

**PRP Section 2000
Mapping Document**

This mapping document is intended to serve as a resource for readers of the Exposure Draft for the Clarification of AICPA Standards for Performing and Reporting on Peer Reviews and demonstrates that material in extant PRP section 2000 has been evaluated and reflected in the clarified PR-C sections. The wording of extant PRP sections has been redrafted using conventions of the clarity project so that language is more concise and less prescriptive. For example, sentences and paragraphs that contain lead-ins, repetitive content, overviews, examples, or citations of requirements in other standards may not be included in the PR-C sections. As such, material that the Standards Task Force (STF) proposed to be eliminated as part of clarifying the standards has been noted as removed in the “Explanation” column and the most significant changes are directed to further explanation in the explanatory memorandum of the exposure draft. The STF believes that the material included in the PR-C sections appropriately represents the concepts of the extant PRP sections, as either standard requirements or application and other explanatory material.

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
Use of the Standards		
<p>1-1</p> <p><i>Question</i>—Paragraph .01 of the standards discusses that the standards are provided for CPA firms (and individuals) enrolled in the program. Who determines program enrollment eligibility and who may administer the program?</p> <p><i>Interpretation</i>—The AICPA Peer Review Board (“board”) determines program enrollment eligibility and who may administer the program. CPA firms (and individuals) may enroll in the program, regardless of AICPA membership.</p>	<p>100.01 This section contains general principles and responsibilities for the AICPA Peer Review Program (the program) and applies to</p> <ul style="list-style-type: none"> a. firms and individuals (Ref: par. .45—.47) enrolled in the program (Ref: par. .A1), b. firms and individuals who perform and report on peer reviews, and c. administering entities (AEs) of peer reviews (Ref: par. .A2). <p>The AICPA Peer Review Board (board), among other responsibilities, determines program enrollment eligibility, peer reviewer qualifications, and who may administer the program.</p>	

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<p>There are professional organizations with peer review programs to assist government audit organizations in meeting their <i>Government Auditing Standards</i> peer review requirements. For example, the President’s Council on Integrity and Efficiency peer review program arranges reviews for the Federal Inspector General; the National Association of State Auditors, Comptrollers and Treasurers (NASACT) program arranges reviews for state auditors; and the Association of Local Government Auditors (ALGA) program arranges reviews for local government auditors. Each of these programs have established their own set of standards for conducting peer reviews and should be contacted for additional information when a peer reviewer is considering performing a peer review for one of their members because these standards are not intended for those purposes.</p>	<p>100.A4 A firm does not need any AICPA members to enroll in the program.</p>	
<p>1-2</p> <p><i>Question</i>—Who is currently eligible to enroll in the program, which is administered by committees of the board including but not limited to the National Peer Review Committee (National PRC), state CPA</p>	<p>100.01 This section contains general principles and responsibilities for the AICPA Peer Review Program (the program) and applies to</p> <ul style="list-style-type: none"> a. firms and individuals (Ref: par. .45—.47) enrolled in the program (Ref: par. .A1), b. firms and individuals who perform and report on peer reviews, and 	<p>Removed b/c covered in 100.A2, and 100.01-.02</p>

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<p>societies, or other organizations approved by the board?</p> <p><i>Interpretation</i>—CPA firms and, in certain circumstances, individual AICPA members and CPAs who are not members of the AICPA may enroll.</p>	<p>c. administering entities (AEs) of peer reviews (Ref: par. .A2).</p> <p>The AICPA Peer Review Board (board), among other responsibilities, determines program enrollment eligibility, peer reviewer qualifications, and who may administer the program.</p>	
<p>1-3</p> <p><i>Question</i>—What other guidance is available to those who use the standards?</p> <p><i>Interpretation</i>—Users of the standards have a number of other sources of guidance they can refer to, depending on their role in the program. The standards are principles based and form the foundation for more detailed guidance, encompassed in these interpretations, other guidance in the AICPA <i>Peer Review Program Manual</i> (including Supplemental Guidance and the Report Acceptance Manual), the Oversight Handbook, Administrative Manual, and Peer Review Alerts. There is no hierarchical structure to the standards, interpretations, and other guidance; guidance in each is equally significant. However, in the event of a conflict in interpreting and implementing these</p>		<p>Removed with reorganization of PR-C sections.</p>

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<p>sources of guidance, the standards and interpretations take precedence.</p> <p>Peer review course manuals, conference materials, and other miscellaneous items are also available for reference purposes.</p>		
<p>1-4</p> <p><i>Question</i>—Can state CPA societies or other organizations that are approved by the board to administer the program use the standards, as applicable, to administer peer reviews of firms without AICPA members?</p> <p><i>Interpretation</i>—Yes, except for firms required to be registered with and subject to permanent inspection by the PCAOB or firms that perform engagements under PCAOB standards. Those firms are required to be administered by the National PRC.</p>		<p>Removed, covered in 100.A2–.A6.</p>
<p>Individual Enrollment in the Program</p>		
<p>3-1</p> <p><i>Question</i>—AICPA bylaws require individual CPAs (not the firm) to enroll in the program if they perform compilation services in firms or</p>		<p>Removed covered in 100.03–.04 and 100.A4–.A7</p>

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<p>organizations not eligible to enroll in such a program. To reflect this requirement, paragraphs .03 and .05 of the standards refer to “firms and individuals in the program.” What is meant by “firms or organizations not eligible to enroll,” and can any AICPA member enroll in the program as an individual?</p> <p><i>Interpretation</i>—Under the "Council Resolution Concerning the Form of Organization and Name Rule" (AICPA, <i>Professional Standards</i>, ET appendix B), when the majority of the ownership of a firm, in terms of financial interests and voting rights, belongs to CPAs, it must enroll in the program. A firm or organization without CPA majority ownership (a non-CPA owned entity) would not be eligible to enroll in the program. The characteristics of such a firm are discussed in ET appendix B. Where the firm or organization is not eligible to enroll, such as due to a lack of majority ownership by CPAs, and where the individual AICPA member performs compilation services in the firm or organization, the AICPA member is required to enroll individually in the program. Only AICPA members meeting these criteria are able to enroll individually. Individual AICPA members who are only practicing with a firm that is eligible to enroll in the program may not enroll in the program individually. In</p>		

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<p>addition, CPAs who are not members of the AICPA that perform services that fall within the scope of the program in a firm that is not eligible to enroll may enroll in the program.</p>		
<p>3-2</p> <p><i>Question</i>—The standards, interpretations, and guidance materials for the program use the term <i>firm</i> throughout the materials. When an individual is appropriately enrolled in the program, how does the term <i>firm</i> apply to the enrolled individual, and are there any situations in which the standards, interpretations, or guidance materials are intended to be directed at the actual firm or organization that was not eligible to enroll?</p> <p><i>Interpretation</i>—As an alternative to rewriting all of the standards to reflect individual enrollment, the term <i>firm</i> as it appears in the standards should be applied to the enrolled individual and not the firm or organization in which the individual is practicing public accounting that was not eligible to enroll. Under the characteristics of a firm not eligible to enroll in the program, there must be a CPA who has ultimate responsibility for any financial statement compilation services; non-CPA owners cannot assume ultimate responsibility for any such services. In</p>		<p>Removed as covered in 100.A1</p>

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<p>addition, any compilation report must be signed individually by a CPA and may not be signed in the name of the firm or organization.</p>		
<p>3-3</p> <p><i>Question</i>—When performing the peer review of an enrolled individual in the program, what type of peer review would be required, what peer review materials would be used, and what changes would be necessary to the peer review report?</p> <p><i>Interpretation</i>—As with any peer review, the types of engagements performed dictate the type of peer review required. Because the enrolled individual could only be performing compilation services, this would only require an Engagement Review, although the individual could undergo a System Review. The current peer review materials can still be used as long as the peer reviewer indicates that the peer review was that of an enrolled individual and not of a firm or organization. Similarly, the report and, if applicable, the letter of response, as well as other peer review documents and correspondences, should be tailored so that it is very clear that only the individual is being peer reviewed and not the firm or organization.</p>	<p>100.46 An individual enrolled in the program should have an engagement review in accordance with these standards. Peer review documentation should be tailored to reflect that an individual, not a firm, is being peer reviewed. (Ref: par. .A53)</p> <p>100.A53 An individual enrolled in the program may choose to have a system review.</p>	

