paragraph .A21 of section 200.

The appropriate must-select experience may come from a member of the RAB, another AE’s RAB member, or an individual from a list of consultants maintained by the AICPA. The AE will determine if the RAB will not have the appropriate must-select experience and will assign an individual with such experience prior to assigning the review to a RAB. The assigned individual with the appropriate must-select experience is a consultant rather than an assigned RAB member, that individual may attend the RAB meeting via teleconference; however, that individual is not eligible to vote on the acceptance of reviews.

1. participates as a consultant,
2. is not eligible to vote on acceptance of a review, and
3. may attend the RAB meeting via teleconference.

The timing of a technical reviewer’s participation may vary depending on the circumstances of the review. For example, the closing meeting and exit conference may be delayed and occur in the subsequent year. In this situation, the AE may consider the circumstances of the delay and exercise judgment when concluding whether the technical reviewer has substantially met the participation requirement described in paragraph .45.

Exhibit A — Example Familiarity Threat Policies and Procedures

This exhibit includes examples of familiarity threats and potential safeguards used to mitigate the threats. These examples are not all-inclusive and may not be applicable to every AE. In some instances, a safeguard could mitigate more than one threat; in other instances, however, depending on the significance of a threat, more than one safeguard may be necessary to properly mitigate it.

<table>
<thead>
<tr>
<th>Familiarity Threat</th>
<th>Safeguards to Mitigate the Threat</th>
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<tbody>
<tr>
<td>.01 The peer reviews of the technical reviewers’ and committee or report acceptance body (RAB) members’ firms are presented for acceptance.</td>
<td>• Establish multiple RABs that change composition regularly.</td>
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<td></td>
<td>• Redact all firm and reviewer identifying information from the RAB materials.</td>
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<td></td>
<td>• Designate the CPA on staff, a committee member, or other qualified individual to monitor the RAB process and address preferential treatment or inconsistencies in the process.</td>
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<td>Familiarity Threat</td>
<td>Safeguards to Mitigate the Threat</td>
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<td><strong>Agenda Item 1.2A</strong></td>
<td><strong>Familiarity Threat</strong></td>
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<tr>
<td><strong>Safeguards to Mitigate the Threat</strong></td>
<td>• Arrange for RAB members from other AEs to participate in RABs periodically.</td>
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<tr>
<td></td>
<td>• Include the peer reviews of the technical reviewers’ and committee or RAB members’ firms in the annual oversight selections.</td>
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<tr>
<td></td>
<td>• Engage technical reviewers from other AEs to perform the technical review of the peer reviews of the technical reviewers’ and committee or RAB members’ firms.</td>
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<td>• The technical reviewers’ and committee or RAB members’ peer reviews will be accepted by a different administering entity (AE). We have partnered with AE “A” and have attached the agreement as addendum B.</td>
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<td>• The AE is split in more than one district, for example, east and west. The committee or RAB accepts reviews from a district other than its own.</td>
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<td>• The CPA on staff monitors the RAB process and reports preferential treatment or inconsistencies in the process.</td>
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<td></td>
<td>• The AE will designate a committee member (or other qualified individual) as an observer of RAB meetings to monitor the RAB process and report preferential treatment or inconsistencies in the process.</td>
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<td></td>
<td><strong>.02 The peer reviews performed by the technical reviewers and committee or RAB members are presented for acceptance.</strong> Overreliance is placed on committee or RAB members, which leads to other members not reading the RAB package in its entirety.</td>
</tr>
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<td></td>
<td>• Establish multiple RABs that change composition regularly.</td>
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<td></td>
<td>• Redact all firm and reviewer identifying information from the RAB materials.</td>
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<tr>
<td></td>
<td>• Designate the CPA on staff, a committee member, or other qualified individual to monitor the RAB process and address preferential treatment or inconsistencies in the process.</td>
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<td></td>
<td>• Arrange for RAB members from other AEs to participate in RABs periodically.</td>
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<tr>
<td></td>
<td>• Include the peer reviews performed by the technical reviewers and committee or RAB members in the annual oversight selections.</td>
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<td></td>
<td>• Arranging for RAB members from other AEs to participate in RABs</td>
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<td></td>
<td>• Having multiple committees or RABs that change composition regularly</td>
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<td></td>
<td>• Having RAB members acknowledge that they have read reviews before starting the meeting</td>
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<td></td>
<td>• Having the CPA on staff evaluate committee or RAB member performance</td>
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<tr>
<td>Familiarity Threat</td>
<td>Safeguards to Mitigate the Threat</td>
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| **.03** The committee or RAB members have a long-standing relationship with the technical reviewers, which leads to overreliance on the technical reviewers’ procedures and conclusions. For instance, it may not be apparent if an issue or a nonconforming engagement has been addressed, yet the committee or RAB members decide not to investigate because members believe the technical reviewer would not have missed the issue. | - **Engage technical reviewers from other AEs qualified individuals from another state to perform all technical reviews periodically.**  
- **Arrange for RAB members from other AEs to participate in RABs periodically.**  
- **Engage a second technical reviewer to perform a selection of secondary technical reviews of high-risk reviewers, firms, and random samples.**  
- **Designate the CPA on staff, a committee member, or other qualified individual to monitor the RAB process and address preferential treatment or inconsistencies in the process.** |
| **.04** The committee or RAB members have long-standing relationships with some reviewers, particularly those who perform a high volume of reviews. | - **Arrange for RAB members from other AEs to participate in RABs periodically.**  
- **Redact all firm and reviewer identifying information from the RAB materials.**  
- **At the beginning of each meeting, remind committee or RAB members to identify relationships with reviewers and reviewed firms.**  
- **Designate the CPA on staff, a committee member, or other qualified individual to monitor the RAB process and address preferential treatment or inconsistencies in the process.**  
- **Arranging for another AE to accept an AE’s high-volume reviewers’ reviews**  
- **Annually requesting committee or RAB members to identify conflicts of interest with reviewers and reviewed firms** |
| **.05** Technical reviewers have long-standing relationships with some reviewers, particularly those who perform a high volume of reviews. | - **Engage technical reviewers from other AEs to perform technical reviews periodically.**  
- **Assign technical reviewers on a varying basis, ensuring rotation on reviews performed by high-volume reviewers.**  
- **Engage a second technical reviewer to perform a selection of technical reviews of high-volume reviewers.**  
- **Include the peer reviews of high-volume reviewers in the annual oversight selections.** |
### Familiarity Threat

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<tr>
<th>Safeguards to Mitigate the Threat</th>
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<tr>
<td>• Designate the CPA on staff to periodically perform a detailed review of peer reviews that are ready for RAB presentation.</td>
</tr>
<tr>
<td>• Engaging qualified individuals from another state to perform all technical reviews</td>
</tr>
<tr>
<td>• Arranging for another AE to accept reviews performed by a high-volume reviewer</td>
</tr>
<tr>
<td>• Annually requesting technical reviewers to identify conflicts of interest with reviewers and reviewed firms</td>
</tr>
</tbody>
</table>

#### .06 Committees or RABs

AEs are hesitant to provide feedback or consider deficiency letters for a variety of reasons including, but not limited to, the following:

- RAB members know the reviewer.
- The reviewer performs a high volume of reviews *administered by the AE*, in the state and the RAB *does not want to offend the reviewer* is afraid to offend him or her.
- The reviewer is a RAB member (current or former) or is a technical reviewer.
- The reviewer teaches for the state CPA society or has some other society relationship that leads to a belief that the individual knows what the individual is doing.

- Engaging qualified individuals technical reviewers from other AEs to perform all technical reviews *periodically*.
- Arranging for RAB members from other AEs to participate in RABs periodically.
- Redact all firm and reviewer identifying information from the RAB materials.
- Designate the CPA on staff, a committee member, or other qualified individual to monitor the RAB process and address preferential treatment or inconsistencies in the process.
- Annually requesting committee or RAB members to identify conflicts of interest with reviewers and reviewed firms.

#### .07 A committee member is given informal feedback on reviews the committee

- Arranging for RAB members from other AEs to participate in RABs periodically.
<table>
<thead>
<tr>
<th>Familiarity Threat</th>
<th>Safeguards to Mitigate the Threat</th>
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</thead>
</table>
| member performed but a different reviewer is issued written feedback for the same issue.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | • Redact all firm and reviewer identifying information from the RAB materials.  
• Having Designate the CPA on staff, a committee member, or other qualified individual to monitor the RAB process and report-address preferential treatment or inconsistencies in the process.  
• Having the AE designate a committee member (or other qualified individual) as an observer of RAB meetings to monitor the RAB process and report preferential treatment or inconsistencies in the process.                                                                                                                                                                                                                          |
| .08 Following an enhanced oversight, the RAB has allowed the peer reviewer or reviewed firm to provide documentation not provided to the subject matter expert during the enhanced oversight (such documentation should have been provided at that time). This gives the appearance that reviewers or reviewed firms familiar to the RAB are being allowed to create working papers.                                                                                                                                                                                                                                                                                                                                 | • Arranging for specialists from other states to participate in RABs.  
• Arranging for RAB members from other AEs to participate in RABs.  
• Having the CPA on staff monitor the RAB process and report preferential treatment or inconsistencies in the process.                                                                                                                                                                                                                                                                                                                                                                                   |
| .089 RAB members mention a firm’s reputation regarding a specific industry concentration when presented with issues (generally documentation issues), implying that because issues were not identified previously, it is unlikely issues exist now despite evidence to the contrary).                                                                                                                                                                                                                                                                                                                                                                                  | • Arranging for specialists from other states to participate in RABs.  
• Redact all firm and reviewer identifying information from the RAB materials.  
• Designate the CPA on staff, a committee member, or other qualified individual to monitor the RAB process and address preferential treatment or inconsistencies in the process.                                                                                                                                                                                                                                                                                                                       |
| .09 The peer review of the AE’s CPA on staff’s firm is presented for acceptance.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | • Arrange for another AE to administer the peer review of the CPA on staff’s firm (a change in venue).  
• Engage a technical reviewer from another AE to perform the technical review of the peer review of the CPA on staff’s firm.                                                                                                                                                                                                                                                                                                                                                                       |
Agenda Item 1.2A

**Familiarity Threat**

<table>
<thead>
<tr>
<th>Safeguards to Mitigate the Threat</th>
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<tbody>
<tr>
<td>• Arrange for one or more RAB members from another AE to participate in the RAB when the peer review of the CPA on staff’s firm is presented.</td>
</tr>
<tr>
<td>• Engage a technical reviewer from another AE to perform the technical review of the peer review performed by an individual within the CPA on staff’s firm or reported on by the CPA on staff’s firm.</td>
</tr>
<tr>
<td>• Arrange for one or more RAB members from another AE to participate in the RAB when the peer reviews reported on by the CPA on staff’s firm are presented.</td>
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.10 The peer reviews performed by an individual within the CPA on staff’s firm or reported on by the CPA on staff’s firm are presented for acceptance.

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[Paragraphs .A45–.A47 are renumbered to paragraphs .A47–.A49. The content is unchanged.]

**PR-C Section 410, The Report Acceptance Process**

[Paragraphs .01–.13 are unchanged.]