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<p>3-4</p> <p><i>Question</i>—If an individual enrolled in the program receives a report with a peer review rating of <i>pass</i> on his or her Engagement Review and meets all other individual qualifications for service as a peer reviewer including independence considerations, can that individual perform peer reviews?</p> <p><i>Interpretation</i>—Yes. However, the individual alone would be the peer reviewer and not the firm or organization that was not eligible to enroll in the program. The peer reviewer should make this fact evident.</p>	<p>100.47 If an individual enrolled in the program meets the reviewer qualifications in section 200, paragraph .05, the individual would be the reviewer (not the firm ineligible to enroll) and that fact should be made evident throughout the review.</p>	
<p>3-5</p> <p><i>Question</i>—As discussed in paragraph .144 of the standards, can a hearing panel decide to terminate an individual’s enrollment in the program?</p> <p><i>Interpretation</i>—Yes. The fair procedures related to hearings and appeals established by the board for individuals enrolled in the program would parallel the process for enrolled firms, including publication of termination in such form and manner as the AICPA Council may prescribe. If a hearing panel decides to</p>	<p>100.A51 An individual enrolled in the program is provided equivalent fair procedures related to hearings and appeals established by the board as enrolled firms.</p>	

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<p>terminate an individual’s enrollment in the program, that individual can appeal pursuant to fair procedures established by the board. When the fact that an individual AICPA member’s enrollment has been terminated is published, the name of the firm or organization that was not eligible to enroll in the program with which the individual was practicing is not published.</p>		
<p>Acquisitions and Divestitures and Their Effect on Peer Review Scope</p>		
<p>5c-1</p> <p><i>Question</i>—Paragraph .05(c) of the standards requires that enrolled firms have independent peer reviews of their accounting and auditing practices. What is the effect on the scope of a firm’s peer review when there has been an acquisition of another practice or portion thereof, or a divestiture of a significant portion of the firm’s practice, during or subsequent to the firm’s peer review year?</p> <p><i>Interpretation</i>—When a reviewed firm has had an acquisition of another practice or a portion thereof or a divestiture of a significant portion of its practice during or subsequent to its peer review year, the reviewer, the</p>	<p>200.21 & 300.19 If a firm has had an acquisition of another practice or a portion thereof or a divestiture of a significant portion of its practice during or subsequent to its peer review year, the reviewer or the reviewed firm should consult with the administering entity and AICPA staff prior to the commencement of the review to consider the appropriate scope of the review or other actions that should be taken. (Ref: par. 200.A31 / 300.A21–.22)</p> <p>200.A31 & 300.A21 A divestiture of a portion of the practice of a reviewed firm during the year</p>	

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<p>reviewed firm, or both, should consult with AICPA staff prior to the commencement of the review to consider the appropriate scope of the review or other actions that should be taken.</p> <p>A divestiture of a portion of the practice of a reviewed firm during the year under review may have to be reported as a scope limitation if the review team is unable to assess compliance with the system of quality control for reports issued under the firm’s name during that year. If the review team is able to review engagements of the divested portion of the reviewed firm’s practice, then the review team should review such engagements considered necessary to obtain an appropriate scope for the peer review. In such circumstances, an appropriate scope is one where a reasonable cross section of the firm’s practice is covered and the review covers all partners and significant industry areas that existed before the divestiture. The review team should carefully assess the effects the divestiture has on the scope of the peer review. A team captain or review captain who is considering whether a peer review report should be issued with an additional paragraph for a scope limitation due to a divestiture should consult with the administering entity.</p>	<p>under review may have to be reported as a scope limitation if the review team is unable to assess compliance with the system of quality control for reports issued under the firm’s name during that year.</p> <p>300.A22 Submission of the “Firm Structure Change” form may be considered a consultation with the administering entity and AICPA staff.</p>	

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<p>Illustrations of System Review reports with a peer review rating of <i>pass (with a scope limitation)</i>, <i>pass with deficiencies (with a scope limitation)</i>, and <i>fail (with a scope limitation)</i> are presented in appendix D, <i>Illustration of a Report With a Peer Review Rating of Pass (With a Scope Limitation) in a System Review</i>; appendix G, <i>Illustration of a Report With a Peer Review Rating of Pass With Deficiencies (With a Scope Limitation) in a System Review</i>; and appendix K, <i>Illustration of a Report With a Peer Review Rating of Fail (With a Scope Limitation) in a System Review</i>. Additional paragraphs included for scope limitations for Engagement Review reports follow the illustrations for System Reviews with scope limitations.</p>		
<p>Resignations From the Program</p>		
<p>5g-1</p> <p><i>Question</i>—Paragraph .05(g) of the standards discusses an enrolled firm’s responsibility to understand the board’s guidance on resignations from the program. Under what conditions may a firm resign from the program?</p>	<p>300.20 A firm may resign from the program when it is 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 administering entity before the firm’s peer review has commenced. A firm should consult with its state board of accountancy to determine if there are rules that require enrollment in peer</p>	<p>PR-C 100.11 defines commencement.</p>

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<p><i>Interpretation</i>—A firm whose peer review has not commenced may resign from the program by submitting a letter of resignation to the board. However, once a peer review commences, and until its completion (see Interpretation No. 25-2), a firm will not be able to resign from the program except as stated in the following paragraph. A peer review commences when the review team begins field work, ordinarily at the reviewed firm’s office in a System Review, or begins the review of engagements in an Engagement Review. 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 a failure to cooperate with the administering entity and may lead to the termination of the firm’s enrollment in the program by a hearing panel of the board.</p> <p>A firm will be permitted to resign once its peer review has commenced but has not been completed when the firm submits a letter pleading guilty, acknowledging its noncooperation with the program, waiving its right to a hearing, and for firms with AICPA members, agreeing to allow the AICPA to publish, in such form and manner as the AICPA Council may prescribe, the fact that the firm has resigned from the program before completion of its peer review, evidencing noncooperation with the program. In addition,</p>	<p>review even if the firm does not perform services that include issuing reports.</p> <p>300.A23 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 with the administering entity and may lead to the termination of the firm’s enrollment in the program by a hearing panel of the board.</p> <p>300.22 To resign from the program once a firm’s peer review has commenced but has not been completed, a firm should submit a letter pleading guilty, acknowledging it has not cooperated with the program, waiving its right to a hearing, and for firms with AICPA members, agreeing to allow the AICPA to publish, in such form and manner as the AICPA Council may prescribe, the fact that the firm has resigned from the program before completion of its peer review, evidencing that it has not cooperated with the program. In addition, if (a) the firm has been notified of the reviewer’s or administering entity’s intent to issue or require a report with a peer review rating of pass with deficiencies or fail or (b) the reviewer or administering entity has knowledge of the discovery of an engagement that was not conducted in accordance with professional standards on which the firm must take, or would</p>	

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<p>if (a) the firm has been notified of the reviewer's or administering entity's intent to issue or require a report with a peer review rating of <i>pass with deficiencies</i> or <i>fail</i> or (b) the reviewer or administering entity has knowledge of the discovery of an engagement that was not conducted in accordance with professional standards on which the firm must take, or would likely be required to take, action in accordance with professional standards, then the fact that the situation in items (a) or (b) of the preceding existed would also be published for firms with AICPA members.</p> <p>If the firm does not sign the letter pleading guilty and waiving its right to a hearing, the firm will be referred to a Peer Review Board hearing panel. The panel will consider terminating the firm's enrollment due to noncooperation.</p>	<p>likely be required to take, action in accordance with professional standards, then the fact that the situation in item (a) or (b) existed would also be published for firms with AICPA members. If the firm does not sign the letter pleading guilty and waiving its right to a hearing, the firm will be referred to a board hearing panel. The panel will consider terminating the firm's enrollment due to not cooperating with the program. (Ref: par. .A23)</p>	
Cooperating in a Peer Review	Cooperating in a Peer Review	