**Delayed Acceptance**

.14 The RAB should delay acceptance of a peer review *when it has sufficient information to conclude that the peer review was performed and reported on in accordance with the standards but there are for minor revisions that need to be addressed prior to publicizing the results of the peer review*. in the following situations (this list is not all-inclusive): (Ref: par. .A8–.A110)

a. When peer review reports and letters of response
   i. do not indicate that a deficiency or significant deficiency is repeated from the prior peer review;
   ii. have misleading grammar or excessively ambiguous language;
   iii. include misquoted professional literature;
   iv. reference professional standards unrelated to the subject matter, or
   v. for system reviews, do not identify the industry and level of service for any deficiencies or significant deficiencies that are industry specific or related to a noneconforming must-select engagement

b. When FFCs
   i. have incorrect or missing references to the applicable professional standards;
   ii. do not identify the MFC that led to the finding;
iii. incorrectly identify the type of matter;

iv. do not correctly identify whether the finding is a repeat;

v. do not describe the scenario that led to the finding;

vi. do not provide reference to the specific industry or engagement related to a nonconforming engagement, if applicable;

vii. do not have a clear description of the finding from the reviewer;

viii. are not signed by an authorized representative of the firm; or

ix. for system reviews, have incorrect or missing references to the applicable requirements of the Statements on Quality Control Standards

c. When MECs

i. are not completed properly or fully or

ii. contain firm or client references

**Deferred Acceptance**

.15 The RAB should defer acceptance of a review if it does not have sufficient information to conclude whether the review was performed or reported on in accordance with the standards due to there are unresolved questions or revisions significant enough that no decision can be made until further information is received. and for significant revisions in the following situations (this list is not all-inclusive): (Ref: par. .A1211–.A1513)

a. When peer review reports or letters of response

i. have significant departures from the standard report formats;

ii. have an incorrect report rating or omitted deficiencies or significant deficiencies;

iii. have deficiencies or significant deficiencies that appear to set standards higher than those mandated by professional standards;

iv. for system reviews, have deficiencies or significant deficiencies that are not written systemically, or the systemic causes are not clear;

v. do not have responses that appropriately address deficiencies or significant deficiencies identified in the peer review report; or

vi. have responses that do not appropriately address nonconforming engagements, including responses that are unacceptably noncommittal, vague, or otherwise unclear or not responsive
b. When FFCs
   i. do not have a clear description of the finding from the reviewer and, on system reviews, do not include the systemic cause of the finding or
   ii. include a response from the reviewed firm that does not appear comprehensive, genuine, and feasible

c. When any other peer review documents need revision for the RAB to conclude whether the review was performed and reported on in accordance with the standards

Application and Other Explanatory Material

Technical Reviewer’s Evaluation of System Reviews (Ref: par. .05–.07)

.A1 The RAB may delegate the review of the engagement profile and the supplemental peer review checklist for single audits to the technical reviewer if the technical reviewer has completed CPE as required by paragraph .45ef of section 400. The technical reviewer may request that a member of the RAB perform the technical review of such documents when the technical reviewer has not obtained the required CPE.

[Paragraphs .A2–.A7 are unchanged.]

.A8 Acceptance of a peer review may be delayed in the following situations (this list is not all-inclusive):

a. When peer review reports and letters of response
   i. do not indicate that a deficiency or significant deficiency is repeated from the prior peer review,
   ii. have misleading grammar or excessively ambiguous language,
   iii. include misquoted professional literature,
   iv. reference professional standards unrelated to the subject matter, or
   v. for system reviews, do not identify the industry and level of service for any deficiencies or significant deficiencies that are industry specific or related to a nonconforming must-select engagement

b. When FFCs
   i. have incorrect or missing references to the applicable professional standards;
   ii. do not identify the MFC that led to the finding;
   iii. incorrectly identify the type of matter;
iv. do not correctly identify whether the finding is a repeat;

v. do not describe the scenario that led to the finding;

vi. do not provide reference to the specific industry or engagement related to a nonconforming engagement, if applicable;

vii. do not have a clear description of the finding from the reviewer;

viii. are not signed by an authorized representative of the firm; or

ix. for system reviews, have incorrect or missing references to the applicable requirements of the Statements on Quality Control Standards

c. When MFCs

   i. are not completed properly or fully or

   ii. contain firm or client references

[Paragraphs .A8–.A10 are renumbered to .A9–.A11. The content is unchanged.]

.A12 Acceptance of a peer review may be deferred in the following situations (this list is not all-inclusive):

a. When peer review reports or letters of response

   i. have significant departures from the standard report formats;

   ii. have an incorrect report rating or omitted deficiencies or significant deficiencies;

   iii. have deficiencies or significant deficiencies that appear to set standards higher than those mandated by professional standards;

   iv. for system reviews, have deficiencies or significant deficiencies that are not written systemically, or the systemic causes are not clear;

   v. do not have responses that appropriately address deficiencies or significant deficiencies identified in the peer review report; or

   vi. have responses that do not appropriately address nonconforming engagements, including responses that are unacceptably noncommittal, vague, or otherwise unclear or not responsive

b. When FFCs

   i. do not have a clear description of the finding from the reviewer and, on system reviews, do not include the systemic cause of the finding or
ii. include a response from the reviewed firm that does not appear comprehensive, genuine, and feasible

c. When any other peer review documents need revision for the RAB to conclude whether the review was performed and reported on in accordance with the standards

[Paragraphs .A11-.A13 are renumbered to .A13-.A15. The content is unchanged.]

PR-C Section 420, Corrective Actions and Implementation Plans

[Paragraphs .01-.07 are unchanged.]

.08 If a finding, deficiency, or significant deficiency relates to an area where prevalent nonconformity has been identified through the AICPA Enhancing Audit Quality Initiative and the RAB determines CPE is an appropriate remedial action, then specific CPE to address the common areas of noncompliance should be required by the RAB. In these situations, either an AICPA course or an alternative course with substantially the same content as the AICPA course should be required by the RAB. (Ref: par. .A4)

[Paragraphs .09-.10 are unchanged.]

.11 If the RAB believes more extensive actions, beyond the allowable implementation plans in exhibits A and C and D, are necessary (such as submitting documents to an outside party), the RAB needs to consider whether the findings should have been elevated to deficiencies in the report.

[Paragraphs .12-.15 and .A1-.A15 are unchanged.]