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<p>5h-1</p> <p><i>Question</i>—Paragraph .05(h) of the standards notes that firms enrolled in the program have the responsibility to cooperate with the peer reviewer, administering entity, and the board in all matters related to the peer review, that could impact the firm’s enrollment in the program, including arranging, scheduling, and completing the review and taking remedial, corrective actions as needed (paragraphs .143–.144 of the standards). Under what circumstances will a firm be not cooperating, and what actions can be taken by the board for noncooperation?</p> <p><i>Interpretation</i>—The board has issued a resolution regarding dropping a firm’s enrollment from the program that is as follows:</p> <p style="text-align: center;">AICPA Peer Review Board Resolution (Adopted April 29, 1996 with amendments through January 1, 2009, May 3, 2011, January 30, 2014, September 30, 2014, and September 27, 2016)</p> <p>WHEREAS, a firm enrolled in the AICPA Peer Review Program is required to have a peer review once</p>	<p>300.12 A firm should cooperate with the reviewer, administering entity, and AICPA Peer Review Board (the board) in all matters related to the program. (Ref: par. .A6–.A7)</p> <p>300.13 A firm should ensure its peer review is submitted in compliance with the requirements of the program.</p> <p style="margin-left: 40px;">a. A firm is considered not cooperating and its enrollment subject to termination from the program for reasons including but not limited to the following: (Ref: par. .A7)</p> <ul style="list-style-type: none"> i. Once the review has commenced, not responding to inquiries or providing information necessary to ensure the review is accepted and completed ii. Not providing documentation including the representation letter, quality control documents, engagement working papers, and all elements of the firm’s system of quality control iii. Not responding to MFCs or FFCs timely 	<p>See the “Cooperating and Complying with the Requirements of the Program” heading in PR-C section 300 -- No changes in substance, just format.</p>

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>every three years performed in conformity with the <i>AICPA Standards for Performing and Reporting on Peer Reviews</i>; and</p> <p>WHEREAS, a firm enrolled in the AICPA Peer Review Program is required under the <i>AICPA Standards for Performing and Reporting on Peer Reviews</i> to cooperate with the peer reviewer, administering entity and the AICPA Peer Review Board in all matters related to the review, that could impact the firm’s enrollment in the program;</p> <p>NOW, THEREFORE, BE IT RESOLVED: A firm’s enrollment in the AICPA Peer Review Program will be dropped by the AICPA Peer Review Board, without a hearing, thirty days after the AICPA Peer Review Program notifies the firm by certified mail, or other delivery method providing proof of receipt that the firm has failed to:</p> <p>(1) Timely file requested information with the entity administering the firm’s peer review concerning the arrangement or scheduling of</p>	<ul style="list-style-type: none"> iv. Limiting access to offices, personnel or other once the review has commenced v. Not facilitating the arrangement for the exit conference on a timely basis vi. Failing to timely file a letter of response, if applicable vii. Failing to cooperate during oversight viii. Failing to timely agree to and complete required corrective actions or implementation plans ix. Failing to ensure that the firm’s peer review is submitted to the administering entity timely <p>b. A firm is considered not complying with the requirements of the program and its enrollment is subject to termination from the program for reasons including but not limited to the following:</p> <ul style="list-style-type: none"> i. Withholding information significant to the peer review (Ref: par. A8) ii. Failing to correct deficiencies or significant deficiencies after consecutive non-pass (pass with deficiencies or fail) peer review reports (Ref: par. .A9) 	

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<p>that peer review, prior to the commencement of the peer review,</p> <p>(2) Timely submit requested information to the reviewer necessary to plan or perform the firm’s peer review, prior to the commencement of the peer review,</p> <p>(3) Have a peer review by the required date,</p> <p>(4) Accurately represent its accounting and auditing practice, as defined by the AICPA Standards for Performing and Reporting on Peer Reviews, after notifying its administering entity that it does not perform engagements that require the firm to have a peer review,</p> <p>(5) Timely pay in full the fees and expenses of the review team formed by an administering entity, or</p> <p>(6) Timely pay all fees related to the administration of the</p>	<p>iii. Failing to correct deficiencies or significant deficiencies after consecutive corrective actions required by the committee on the same peer review</p> <p>iv. Receiving a peer review report with deficiencies or significant deficiencies that indicate the firm is so seriously deficient in its performance that the committee believes educational and remedial corrective actions or implementation plans would not be adequate</p> <p>v. Failing to provide the administering entity with a substantive response, and the firm does not revise its response or provides additional responses that are not substantive as determined by the administering entity (Ref: par. .A10)</p> <p>vi. Failing to provide substantive responses during the administering entity’s process of determining if erroneously provided or omitted information by a firm, which results in a significant change in the planning, performance,</p>	

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<p>program that have been authorized by the governing body of an administering entity and the AICPA.</p> <p>The AICPA Peer Review Board may at its discretion decide to hold a hearing. Whether a hearing is held or not, firms with AICPA members enrolled in the AICPA Peer Review Program have the right to appeal to the AICPA Joint Trial Board and firms without AICPA members have the right to appeal pursuant to fair procedures established by the board within 30 calendar days of being notified that the firm's enrollment has been dropped.</p> <p>If a firm's enrollment is dropped for not accurately representing its accounting and auditing practice as defined by the <i>AICPA Standards for Performing and Reporting on Peer Reviews</i>, or subsequent failure to submit a peer review by a required due date, the matter may result in an investigation of a possible violation by an appropriate regulatory, monitoring, or enforcement body. If a firm's enrollment is dropped for such an omission or misrepresentation, re-</p>	<p>vii. evaluation of results, or peer review report (Ref: par. .A11)</p> <p>Failing to timely notify the administering entity that it is performing a type of engagement or engagement in an industry which the firm had previously represented by written communication to the administering entity that it was no longer performing and had no plans to perform, in response to a related corrective action or implementation plan and the corrective action or implementation plan was eliminated by the administering entity based on that representation</p> <p>300.14 If a firm is deemed not cooperating or not complying with the requirements of the program due to the reasons described in paragraph .13, it should be notified by a delivery method providing proof of delivery (including electronic means), that the board will appoint a hearing panel to consider whether the firm's enrollment in the program should be terminated in accordance with fair procedures established by the board.</p>	

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<p>enrollment will be subject to approval by a hearing panel.</p> <p><i>Interpretation</i>—The AICPA Peer Review Board has issued a resolution regarding terminating a firm’s enrollment from the AICPA Peer Review Program that is as follows:</p> <p>AICPA Peer Review Board Resolution (Adopted April 29, 1996 with amendments through January 1, 2009, May 3, 2011, August 8, 2012, January 30, 2014, September 30, 2014, November 30, 2014, and September 27, 2016)</p> <p>WHEREAS, a firm enrolled in the AICPA Peer Review Program is required to have a peer review once every three years performed in conformity with the <i>AICPA Standards for Performing and Reporting on Peer Reviews</i>; and</p> <p>WHEREAS, a firm enrolled in the AICPA Peer Review Program is required under the <i>AICPA Standards for Performing and Reporting on Peer Reviews</i> to cooperate with the peer reviewer, administering entity and the AICPA Peer Review Board in all</p>	<p>300.15 If a firm has AICPA members, the fact that the firm’s enrollment in the program has been terminated, whether with or without a hearing, should be published in such form and manner as AICPA Council may prescribe.</p> <p><i>Reenrollment in the Program</i></p> <p>300.16 To reenroll in the program, a firm should submit a request to reenroll in the program through an administering entity. If the firm was dropped or terminated from the program, the firm should address and remediate the circumstances that caused the firm to be dropped or terminated to be considered for reenrollment in the program. Common criteria for reenrollment include but are not limited to, submitting evidence to the administering entity or hearing panel that demonstrates the following: (Ref: par. .A12–.A14)</p> <ul style="list-style-type: none"> a. Completion of the requested action in compliance with the requirements of the program b. Changes in the firm’s system of quality control (such as personnel changes or procedural changes, methodologies to identify the complete population of engagements performed, access to technical resources or membership in quality centers, and voluntary changes 	