Exhibit C — Allowable Implementation Plans: System Reviews

.A16

<table>
<thead>
<tr>
<th>Finding</th>
<th>Allowable Implementation Plan</th>
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<tr>
<td>Nonconforming engagements and • initial findings on a must-select industry or • repeat findings for any industry</td>
<td>• Require members of the firm to take specified types and amounts of CPE. • Require the firm to hire an outside party approved by the report acceptance body (RAB) to perform a pre-issuance or post-issuance review of certain types or portions of engagements. • Require the firm to hire an outside party approved by the RAB to review the firm’s remediation of nonconforming engagements.</td>
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</table>
Agenda Item 1.2A

| Engagements indicate repeat findings without nonconforming engagements | • Require members of the firm to take specified types and amounts of CPE.  
• Require the firm to hire an outside party approved by the RAB to review the firm’s internal monitoring or inspection report. |
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<tr>
<td>Failure to possess applicable firm licenses</td>
<td>• Require the firm to submit proof of its valid firm licenses.</td>
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</table>

[Paragraph .A17 is unchanged.]

Appendix A — Guidance for Outside Parties Engaged to Assist Firms in Completing Corrective Actions and Implementation Plans

.A18 This appendix contains guidance for outside parties engaged to assist firms in completing corrective actions or implementation plans required as a condition of acceptance of the firm’s peer review.

[Paragraphs .01–.05 in appendix A are unchanged.]

Reporting

.06 The outside party should draft a letter or report to the RAB describing the procedures performed and conclusions reached. The letter or report should

a. be issued on the letterhead of the outside party’s firm,
b. be addressed to the AE’s RAB with a copy to the reviewed firm, and
c. include the following elements:
   i. A description of the corrective actions or implementation plans required by the RAB
   ii. A description of the representations made by the reviewed firm regarding the changes made by the firm since its most recent peer review
   iii. A description of the procedures performed by the outside party, including the period ends of any engagements reviewed or the report dates for financial forecasts, projections, or agreed-upon procedures engagements
iv. A summary of the results of the outside party’s procedures, including a description of any representations made by the reviewed firm regarding further planned actions and the outside party’s comments on the appropriateness of those actions

v. A statement that the letter or report is intended for limited distribution to the RAB and the reviewed firm and is not intended as a substitute or replacement for the peer review documents issued on the firm’s peer review

vi. Information enabling the RAB to evaluate whether the firm has improved

vii. For system reviews, recommendations of additional actions if the outside party believes the results reveal continued weaknesses in the reviewed firm’s system of quality control

[Paragraph .07 in appendix A is unchanged.]

PR-C Section 430, Reviewer Monitoring and Performance

[Paragraphs .01–.26 and .A1–.A32 are unchanged.]
Agenda Item 1.3

Standing Task Force Updates

Why is this on the Agenda?
Each of the standing task forces of the PRB will provide this information to the Board at each open session meeting to gather feedback on the nature and timing of agenda items that will be considered in the future. The items included in this report represent an evergreen list that will be continually updated to be responsive to feedback received.

Standards Task Force

Accomplished since last PRB meeting:
- Discussed and approved final draft of the exposure draft related to technical corrections and other items within the clarified peer review standards (see agenda item 1.2A)
- Continued discussions related to the process for implementing changes to the clarified standards and other guidance based on feedback received during the September PRB open session meeting
- Continued discussions related to effect of the quality management standards on peer review program guidance, including potential timing of PRB consideration and approval of any proposed changes

Upcoming tasks:
- Monitor responses to the exposure draft as shown at agenda item 1.2A (should it be approved)
- Develop proposed changes to peer review program guidance to reflect the issuance of quality management standards
- Continue monitoring feedback from users and evaluate whether additional guidance or application material may be appropriate to assist users with understanding the intent of requirements in the clarified peer review standards

Oversight Task Force

Accomplished since last PRB meeting:
- Approved Report Acceptance Body (RAB) observation reports
- OTF members conducted administering entity (AE) oversights
- Approved AE oversight reports
- Provided consent for one AE to transition administration to another AE
- Approved final revisions to AE benchmarks which are included in agenda item 1.3A for reference
- Reviewed enhanced oversight reports with comments for consistency
- Monitored results of enhanced oversights
- Discussed the type of feedback issued by AEs as a result of enhanced oversights
- Monitored reviewer performance
- Discussed potential revisions to the AICPA Peer Review Program Oversight Handbook
- Approved final revisions to the template for the AEs’ Annual Report on Peer Review Activities where compliance will be reported with the plan of administration due April 1, 2023
Upcoming tasks:
- Approve RAB observation reports
- OTF members will conduct AE oversights
- Approve AE oversight reports and AE responses
- Review AE benchmark summary forms and feedback received
- Review enhanced oversight reports with comments for consistency
- Monitor results of enhanced oversights
- Discuss the type of feedback issued by AEs as a result of enhanced oversights
- Monitor reviewer performance
- Discuss revisions to the AICPA Peer Review Program Oversight Handbook
- Review and conditionally approve 2023 plans of administration
- Joint meeting with NASBA’s Peer Review Compliance Committee (PRCC)

Education and Communication Task Force

Accomplished since last PRB meeting:
- Published conference cases from the 2022 Peer Review Conference, taking into consideration attendee feedback provided by discussion leaders
- Published a Q&A document of unanswered or topical questions submitted during the 2022 Peer Review Conference
- Developed and published the September 2022 Reviewer Alert on September 28, 2022
- Developed and published the Fall 2022 edition of the PR Prompts newsletter on November 8, 2022
- Held the Q4 2022 Peer Reviewer Forum on November 14, 2022
- Discussed feedback related to reviewer performance, reviewer training and reviewer marketing provided during the September 9, 2022 open session PRB meeting
- Held the last of three scheduled AICPA-sponsored 2022 virtual offerings of the “Becoming an AICPA Peer Review Team or Review Captain: Case Study Applications” course

Upcoming tasks:
- Create on-demand training courses designed to meet various peer review training requirements; the intent is to have these published before 2023
- Continue analysis of the reviewer pool and implement plans to improve the pool where necessary
- Continue monitoring our available courses to determine if improvements should be made to our overall training framework
- Continue discussions related to reviewer performance, reviewer training and reviewer marketing feedback provided during the September 9, 2022 open session PRB meeting.
- Begin creation of a new on-demand, self-study course on identifying and writing systemic causes to be released during 2023
- Begin planning procedures for the 2023 Peer Review Conference to be held July 31-August 2, 2023 in Philadelphia, PA
Administering Entity Benchmark Revisions

At their October 24, 2022 meeting, the Oversight Task Force (OTF) approved administering entity (AE) benchmark revisions (illustrated below in track changes) based on results of their monitoring, feedback received, and other staff recommendations to align with the clarified peer review standards or for readability.