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<p>matters related to the review, that could impact the firm’s enrollment in the program;</p> <p>NOW, THEREFORE, BE IT RESOLVED: A firm is deemed as failing to cooperate by actions including but not limited to:</p> <ul style="list-style-type: none"> • Not responding to inquiries once the review has commenced, • Withholding information significant to the peer review, for instance but not limited to: <ul style="list-style-type: none"> 1. failing to discuss communications received by the reviewed firm relating to allegations or investigations in the conduct of accounting, auditing, or attestation engagements from regulatory, 	<p>in the practice or types of industries or engagements performed)</p> <ul style="list-style-type: none"> c. Competency through completion of relevant CPE, training, or competency assessments d. Assessment of quality in the performance of engagements through internal or external monitoring results (such as pre-issuance reviews, post-issuance reviews, and internal inspections that reflect that engagements are materially performed and reported on in conformity with applicable professional standards) <p>300.17 If reenrollment is approved and the firm is past its next peer review due date, the firm should complete its subsequent peer review</p> <ul style="list-style-type: none"> a. within 90 days of reenrolling if the firm’s most recent peer review is completed, b. within 90 days of the administering entity’s report acceptance body determining that actions taken are satisfactory to complete a commenced peer review, or c. by a later date set by the hearing panel or the administering entity. 	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>monitoring, or enforcement bodies;</p> <p>2. omission or misrepresentation of information relating to its accounting and auditing practice as defined by the <i>AICPA Standards for Performing and Reporting on Peer Reviews</i>, including, but not limited to, engagements performed under <i>Government Auditing Standards</i>; audits of employee benefit plans, audits performed under FDICIA, and examinations of service organizations (SOC 1[®] and SOC 2[®] engagements),</p> <ul style="list-style-type: none"> • Not providing documentation including but not limited to the representation letter, quality 	<p>300.A6 Cooperation includes completing actions timely and in compliance with the requirements of the program.</p> <p>300.A7 A firm is considered not cooperating and is subject to being dropped from the program by the board, for reasons including, but not limited to failing to do the following:</p> <ul style="list-style-type: none"> a. Timely file requested information with the administering entity, prior to the commencement of the peer review b. Timely submit requested information to the reviewer that is necessary to plan or perform the firm’s peer review, prior to the commencement of the peer review c. Have a peer review by the due date d. Accurately represent its accounting and auditing practice, as defined by the program, after notifying its administering entity that it does not perform engagements that require the firm to have a peer review e. Timely pay in full the fees and expenses of the review team formed by an administering entity, or timely pay all fees related to the administration of the program that have been authorized by the governing body of an administering entity and the AICPA 	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>control documents, engagement working papers, all aspects of functional areas,</p> <ul style="list-style-type: none"> • Not responding to MFCs or FFCs timely, • Limiting access to offices, personnel or other once the review has commenced, • Not facilitating the arrangement for the exit conference on a timely basis, • Failing to timely file the report and the response thereto related to its peer review, if applicable, • Failing to cooperate during oversight, or • Failing to timely acknowledge and complete required corrective actions or implementation plans. <p>The firm will be advised by certified mail, or other delivery method providing proof of receipt, that the AICPA Peer Review Board will appoint a hearing panel to consider</p>	<p>If a firm is deemed not cooperating as a result of any of the failures described above, it will be notified by delivery method providing proof of delivery (including electronic means) that its enrollment will be dropped after 30 days if the firm does not cooperate.</p> <p>The board may drop a firm’s enrollment with or without holding a hearing. A firm whose enrollment has been dropped or terminated from the program may appeal within 30 calendar days of notification pursuant to fair procedures established by the board. If a firm’s enrollment is dropped or terminated for not accurately representing its accounting and auditing practice, or for subsequent failure to submit a peer review by a required due date, this may result in an investigation of a possible violation by a regulatory, monitoring, or enforcement body.</p> <p>300.A8 Information significant to the peer review may include, but is not limited to the following:</p> <ul style="list-style-type: none"> a. Failing to discuss communications received by the reviewed firm relating to allegations or investigations in the conduct of accounting, auditing, or attestation engagements from regulatory, monitoring, or enforcement bodies 	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>whether the firm’s enrollment in the AICPA Peer Review Program should be terminated. A firm enrolled in the AICPA Peer Review Program that has been notified that it is the subject of such a hearing may not resign until the matter causing the hearing has been resolved. After a hearing is held, a firm with AICPA members whose enrollment in the AICPA Peer Review Program has been terminated has the right to appeal the panel’s decision to the AICPA Joint Trial Board within 30 calendar days of the hearing. Firms without AICPA members whose enrollment in the AICPA Peer Review Program has been terminated have the right to appeal pursuant to fair procedures established by the board within 30 calendar days of the hearing; and</p> <p>If a firm omits or misrepresents information relating to its accounting and auditing practice as defined by the <i>AICPA Standards for Performing and Reporting on Peer Reviews</i> that results</p>	<p><i>b.</i> Omission or misrepresentation of information relating to the reviewed firm’s accounting and auditing practice as defined by the AICPA Standards for Performing and Reporting on Peer Reviews, including, but not limited to, engagements performed under <i>Government Auditing Standards</i>, audits of employee benefit plans, audits performed under FDICIA, and examinations of service organizations (SOC 1[®] and SOC 2[®] engagements)</p> <p>300.A9 A firm should be notified after receiving a non-pass (pass with deficiencies or fail) peer review report of its responsibility to correct the deficiencies or significant deficiencies. This notification will be via a delivery method providing proof of delivery (including electronic means).</p> <p>300.A10 The administering entity has the authority to determine if a firm’s response is substantive.</p> <p>300.A11 The administering entity has the authority to determine if erroneously provided or omitted information by a firm that results in a significant change in the planning, performance, evaluation of results, or peer review report is a matter of not cooperating with the program.</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>in a material departure^{fn 1} in the firm's most recently accepted peer review, acceptance of the peer review documents will be recalled. A hearing panel will determine whether the firm's enrollment in the AICPA Peer Review Program should be terminated. If the hearing panel determines that the firm's enrollment will not be terminated, at a minimum the hearing panel will require that the firm have a replacement review submitted to the administering entity by the due date which will be approximately 60 days after the hearing panel's decision.</p> <p>Firms that voluntarily notify the administering entity of an omission or misrepresentation resulting in a material departure will not be subject to a hearing panel. This notification from the firm must be prior to the AICPA or administering entity being otherwise notified of or discovering the omission or misrepresentation and prior to the firm receiving notification</p>	<p>300.A12 Reenrollment in the program is subject to evaluation by either the administering entity or a hearing panel of the Peer Review Board. The hearing panel or administering entity's peer review committee may also require other actions as a condition of reenrollment.</p> <p>300.A13 Determination of final acceptance or completion of a review is subject to the administering entity's report acceptance body.</p>	

^{fn 1} Material departure is defined in the Report Acceptance Body Handbook, Chapter 3, Section VII, Recall of Peer Review Documents.

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>from another regulatory or monitoring agency. Acceptance of the peer review documents will be recalled and the firm will be required to submit a replacement review to its administering entity by the due date which will be approximately 90 days after the firm's notification to the administering entity.</p> <p>If a firm's enrollment is terminated for omission or misrepresentation of information relating to its accounting and auditing practice as defined by the <i>AICPA Standards for Performing and Reporting on Peer Reviews</i> or subsequent failure to submit a replacement review by the due date established by a hearing panel, the matter may result in an investigation of a possible violation by an appropriate regulatory, monitoring, or enforcement body. If a firm's enrollment is terminated for such an omission or misrepresentation, re-enrollment will be subject to approval by a hearing panel.</p> <p>BE IT FURTHER RESOLVED: That a firm's failure to cooperate with the administering entity would also include failing to receive a pass report</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>rating subsequent to receiving notification via certified mail, or other delivery method providing proof of receipt, after a peer review rating of <i>pass with deficiencies</i> or <i>fail</i> that a consecutive peer review rating of <i>pass with deficiencies</i> or <i>fail</i> may be considered a failure to cooperate with the administering entity. In addition, a firm that fails to correct deficiencies or significant deficiencies after consecutive corrective actions required by the committee on the same peer review may also be deemed as a firm failing to cooperate.</p> <p>BE IT FURTHER RESOLVED: The administering entity has the authority to determine if a firm's response is substantive. If the administering entity determines that a response is not substantive, and the firm does not revise its response or submits additional responses that are not substantive as determined by the administering entity, this would also be deemed as a firm's failure to cooperate.</p> <p>BE IT FURTHER RESOLVED: The administering entity has the authority to determine if erroneously provided</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>or omitted information by a firm that results in a significant change in the planning, performance, evaluation of results, or peer review report is a matter of noncooperation. The firm's failure to provide substantive responses during the process of resolving such a matter may also be deemed as a firm's failure to cooperate.</p> <p>BE IT FURTHER RESOLVED: That a firm's failure to cooperate with the administering entity would also include failing to timely notify the administering entity that it is performing a type of engagement(s) or engagement(s) in an industry in which the firm had previously represented by written communication to the administering entity that it was no longer performing and had no plans to perform, in response to a related corrective action or implementation plan wherein the corrective action or implementation plan was eliminated by the administering entity based on the representation.</p> <p>BE IT FURTHER RESOLVED: A firm's enrollment in the AICPA Peer Review Program will be terminated</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>for failure to cooperate in any of the preceding situations, without a hearing, upon receipt of a plea of guilty from the firm; and BE IT FURTHER RESOLVED: That pursuant to the <i>AICPA Standards for Performing and Reporting on Peer Reviews</i>, as to AICPA members, the fact that a firm's enrollment in the AICPA Peer Review Program has been terminated, whether with or without a hearing, will be published in such form and manner as the AICPA Council may prescribe.</p>		

5h-2

Question—Paragraph .05h of the standards discusses matters that could impact the firm’s enrollment in the program. If a firm’s enrollment in the program is dropped or terminated, under what circumstances may the firm reenroll in the AICPA Peer Review Program (program)?

Interpretation—Ordinarily, firms may request reenrollment in the program after the firm has sufficient opportunity to implement appropriate changes to correct the cause of the drop or termination. Reenrollment in the program is subject to evaluation by either the administering entity or a hearing panel of the Peer Review Board.

The administering entity or a hearing panel of the Peer Review Board should be made aware of information that led to the firm’s most recent drop or termination from any practice monitoring program. The administering entity may make the determination of whether action(s) is (are) satisfactorily completed and approve reenrollment for drops or terminations such as overdue actions and all other instances of noncooperation that do not require reenrollment consideration by a hearing panel of the AICPA Peer Review Board.

300.A14 Reenrollment decisions subject to approval by a hearing panel of the board, include, but are not limited to the following:

- a. Drops for
 - i. not accurately representing the reviewed firm’s accounting and auditing practice as defined by the AICPA Standards for Performing and Reporting on Peer Reviews
 - ii. failing to submit the reviewed firm’s peer review by a required due date after being dropped for the reason above and subsequently allowed to reenroll

- b. Terminations for
 - i. omitting or misrepresenting information related to the reviewed firm’s accounting and auditing practice as defined by the AICPA Standards for Performing and Reporting on Peer Reviews
 - ii. failing to receive a pass report rating subsequent to receiving notification via certified mail, or other delivery method providing

<p>Reenrollments decisions subject to approval by a hearing panel of the AICPA Peer Review Board, include, but are not limited to:</p> <p>Drops for not accurately representing its accounting and auditing practice as defined by the AICPA Standards for Performing and Reporting on Peer Reviews; and</p> <p>Terminations for—</p> <ul style="list-style-type: none"> <i>b.</i> omission or misrepresentation of information relating to its accounting and auditing practice as defined by the AICPA Standards for Performing and Reporting on Peer Reviews; <i>c.</i> failure to receive a pass report rating subsequent to receiving notification via certified mail, or other delivery method providing proof of receipt, after a peer review rating of pass with deficiencies or fail; or <i>d.</i> failure to correct deficiencies or significant deficiencies after consecutive corrective actions required by the committee on the most recent peer review. <p>Reenrollment generally requires the firm to address and remediate the circumstances that caused the firm to be dropped or terminated. Common criteria for reenrollment, include but</p>	<p>proof of delivery (including electronic means), after a peer review rating of pass with deficiencies or fail</p> <ul style="list-style-type: none"> iii. failing to correct deficiencies or significant deficiencies after consecutive corrective actions required by the committee on the reviewed firm’s most recent peer review <p>300.16 To reenroll in the program, a firm should submit a request to reenroll in the program through an administering entity. If the firm was dropped or terminated from the program, the firm should address and remediate the circumstances that caused the firm to be dropped or terminated to be considered for reenrollment in the program. Common criteria for reenrollment include but are not limited to, submitting evidence to the administering entity or hearing panel that demonstrates the following: (Ref: par. .A12–.A14)</p> <ul style="list-style-type: none"> <i>a.</i> Completion of the requested action in compliance with the requirements of the program <i>b.</i> Changes in the firm’s system of quality control (such as personnel changes or procedural changes, methodologies to identify the complete population of engagements performed, access to technical resources or membership in quality centers, and voluntary changes 	
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are not limited to, submitting evidence to the administering entity or hearing panel that demonstrates:

- e.* Completion of the requested action
- f.* Changes in the firm's system of quality control (such as, but not limited to, personnel changes or procedural changes, methodologies to identify the complete population of seven engagements performed, access to technical resources or membership in quality centers, and voluntary changes in the practice or types of industries or engagements performed)
- g.* Competency through completion of relevant CPE, training, or competency assessments
- h.* Assessment of quality in the performance of engagements through internal or external monitoring results (such as, but not limited to, pre-issuance reviews, post issuance reviews, and internal inspections that reflect engagements are materially performed and reported on in conformity with applicable professional standards)

The hearing panel or administering entity's peer review committee may also require other

in the practice or types of industries or engagements performed)

- c.* Competency through completion of relevant CPE, training, or competency assessments
- d.* Assessment of quality in the performance of engagements through internal or external monitoring results (such as pre-issuance reviews, post-issuance reviews, and internal inspections that reflect that engagements are materially performed and reported on in conformity with applicable professional standards)

300.A12 Reenrollment in the program is subject to evaluation by either the administering entity or a hearing panel of the Peer Review Board. The hearing panel or administering entity's peer review committee may also require other actions as a condition of reenrollment.

300.A13 Determination of final acceptance or completion of a review is subject to the administering entity's report acceptance body.

300.17 If reenrollment is approved and the firm is past its next peer review due date, the firm should complete its subsequent peer review

actions as a condition of reenrollment. Determination of final acceptance or completion of a review is subject to the administering entity's report acceptance body.

If reenrollment is approved and the firm is past its next peer review due date, the firm will generally be required to complete its subsequent peer review

- i.* within 90 days of reenrolling if the firm's most recent peer review is completed, or
- j.* within 90 days of the administering entity's report acceptance body determining that actions taken are satisfactory to complete a commenced peer review or
- k.* by a later date set by the hearing panel or the administering entity.

- a.* within 90 days of reenrolling if the firm's most recent peer review is completed,
- b.* within 90 days of the administering entity's report acceptance body determining that actions taken are satisfactory to complete a commenced peer review, or
- c.* by a later date set by the hearing panel or the administering entity.