Communications Plan
The benchmark revisions will be presented during a future call with the AEs’ CPAs on staff and administrators.

Effective Date
January 1, 2023

Administrators

<table>
<thead>
<tr>
<th>Number</th>
<th>Benchmark</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Perform tasks associated with cases and letters (e.g. Peer Review Information, Scheduling) in PRIMA within 14 calendar days of receipt. Over this reporting period, an AE should have 10% or fewer not performed within this timeframe.</td>
</tr>
<tr>
<td>2</td>
<td>Provide RAB materials electronically to RAB members at least seven calendar days before RAB meetings.</td>
</tr>
<tr>
<td>3</td>
<td>Send revised acceptance letters within 14 calendar days of the committee granting firm requests for waiver or replacement of corrective actions or implementation plans. Over this reporting period, an AE should have 10% or fewer not sent within this timeframe.</td>
</tr>
</tbody>
</table>

Technical Reviewers

<table>
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<tr>
<th>Number</th>
<th>Benchmark</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>Meet all qualifications established in guidance, including training requirements.</td>
</tr>
<tr>
<td>2</td>
<td>Perform the technical review in accordance with guidance.</td>
</tr>
<tr>
<td>3</td>
<td>Maintain objectivity and skepticism to mitigate familiarity threat and implement appropriate safeguards while performing the technical review.</td>
</tr>
<tr>
<td>4</td>
<td>Complete technical reviews to meet the 120-day rule requirement for initial presentation of reviews. Over this reporting period, an AE should have fewer than 10% of reviews not presented within this timeframe.</td>
</tr>
<tr>
<td>5</td>
<td>Complete technical reviews to meet the 60-day rule requirement for engagement reviews with certain criteria. Over this reporting period, an AE should have fewer than 10% of reviews not accepted within this timeframe.</td>
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### Technical Reviewers

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<tr>
<td>6</td>
<td>Thoroughly review and prepare peer reviews for RAB meetings to minimize the number of reviews that are deferred. Over this reporting period, an AE should have fewer than 10% of reviews deferred.</td>
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<tr>
<td>7</td>
<td>Evaluate reviewer performance history, and if it has an impact on the current review present summarize it for the RAB.</td>
</tr>
<tr>
<td>8</td>
<td>Provide reviewer performance feedback recommendations to the committee or RAB on reviewer performance issues.</td>
</tr>
<tr>
<td>9</td>
<td>Be available during the RAB meetings in which regarding their technical reviews are being presented to answer questions to avoid deferrals or delays.</td>
</tr>
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### Committee/RAB

<table>
<thead>
<tr>
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<th>Benchmark</th>
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<tbody>
<tr>
<td>1</td>
<td>Meet all qualifications established in guidance, including training requirements.</td>
</tr>
<tr>
<td>2</td>
<td>Follow peer review guidance in the evaluation and acceptance of peer reviews.</td>
</tr>
<tr>
<td>3</td>
<td>Maintain objectivity and skepticism to mitigate familiarity threat and implement appropriate safeguards while considering the results of peer reviews.</td>
</tr>
<tr>
<td>4</td>
<td>Issue reviewer performance feedback forms and performance deficiency letters when appropriate.</td>
</tr>
<tr>
<td>5</td>
<td>Waive or replace corrective actions and implementation plans in accordance with guidance except in hardship situations.</td>
</tr>
<tr>
<td>6</td>
<td>Assess firm referrals for noncooperation related to consecutive non-pass reports.</td>
</tr>
<tr>
<td>7</td>
<td>Perform oversights on firms and reviewers (or review oversights performed by technical reviewer(s)) in accordance with the Oversight Handbook and risk criteria included in policies and procedures.</td>
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### CPA on Staff

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<tbody>
<tr>
<td>1</td>
<td>Submit this benchmark form signed by CEO and CPA on staff to OTF by due date.</td>
</tr>
<tr>
<td>2</td>
<td>Monitor committee and RAB members' qualifications in accordance with guidance.</td>
</tr>
<tr>
<td>3</td>
<td>RAB member composition includes members with current experience in must-select engagements.</td>
</tr>
<tr>
<td>4</td>
<td>A minimum of three RAB members to evaluate every each item related to a peer review for acceptance in accordance with guidance that requires RAB consideration.</td>
</tr>
<tr>
<td>5</td>
<td>Monitor and address conflicts of interest in accordance with guidance to ensure that individuals recuse appropriately.</td>
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### CPA on Staff

<table>
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<th>Benchmark</th>
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</thead>
<tbody>
<tr>
<td>56</td>
<td>Maintain documentation of committee/RAB's decision for evaluation of potential firm referrals for noncooperation related to consecutive non-pass reports.</td>
</tr>
<tr>
<td>67</td>
<td>Decisions on due date extensions and year-end changes are approved in accordance with guidance and documented.</td>
</tr>
<tr>
<td>78</td>
<td>Scheduling error overrides are appropriate and approved in accordance with guidance.</td>
</tr>
<tr>
<td>89</td>
<td>Implement appropriate remediation such that RAB observation report comments are not consistently repeated in subsequent observations.</td>
</tr>
<tr>
<td>910</td>
<td>Respond to requests from OTF or AICPA staff by due date.</td>
</tr>
</tbody>
</table>

### Benchmarks for the reporting period January 1 – April 30

| 4011   | Submit complete Plan of Administration signed by the CEO and CPA on staff, including all AE oversight requirements by April 1. |

### Benchmarks for the reporting period September 1 – December 31

| 12     | Submit complete Plan of Administration signed by the CEO and CPA on staff by November 1. |
| 13     | Meet all qualifications of the CPA on staff, including training requirements. |
| 14     | Obtain appropriate signed versions of confidentiality agreements annually based on the individual's role, including AE staff, technical reviewers, committee/RAB members and Peer Review Oversight Committee (PROC) members (as applicable) annually. |
Why is this on the Agenda?
The purpose of this agenda item is to provide PRB members and other attendees an update on various PRB related activities and initiatives.

Operations Director’s Report
There have been several important communications recently so please check your emails to make sure you don’t miss any of these!

- Sent Reviewer Alert Sept 28
- Posted Oct 2022 Peer Review Program Manual Changes on Oct 31
- Launched the Assurance Services Executive Committee Exposure Draft on Proposed Criteria for QCM Content (comments due Dec. 15) on Nov 1
- Sent Special Edition Reviewer Alert on Nov 2
- Sent PR Prompts Nov 8
- Hosted Reviewer Forum Nov 14
- Will deploy 2022 Customer Satisfaction Survey in November
- Will send a final 2022 Reviewer Alert in early December

PRIMA Update – As we shared at the beginning of this year, we have been focused on internal systems upgrades including a replacement of the AICPA database that feeds member and firm details into PRIMA. We continue to work through some data migration issues, but fortunately due to the extensive efforts of our team, the impact to enrolled firms has been minimal. We also upgraded the platform that PRIMA is built on, which will enable us to continue to enhance the functionality for our users. Now that these required systems updates are completed, we can resume enhancements to the PRIMA user experience. We expect to have some minor updates going in by the end of this year, and next year we will offer a variety of new features and enhancements, improvements to the user experience based on user feedback and technology improvements including enhancements to our PRIMA knowledge base.

Report from State CPA Society CEOs
Feedback from State CPA Society CEOs remains similar to what was communicated at the September 9 PRB open session meeting.

Update on the National Peer Review Committee
The NPRC met last on October 13. Four large firm reviews were presented and accepted.

Since the September PRB meeting, the NPRC has held four RAB meetings. During those meetings:

- 26 reviews have been presented, including:
  - 24 Pass
  - 1 Pass with Deficiencies and
  - 1 Fail

The NPRC’s next meeting will be held on December 15, 2022.
Update on the Proposed Criteria for QCM Content
The AICPA Assurance Services Executive Committee (ASEC) issued an Exposure Draft (ED) titled, *Proposed Criteria for a Description of the Content of Quality Control Materials (QCM) and the Content of QCM Related to the Relevant Standards and Interpretive Guidance*. Interested parties may submit comments to QCMcontentexam@aicpa-cima.com by Dec.15.

The proposed criteria will be used to evaluate QCM content in a new assertion-based examination to be performed under the Statements on Standards for Attestation Engagements (SSAEs). Although not required, a QCM provider, which may be a CPA firm, may engage a practitioner to examine its QCM content (examination) as it relates to the relevant standards and interpretive guidance.

The examination will help CPA firms that use QCM, and their peer reviewers, address the risks associated with the use of QCM and monitor their practices.
Agenda Item 1.6A

Firms Dropped from the AICPA Peer Review Program for Noncooperation between August 1, 2022 and September 30, 2022

Enrollment in the Program for the following firms was dropped for noncooperation. Those reenrolled as of October 13, 2022, are denoted by an ‘*’ following the firm name.

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<th>Firm Name</th>
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<td>David Gollub</td>
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<td>Elias Aziz-Lavi</td>
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<td>Gregory S. Genetti, CPA</td>
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<td>Harold W. Slusser, CPA</td>
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<td>Yehuda Gutwein, CPA</td>
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<td>John Gerlach &amp; Company</td>
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<td>Robert R. Feazell CPA</td>
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<td>900010096061</td>
<td>VZN Group, LLC*</td>
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<td>900005219310</td>
<td>Jesus M. Mora Nieves, CPA*</td>
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<tr>
<td>900010112870</td>
<td>Jorge Rodriguez*</td>
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<td>900010139518</td>
<td>NMA Certified Public Accountants PSC</td>
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<td>Oscar E. Cullen</td>
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<td>900001042240</td>
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<td>Ana Maria Barrera, PC</td>
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<td>Firm Number</td>
<td>Firm Name</td>
<td>State</td>
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<td>Dunn &amp; Dill CPA’s, PC*</td>
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<td>900255347739</td>
<td>Fox, Garcia and Company LLC*</td>
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<td>Affinity Group CPAs &amp; Consultants PLLC*</td>
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<td>J.P. Rahal &amp; Associates, A.C.</td>
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<tr>
<td>900255188782</td>
<td>Big Horn Basin Accounting*</td>
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Firms Whose Enrollment Was Terminated from the AICPA Peer Review Program since Last Reported

Failure to complete a corrective action
The AICPA Peer Review Program terminated the following firms’ enrollment in the AICPA Peer Review Program for failure to cooperate. The firms did not complete corrective actions designed to remediate deficiencies identified in their most recent peer review.

- Measured Results, a professional Accounting Corporation, Byron McBroom – Ripon, CA
- Business Management Services – Cincinnati, OH
- R.K. Hudson PLLC – Fairfax, VA

Consecutive non-pass reports in engagement reviews
The AICPA Peer Review Program terminated the following firm’s enrollment in the AICPA Peer Review Program for failure to cooperate by continually failing to perform and report on engagements selected for peer review in conformity with applicable professional standards in all material respects, such that the firm received consecutive pass with deficiency or fail reports.

- Gore & Laney, CPAs, PLLC – Queensbury, NY

Consecutive non-pass reports in system reviews
The AICPA Peer Review Program terminated the following firms’ enrollment in the AICPA Peer Review Program for failure to cooperate by failing to design a system of quality control, and/or sufficiently complying with such a system, that would provide the firm with reasonable assurance of performing and reporting in conformity with applicable professional standards in all material respects, such that the firm received consecutive pass with deficiency or fail reports.

- Duane Liebswager, C.P.A., PC – King City, OR

Not responding to inquiries once the review has commenced
The AICPA Peer Review Program terminated the following firm's enrollment in the AICPA Peer Review Program for failure to cooperate. The firm did not respond to inquiries once its peer review had commenced.