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<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>Compilations Performed When the Compiled Financial Statements Are Not Expected to Be Used by a Third Party (Management Use Only), Where No Compilation Report Is Issued</p>		<p>Removed this section because no longer applicable (includes 6-1 through 6-6)</p>
<p>Engagements Performed or Reported Under International Standards</p>		
<p>6-7</p> <p><i>Question</i>—Paragraph .06 of the standards provides the definition of an accounting and auditing practice for the purposes of these standards as all engagements covered by SASs, SSARS, SSAEs, <i>Government Auditing Standards</i>, and engagements performed under PCAOB standards. Engagements subject to the program are those included in the firm’s accounting and auditing practice that are not subject to PCAOB permanent inspection. What about International Standards on Auditing, Assurance Engagements and Related Services (ISAs), any other standards issued by the International Auditing and Assurance Standards Board (IAASB) or any</p>	<p>100.A12 The International Auditing and Assurance Standards Board (IAASB) is not currently recognized by AICPA Council to promulgate technical standards (nor is the International Public Sector Accounting Standards Board); therefore compliance with the auditing, review, other assurance or related services standards issued by the IAASB, or any other audit or assurance standards outside of the United States, is not included in the scope of peer review.</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>other audit or assurance standards outside of the U.S. (“international standards”)?</p> <p><i>Interpretation</i>—The "Council Resolution Designating Bodies to Promulgate Technical Standards" (AICPA, <i>Professional Standards</i>, ET appendix A), identifies the bodies recognized by AICPA Governing Council to set standards. The IASB (International Accounting Standards Board) which issues International Financial Reporting Standards (IFRS) is included (as is FASB, FASAB, and GASB). Although peer review standards do not refer to the accounting standard setters, this means that IFRSs is within the scope of our peer review process.</p> <p>However, the IAASB is not currently recognized by the AICPA (nor is the International Public Sector Accounting Standards Board), therefore compliance with ISAs issued by the IAASB, and any other audit or assurance standards outside of the U.S., is not included in the scope of peer review. Firms performing such engagements are required to follow certain U.S. professional standards—see Interpretation No. 6-8.</p>		
<p>6-8</p> <p><i>Question</i>—Is an <i>engagement</i> performed under the ISAs, any other standards issued by the</p>	<p>100.10 Engagements performed under international standards should be included in the scope of a peer review. Under U.S. professional standards, the engagement should comply with</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>IAASB or any other audit or assurance standards outside of the U.S. (“international standards”) included in the scope of the peer review?</p> <p><i>Interpretation</i>—Yes, an engagement performed under international standards would be included in the scope of the peer review. Under U.S. professional standards, the engagement would comply with elements of both the international standards and U.S. professional standards. However, the peer reviewer should only test compliance with the U.S. professional standards described in paragraph .06 of the peer review standards (that is, engagements performed under SASs, SSARS, SSAEs, <i>Government Auditing Standards</i>, and PCAOB standards not subject to PCAOB permanent inspection). Testing of compliance with any international standards is not included in the scope of the review.</p> <p>The peer reviewer should inquire of the firm during planning about whether any engagements were performed under international standards. If yes, the peer reviewer should inquire if the firm understands professional guidance for reporting on statements for international use.</p> <p>A misunderstanding of U.S. professional guidance for reporting on statements for</p>	<p>elements of both the international standards and U.S. professional standards. However, the peer reviewer should only test compliance with the U.S. professional standards. Testing of compliance with any international standards is not included in the scope of the review. The peer reviewer should consult with AICPA staff for further guidance, if necessary. (Ref: par. .A12)</p> <p>200.A28 Although a reviewer is testing compliance only with U.S. professional standards, the reviewer may inquire of the firm regarding the firm’s understanding of professional guidance for reporting on statements for international use to assist in planning the review.</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>international use increases the risk of an engagement not performed and reported on in accordance with professional standards.</p> <p>The peer reviewer should consult with AICPA program staff for further guidance, if necessary.</p>		
<p>Engagements Subject to PCAOB Inspection</p>		
<p>6-9</p> <p><i>Question</i>—Paragraph .06 of the standards cover engagements that are not subject to PCAOB permanent inspection. What does this mean?</p> <p><i>Interpretation</i>—For purposes of the program, the PRB determines what engagements meet the criteria to be considered subject to PCAOB permanent inspection. Currently, this includes audits of SEC issuers and the audits and related compliance and exemption engagements for broker-dealers registered with the SEC or dually registered with both the SEC and Commodity Futures Trading Commission (CFTC). The Securities Investor Protection Corporation (SIPC) agreed-upon procedures engagement for SEC registered</p>	<p>100.A3 For purposes of the program, the board determines which engagements meet the criteria to be considered subject to PCAOB permanent inspection. Currently, this includes audits of SEC issuers and the audits and related compliance and exemption engagements for broker-dealers registered with the SEC or dually registered with both the SEC and Commodity Futures Trading Commission (CFTC). Securities Investor Protection Corporation (SIPC) agreed-upon procedures engagements for SEC registered broker-dealers and audits of broker-dealers only registered with the CFTC are in the scope of the program.</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>broker-dealers and audits of broker-dealers only registered with the CFTC are in the scope of the program.</p> <p>Regulatory changes may provide the PCAOB with the authority to inspect additional engagements. In such scenarios, the PCAOB may undertake an interim inspection program to determine the scope of engagements that will be included in a permanent inspection. During an interim inspection period, such engagements are generally not deemed to be inspected by the PCAOB for purposes of peer review. Therefore, the engagements would still be included in the scope of peer review until such time that the Peer Review Board (board) concludes they meet the criteria to be considered included in a permanent inspection of the PCAOB.</p> <p>Additionally, the SEC may set forth rules that require engagements to be performed under other professional standards, but do not require PCAOB permanent inspection. If the SEC rules indicate that the engagements are subject to professional standards, such as those included in paragraph .06 of the standards, but they do not meet the criteria to be considered subject to PCAOB permanent inspection as determined by the board, those</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
engagements are included in the scope of peer review.		
Engagements Under Peer Review		
<p>7-1</p> <p><i>Question</i>—Paragraph .07 of the standards indicates that the <i>Standards</i> are not intended for and exclude the review of the firm’s accounting and auditing practice applicable to engagements subject to PCAOB permanent inspection. Firms that perform audits of employee benefit plans that are required to file a Form 11-K, must also comply with Generally Accepted Auditing Standards (GAAS) for ERISA or DOL reporting purposes by preparing a separate set of GAAS based financial statements. Because the firm must be registered with the PCAOB and perform the employee benefit plan audit in accordance with PCAOB standards, and the engagement is subject to PCAOB permanent inspection, should the scope of the peer review include the review of the GAAS based financials for 11-K filers?</p> <p><i>Interpretation</i>—Because the engagement is already included under the scope of the PCAOB permanent inspection process, and</p>		Removed.

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>the PCAOB’s requirements are more restrictive than GAAS requirements, it is not subject to peer review.</p>		
<p>7-2</p> <p><i>Question</i>—Paragraph .07 of the standards indicates that firms that perform engagements that are not subject to PCAOB permanent inspection under the SASs or <i>Government Auditing Standards</i>, examinations under the SSAEs, or engagements under PCAOB standards have peer reviews called <i>System Reviews</i>. Firms that only perform services under SSARS or services under the SSAEs not included in System Reviews have peer reviews called <i>Engagement Reviews</i>. Is the System Review or Engagement Review determination based on the types of engagements a firm performs as its highest level of service?</p> <p><i>Interpretation</i>—Yes. The type of peer review determination is based on the engagements performed as its highest level of service.</p> <p>[CHART]</p> <p>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,</p>	<p>100.A11</p> <p>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.</p> <p>[CHART]</p> <p>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.</p>	<p>Chart included in exposure draft – See 100.A11.</p>

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>ordinarily based on periods ending during the year under review, except for financial forecasts, projections and agreed upon procedures. Financial forecasts, projections and agreed upon procedures with report dates during the year under review would be subject to selection.</p> <p>If a firm performs or reports on engagements under International Standards, refer to Interpretations 6-7 and 6-8.</p>		
<p>Preparation of Financial Statements Engagement</p>		
<p>7-3</p> <p><i>Question</i>—A firm is not required to enroll in the AICPA peer review program if its only level of service is performing preparation engagements (with or without disclaimer reports) under SSARSs. However, if the firm elects to enroll in the peer review program, is the firm required to have a peer review?</p> <p><i>Interpretation</i>—Yes. If a firm is required to enroll in the peer review program due to licensing or other requirements or otherwise elects to enroll in the peer review program, and its only level of service is performing</p>		<p>Covered in 100.04 and 100.A7</p>