- Art Wilson, CPA, A Professional Corporation – Florence, AL
Compliance Update - Firm Noncooperation

Why is this on the Agenda?
This is an informational item to keep AICPA Peer Review Board (PRB) members informed about firm noncooperation, such as drops and terminations.

Hearings, Drops and Terminations

Firm Hearing Referrals and Mediation
Referrals are firm noncooperation cases for which the administering entity (AE) has submitted documentation to AICPA staff to proceed with a termination hearing. The table below shows overall hearings volume through September 2022:

<table>
<thead>
<tr>
<th>Year</th>
<th>Firms Referred</th>
</tr>
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<tbody>
<tr>
<td>2015</td>
<td>22</td>
</tr>
<tr>
<td>2016</td>
<td>53</td>
</tr>
<tr>
<td>2017</td>
<td>61</td>
</tr>
<tr>
<td>2018</td>
<td>201</td>
</tr>
<tr>
<td>2019</td>
<td>171</td>
</tr>
<tr>
<td>2020</td>
<td>112</td>
</tr>
<tr>
<td>2021</td>
<td>160</td>
</tr>
<tr>
<td>2022</td>
<td>149*</td>
</tr>
</tbody>
</table>

*through 9/30/2022

Firms referred to the PRB for a termination hearing increased significantly after PRIMA implementation in 2017, due in part, to process automation as well as changes in guidance to expedite such matters and align more closely with Enhancing Audit Quality initiatives. Efforts to increase consistency, efficiency and effectiveness of administration of the AICPA Peer Review Program (PRP) resulted in maintaining that volume. The decrease shown in 2020 relates to several temporary changes made by the PRP in response to the coronavirus impact on firms, providing firms with additional time to complete peer reviews, corrective actions and implementation plans. As of September 30, 2022, hearing volume appears to be resuming to pre-pandemic levels.
The types of matters for which firms are referred for termination hearings were as follows:

<table>
<thead>
<tr>
<th></th>
<th>2021</th>
<th>2022*</th>
</tr>
</thead>
<tbody>
<tr>
<td>FUOD/IPOD</td>
<td>52%</td>
<td>47%</td>
</tr>
<tr>
<td>NC</td>
<td>11%</td>
<td>7%</td>
</tr>
<tr>
<td>IPOD</td>
<td>9%</td>
<td>21%</td>
</tr>
<tr>
<td>IPNOAGRE</td>
<td>1%</td>
<td>2%</td>
</tr>
<tr>
<td>NOAGRE/IPNOAGRE</td>
<td>16%</td>
<td>7%</td>
</tr>
<tr>
<td>REPEAT</td>
<td>11%</td>
<td>21%</td>
</tr>
</tbody>
</table>

*through 9/30/2022

**Legend:**
- **FUOD/IPOD**: Failure to complete corrective action(s) or implementation plan
- **NC**: General noncooperation (includes completeness activities/material omission from scope, failure to undergo/complete peer review, failure to improve after consecutive corrective actions, etc.)
- **NOAGRE/IPNOAGRE**: Failure to agree to corrective action or implementation plan, including those subsequently revised upon firm request.
- **REPEAT**: Failure to improve after consecutive non-pass peer reviews

During 2021, there was an increase in the number of cases related to failure to complete corrective actions as many of the extensions granted on corrective actions due to the coronavirus impact on firms expired. In 2022, there has been an increase in the number of firms referred for failure to complete their peer review (reflected in the NC number above), which appears to relate to monitoring efforts by AEs.

Firms referred for certain charges, such as failing to complete corrective actions, can sometimes be encouraged and assisted to resolve these matters prior to hearing. AICPA staff attempts to mediate hearing referrals where appropriate, which ultimately leads to less panel and other resource usage. Mediation is not attempted for charges such as consecutive non-pass reports or material omission from scope because those firms do not have any recourse. Through September 2022, mediation was attempted on 105 of the hearing referrals received, resulting in 40 (or 38%) of those hearings being resolved prior to hearing.

**Firm Enrollment Drops**
A firm’s enrollment may be dropped from the AICPA PRP without a hearing prior to the commencement of a review for failure to submit requested information concerning the arrangement or scheduling of its peer review or timely submit requested information necessary to plan or perform the peer review. A detailed list of noncooperation reasons that may lead to a drop is included in the AICPA Standards for Performing and Reporting on Peer Reviews (PR-C 300.12, .A6-.A7) (previously in the Peer Review Board Drop Resolution included in Interpretation 5h-1).

Although warning letters are sent, staff does not perform mediation outreach to firms that may be dropped. Firms whose enrollment will be dropped from the AICPA PRP are sent to PRB members for approval via negative clearance and subsequently reported in PRB open session.
materials. Firms may appeal an enrollment drop from the PRP and mediation is attempted for firms filing an appeal. Through September 2022:

<table>
<thead>
<tr>
<th>Action/Status</th>
<th>#</th>
</tr>
</thead>
<tbody>
<tr>
<td>Appeals received</td>
<td>28</td>
</tr>
<tr>
<td>Reenrolled prior to appeal hearing</td>
<td>20</td>
</tr>
<tr>
<td>Appeal withdrawn by firm</td>
<td>2</td>
</tr>
<tr>
<td>Appeal panel scheduled</td>
<td>2</td>
</tr>
<tr>
<td>Affirmed</td>
<td>1</td>
</tr>
<tr>
<td>Awaiting appeal panel</td>
<td>3</td>
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</table>

Firm Enrollment Terminations
A firm’s enrollment may be terminated for other failures to cooperate with the PRP (typically after the commencement of a review). A detailed list of noncooperation reasons that may lead to a termination is included in the AICPA Standards for Performing and Reporting on Peer Reviews (PR-C 300.13) (previously in the Peer Review Board Termination Resolution (Interpretation 5h-1) on aicpa.org. Terminations from the PRP must be decided upon by a hearing panel of the PRB. Firms may appeal PRP enrollment termination.

Drops and terminations of firms enrolled in the PRP are ordinarily reported in a monthly communication to state boards of accountancy Executive Directors and State Society CEOs and maintained on a listing for AEs.