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>preparation engagements (with or without disclaimer reports) under SSARSs, it is required to have a peer review. The peer review is required to be performed under these standards.</p>		
<p>7-4</p> <p><i>Question</i>—Would preparation engagements (with and without disclaimer reports) be subject to peer review when the firm is already enrolled in the program because, for example, it performs services and issues reports on other engagements that are within the scope of the standards?</p> <p><i>Interpretation</i>—Yes. For firms enrolled in the program, preparation engagements (with and without disclaimer reports) fall within the scope of peer review. The standards define an accounting and auditing practice as all engagements covered by SSARSs except when SSARSs provide an exemption from those standards.</p>		<p>Removed as covered in 100.04 and 100.A7</p>
<p>Performing System Reviews at a Location Other Than the Reviewed Firm’s Office</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>8-1</p> <p><i>Question</i>—Paragraph .08 of the standards states that the majority of the procedures in a System Review should be performed at the reviewed firm’s office. What criteria have been established by the board for procedures to be performed at a location other than the reviewed firm’s office?</p> <p><i>Interpretation</i>—If the review can reasonably be performed at the reviewed firm’s office, it should be. Although certain planning procedures may be performed at the peer reviewer’s office, it is expected that a majority of the peer review procedures, including the review of engagements, testing of functional areas, interviews, and concluding procedures should be performed at the reviewed firm’s office.</p> <p>However, it is recognized that there are some situations that make an on-site peer review cost prohibitive or extremely difficult to arrange, or both. In these situations, if the firm and reviewer mutually agree on the appropriateness and efficiency of an approach to the peer review such that it can be performed at a location other than the reviewed firm’s office, then the reviewer can request the administering entity’s approval to</p>		<p>Removed see detailed explanation in Explanatory Memorandum of the exposure draft.</p>

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>perform the review at a location other than the reviewed firm’s office. This request should be made prior to the commencement of fieldwork, and the firm and reviewer should be prepared to respond to the administering entity’s inquiries about various factors that could affect their determination. These factors, which are not mutually exclusive and will be considered judgmentally, include but are not limited to</p> <ul style="list-style-type: none"> <li data-bbox="346 662 892 1023">a. the availability of peer reviewers qualified to review the firm, including whether they have the experience in the industries and related levels of service for which the firm practices, whether they are independent of the firm and not, for instance, competitors within the same close geographic area, and whether the firm is reasonably accessible to those reviewers. <li data-bbox="346 1058 861 1205">b. whether the review conducted at the reviewer’s office or another agreed-upon location can still achieve the objectives of a System Review. <li data-bbox="346 1240 892 1386">c. whether the results are expected to be the same as they would be if the peer review was performed at the reviewed firm’s office. 		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p><i>d.</i> the size of the reviewed firm, including the number of personnel and where they perform their work (for instance, whether they work solely at clients' offices and the firm does not have its own office).</p> <p><i>e.</i> the number of engagements covered by the Statements on Auditing Standards (SASs), <i>Government Auditing Standards</i>, examinations under the Statements on Standards for Attestation Engagements (SSAEs), or engagements performed pursuant to the standards of the PCAOB.</p> <p><i>f.</i> the ability of the reviewed firm and the peer reviewer to hold one or more effective meetings by telephone to discuss the firm's system of quality control, perform inquiries and interviews necessary to perform functional testing, discuss "No" answers on engagement checklists, the reviewer's conclusions on the peer review, and any recommended corrective actions.</p> <p><i>g.</i> the prior peer review results of the firm, including whether the firm received a report with a peer review rating of <i>pass with deficiencies</i> or <i>fail</i></p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>on its last System or Engagement Review, or if it is the firm's first System Review.</p> <p><i>h.</i> whether the firm is able to effectively comply with the reviewer's requests for materials to be sent to the reviewer prior to the review (except as noted in the following list). Those requests should include, in addition to materials outlined in section 4100, <i>Instructions to Firms Having a System Review</i>, the following materials:</p> <ul style="list-style-type: none"> <i>a.</i> All documentation related to the resolution of independence questions (1) identified during the year under review with respect to any audit or accounting client or (2) related to any of the audit or accounting clients selected for review, no matter when the question was identified if the matter still exists during the review period <i>b.</i> The most recent independence confirmations received from other firms of CPAs engaged to perform segments of engagements on which the firm 		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>acted as principal auditor or accountant</p> <p><i>c.</i> The most recent representations received from the sole practitioner concerning his or her conformity with applicable independence requirements</p> <p><i>d.</i> A written representation, dated the same as the peer review report, as described in paragraph .05(f) and appendix B, "Considerations and Illustrations of Firm Representations," of the standards</p> <p><i>e.</i> Documentation, if any, of consultations with outside parties during the year under review in connection with audit or accounting services provided to any client</p> <p><i>f.</i> A list of relevant technical publications used as research materials, as referred to in the quality control policies and procedures questionnaire</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p data-bbox="443 267 894 516">g. A list of audit and accounting materials, if any, identified in response to the questions in the “Engagement Performance” section of the quality control policies and procedures questionnaire</p> <p data-bbox="443 553 894 768">h. Continuing professional education (CPE) records sufficient to demonstrate compliance with state, AICPA, and other regulatory CPE requirements</p> <p data-bbox="443 805 894 943">i. The relevant accounting and auditing documentation and reports on the engagements selected for review</p> <p data-bbox="443 980 894 1125">j. Documentation of the firm’s monitoring results for each year since the last peer review or enrollment in the program</p> <p data-bbox="443 1162 894 1230">k. Any other evidential matter requested by the reviewer</p> <p data-bbox="300 1268 894 1365">The reviewed firm should understand that in the event that matters are noted during the review of selected engagements, the scope of</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>the review may have to be expanded before the review can be concluded.</p>		
<p>Peer Reviews To Be Administered by the National Peer Review Committee</p>		
<p>11-1</p> <p><i>Question</i>—Paragraphs .11, .128, and .161 of the standards note that peer reviews intended to meet the requirements of the program should be carried out in conformity with the standards under the supervision of a state CPA society, group of state CPA societies, the National PRC, or other board committee or entity (hereinafter, administering entity) approved by the board to administer peer reviews. Under what circumstances are peer reviews administered by the National PRC?</p> <p><i>Interpretation</i>—Firms are required to have their review administered by the National PRC if they meet any of the following criteria:</p> <ul style="list-style-type: none"> a. The firm performed or played a substantial role in (as used by the PCAOB) an engagement under PCAOB standards with a period-end during the peer review year. 	<p>100.35 Firms are required to have their review administered by the National PRC if they meet any of the following criteria (Ref. par. .A48):</p> <ul style="list-style-type: none"> a. The firm performed or “played a substantial role in” (as defined by the PCAOB) an engagement under PCAOB standards with a period-end during the peer review year. b. The firm is a provider of quality control materials (QCM) (or affiliated with a provider of QCM) that are used by firms that it peer reviews. <p>100.A47 Firms that are not required to have their review administered by the National PRC may choose to do so.</p>	<p>See explanatory memo of the exposure draft for further explanation of “Removal of Guidance on Performing and Reporting on Reviews of Quality Control Materials”</p>