Firms (with AICPA members) for which enrollment in the AICPA Peer Review Program was terminated are published on aicpa.org and included in the PRB open session materials. Firms without AICPA members for which enrollment in AICPA PRP has been terminated are not published by the AICPA but are included in the statistics of this agenda item.

Below is a summary of firm hearing panel decisions over the past several years:

<table>
<thead>
<tr>
<th>Hearing Panel Decisions</th>
</tr>
</thead>
<tbody>
<tr>
<td>2017: Terminated 18, Not Terminated 6</td>
</tr>
<tr>
<td>2018: Terminated 25, Not Terminated 41</td>
</tr>
<tr>
<td>2019: Terminated 59, Not Terminated 57</td>
</tr>
<tr>
<td>2020: Terminated 32, Not Terminated 9</td>
</tr>
<tr>
<td>2021*: Terminated 19, Not Terminated 55</td>
</tr>
<tr>
<td>2022**: Terminated 9, Not Terminated 50</td>
</tr>
</tbody>
</table>

*corrected  
**through 9/30/2022
Enrollment terminations reported above represent hearing panel decisions to terminate, including firms within their available appeal period and firms that agreed to the charges and were terminated without a hearing.

Firms not terminated reported above represent a hearing panel decision not to terminate the firm’s enrollment. In such cases, hearing panels may require corrective, remedial actions to remain enrolled. Examples of additional corrective actions that might be required include, but are not limited to:

- Replacement review (omission cases)
- Formalization (in writing) of a firm’s decision to limit practice in a certain industry or engagement type or
- Pre-issuance or post-issuance review

In the rare circumstance that additional corrective actions are not required, the review continues uninterrupted. For example, any outstanding corrective actions would need to be completed and accepted before the review is completed.

The number of panel decisions increased significantly in 2019, corresponding to the increase in firm referrals during 2018 as shown in that table. A significant portion of these referrals were the result of completeness activities, or material omission from scope, and were not terminated but required to complete replacement reviews. The decrease shown in 2020 relates to the previously mentioned temporary changes made by the PRP in response to the coronavirus impact on firms.

This summary does not reflect:

- Later decisions by an appeal mechanism to reverse or modify PRB hearing panel termination decisions or
- Cases that are mediated or the underlying cause is resolved (stopped hearings)

Firm Reenrollments

If a firm’s enrollment in the PRP is dropped or terminated, it should address or remediate the cause of the drop or termination to be considered for reenrollment. For example, a firm terminated for failure to complete a corrective action may be reenrolled by completing the corrective action to the peer review committee’s satisfaction. However, reenrollment requests for some firms must be considered by a hearing panel (PR-C 300.16 .A14). These include firms:

- Dropped for not accurately representing its accounting and auditing practice;
- Terminated for:
  - Omission or misrepresentation of information relating to its accounting and auditing practice;
  - Failure to improve after consecutive non-pass peer reviews; and
  - Failure to improve after consecutive corrective actions

During 2021, seven reenrollment cases were considered, resulting in five approvals. Through September 30, 2022, two reenrollment requests were considered and approved. Reenrollment approvals by a hearing panel may be contingent upon some required action(s), such as a successful pre- or post-issuance review of a particular engagement type. Such required actions are a condition of reenrollment and, as such, evidence of completion must be completed (attached to the reenrollment case in PRIMA) at the time of reenrollment.
Agenda Item 1.6C

Approved 2023 Association Information Forms for Associations of CPA Firms

Why is this on the Agenda?
As of November 1, 2022, the Associations Task Force has accepted the 2023 Association Information Form (AIF) from 20 associations of CPA firms on behalf of the Board. Two more associations have submitted forms that are in the process of being approved with one requesting permission to assist its members in forming review teams.

Association Name
AGN International – North America, Inc.
Allinial Global
Alliott Global Alliance
Aprio Firm Alliance (fka Firm Foundation)
BDO Alliance USA
BKR International
CPA Management Systems, Inc. T/A INPACT Americas
CPAConnect
CPAmerica, Inc
CPA-USA Association
DFK International/USA Inc
HLB USA, Inc
Integra International
Leading Edge Alliance, The / LEA Global
Moore North America
MSI Global Alliance
PrimeGlobal North America
RSM US Alliance
Southwest Practice Management Group
TMG

PRIMA Impact
PRIMA has been updated to reflect the approval of the 20 associations for 2023.

AE Impact
Administering entities were notified via email of the 20 associations that have been approved for 2023.

Effective Date
Upon ATF approval.

Board Consideration
None. For informational purposes only.
We’re Hiring!
Lead Manager for AICPA Peer Review

**Who?** CPA with minimum 6 years of public accounting (audit) or peer review related experience

**Why?**
- Work from home (FULLY REMOTE!)
- Great benefits!
- Work/life balance!

Apply [here](#).
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Jiayi Bao
Paul Burns
Lisa Brown
Richard Hill
Marissa Mahoney
Stephen Young
Jon Arbles
Thomas Kirwin
Sharon Romere-Nix
Samuel Johnson
Jerry Cross
Dipesh Patel
Dan Weaver
Marissa Brooks
Kim Ellis
Paul Pierson
Heather Trower
Vinit Shrawagi
Jennifer Winters
Jeffrey De Lyser
Fiona Tam
Faye Hayhurst
Laura Harrison
Gloria Snyder
Julie Phipps
Mary Beth Halpern
Keith Winfield
Deidre Budahl
Julie Salvaggio
David Holland
Michelle Thompson
Darlene Boles
Leon Lewis
Chuck Jordan
Adebimpe McMillon
Gary Miyashiro
Mary Kline-Cueter
Joan Phillips
Mark Harris
Kevin Humphries
Annie Wheeley
Heather Lindquist
Adelina Burke
Kathleen Meyer
Raegen Nuffer
Marc Feinstein
Karen Guerra
Chris Rouse

Art Sparks
Dawn Carlson
Patty Hurley
Peggy Jury
Melinda Hart
Stacey Lockwood
Rebecca Tres
Ashley Sellers
Joey Wash
Victor Blackburn
Glenn Roe