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p data-bbox="346 266 884 407"><i>b.</i> The firm is a provider of quality control materials (QCM) (or affiliated with a provider of QCM) that are used by firms that it peer reviews.</p> <p data-bbox="203 444 884 691">Firms that are not required to have their review administered by the National PRC may choose to do so. However, such firms are subject to the National PRC’s administrative fee structure and should familiarize themselves with that structure prior to making such a decision.</p>		
<p data-bbox="203 764 579 802">Timing of Peer Reviews</p>		
<p data-bbox="203 873 260 902">13-1</p> <p data-bbox="296 943 894 1268"><i>Question</i>—Paragraph .13 of the standards notes that a firm’s due date for its initial peer review is ordinarily 18 months from the date it enrolled in the program or should have enrolled, whichever date is earlier. What is meant by “should have enrolled?” In addition, what is the due date for a firm that was previously enrolled in another peer review program?</p> <p data-bbox="296 1305 884 1406"><i>Interpretation</i>—When an individual becomes an AICPA member, and the services provided by his or her firm (or individual) fall within</p>	<p data-bbox="919 841 1577 1094">100.24 The firm should consult with the peer reviewer to determine its initial peer review year. The administering entity should be consulted when the peer review year is not the 12-month period after the report date of the initial engagement. The following should be considered to determine the peer review year: (Ref: par. .A41)</p> <ul style="list-style-type: none"> <li data-bbox="1016 1138 1318 1167"><i>a.</i> The firm’s practice, <li data-bbox="1016 1211 1415 1281"><i>b.</i> The year-ends of the firm’s engagements, <li data-bbox="1016 1325 1440 1395"><i>c.</i> The report dates of the firm’s engagements, 	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>the scope of the AICPA’s practice-monitoring standards, and the firm (or individual) issues reports purporting to be in accordance with AICPA Professional Standards, the firm (or individual) should enroll in the program and submit an enrollment form by the report date of the initial engagement. If the firm (or individual) does not initially provide services falling within the scope of the standards, the firm (or individual) should enroll in the program and submit an enrollment form by the report date of their initial engagement. The administering entity will consider the firm’s (or individual’s) practice, the year-ends of their engagements, the report dates of their engagements, and the number and type of engagements to be encompassed in the review, in determining an appropriate due date. A firm’s subsequent peer review ordinarily will be due three years and six months from this peer review year-end. The peer review year-end should be determined pursuant to Paragraph .17 of the standards.</p> <p>If a firm’s most recent peer review was under the auspices of a peer review program administered by an entity approved by the board fully involved in the administration of the AICPA Peer Review Program, conducted in accordance with the <i>AICPA Standards for Performing and Reporting on Peer Reviews</i>, its subsequent peer review ordinarily will be</p>	<p>d. The number and type of engagements to be encompassed in the review,</p> <p>e. The requirements by any other organization for the firm to have a peer review (Ref: par. .A42)</p> <p>100.25 The firm’s initial peer review due date should be within 18 months after the firm issues the report on its first engagement within the scope of the standards.</p> <p>100.A41 Ordinarily, the initial peer review year is the 12-month period after the report date of the initial engagement performed by the firm within the scope of the standards.</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>due three years and six months from the year-end of that peer review.</p> <p>If a firm's most recent peer review was under the auspices of another peer review program by an administering entity not approved by the board, even if conducted in accordance with the <i>AICPA Standards for Performing and Reporting on Peer Reviews</i>, its subsequent peer review ordinarily will be considered an initial peer review, due 18 months from the date it enrolled or should have enrolled in the Program administered by an entity approved by the board.</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>14-1</p> <p><i>Question</i>—Paragraph .14 of the standards states that when a firm performs its first engagement requiring it to have a System Review, the firm’s next due date will be 18 months from the year-end of the engagement. What does this mean?</p> <p><i>Interpretation</i>—When a firm, subsequent to the year-end of its Engagement Review, performs an engagement under the SAs, <i>Government Auditing Standards</i>, examinations under the SSAEs, or an engagement performed under PCAOB standards that would have required the firm to have a System Review, the firm should (a) immediately notify the administering entity and (b) undergo a System Review. The System Review ordinarily will be due 18 months from the year-end of the engagement (for financial forecasts, projections and agreed upon procedures: 18 months from the date of report) requiring a System Review or by the firm’s next scheduled due date, whichever is earlier. However, the administering entity will consider the firm’s practice, the year-ends of engagements and when the procedures were</p>	<p>320.18 If, after the year-end of its engagement review, a firm performs an engagement requiring a system review, the reviewed firm should</p> <ul style="list-style-type: none"> a. immediately notify the administering entity and b. undergo a system review. <p>The system review is due the earlier of 18 months from the year-end of the engagement (or, for financial forecasts and projections, 18 months from the date of report) requiring a system review or by the firm’s next scheduled due date.</p> <p>320.19 If the firm fails to immediately notify the administering entity of the performance of an engagement described in paragraph .18, the firm should participate in a system review with a peer review year-end that covers that engagement.</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>performed, and the number of engagements to be encompassed in the review, as well as use its judgment, to determine the appropriate year-end and due date. Firms that fail to immediately inform the administering entity of the performance of an engagement previously described will be required to participate in a System Review with a peer review year-end that covers the engagement. A firm's subsequent peer review ordinarily will be due 3 years and 6 months from this peer review year-end.</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>14-2</p> <p><i>Question</i>—When a firm has been performing engagements that allowed it to have an Engagement Review and, as a result of a change in paragraph .07 of the standards is now required to have a System Review, is the firm’s next due date 18 months from the year-end of the engagement (report date for financial forecasts and projects) triggering a System Review?</p> <p><i>Interpretation</i>—No. If the firm continues to only perform the types of engagements that previously allowed it to have an Engagement Review, the firm would not be required to have its next peer review due 18 months from the year-end of the engagement (or report date for financial forecasts, projections and agreed upon procedures) triggering a System Review. The firm will stay on its current peer review cycle and the type of review for its next peer review will be determined based on the date it is scheduled. A firm’s review is defined as scheduled when the review team is approved by the administering entity.</p> <p><i>i.</i> If a review is scheduled prior to the effective date of the change to paragraph .07 of the standards and commences within one year of being scheduled, the firm may still have an</p>		Removed

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>Engagement Review or elect to have a System Review.</p> <p><i>j.</i> If a review is scheduled prior to the effective date of the change to paragraph .07 of the standards, but does not commence within one year, the firm will have a System Review.</p> <p><i>k.</i> If a review (regardless of commencement date) is scheduled on or after the effective date of the change to paragraph .07 of the standards, the firm will have a System Review.</p> <p>For each scenario, the firm’s subsequent peer review will be a System Review, ordinarily due 3 years and 6 months from the year-end of this peer review.</p>		
<p>14-3</p> <p><i>Question</i>—What is the peer review year end and the due date for a firm (or individual) that is currently enrolled in the program, but later begins issuing reports purporting to be in accordance with AICPA <i>Professional Standards</i>?</p>	<p>100.25 The firm’s initial peer review due date should be within 18 months after the firm issues the report on its first engagement within the scope of the standards.</p> <p>100.26 If the firm fails to enroll by the due date described in paragraph .25, the initial peer review due date should be 90 days from the date the firm enrolled in the program.</p>	<p>Removed b/c covered in 100.25-.26</p>

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p><i>Interpretation</i>—The peer review due date of an enrolled firm that begins to perform, or reestablishes the performance of, engagements requiring it to undergo a peer review (see paragraph .07) is ordinarily 18 months from the fiscal year-end of the initial engagement performed by the firm (or individual). The administering entity will consider the firm’s (or individual’s) practice, the year-ends of their engagements, the report dates of their engagements, and the number and type of engagements to be encompassed in the review, in determining an appropriate due date. A firm’s subsequent peer review ordinarily will be due three years and six months from this peer review year-end. The peer review year-end should be determined pursuant to paragraph .17 of the standards.</p>		
<p>14-4</p> <p><i>Question</i>—The due date in paragraph .14 is different than the due date in paragraph .13. When would paragraph .14 be applicable?</p> <p><i>Interpretation</i>—Paragraph .14 speaks to firms currently enrolled in the program that were not required to undergo a peer review (see paragraph .07) or the enrolled firm previously had an engagement review and is now required to have a system review. While</p>		<p>Removed – duplicative.</p>

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
paragraph .13 applies to firms that have not previously enrolled in the program and are required to enroll and undergo a peer review.		

18-1

Question—Paragraph .18 of the standards requires that a firm maintain the same year-end on subsequent peer reviews (which is 3 years from the previous year-end) and the same review due date (which is 3 years from the previous due date). What options does a firm have to change its year-end or extend the due date?

Interpretation—A firm is expected to maintain the same year-end on subsequent peer reviews. Nevertheless, circumstances may arise that may influence a firm to want to change its year-end. For instance, the nature of the firm’s practice may change or they may reevaluate their current year-end and determine as a result that a different year-end is more practical. In such situations, a firm may change its year-end only with prior, written approval of the administering entity.

Administering entities will consider many factors including the nature of the firm’s practice (for instance, when audits are being performed and issued so they will be available for the peer review, tax season, and so on). However, a change in year-end will usually not be approved when there is a public interest concern. This may occur when the firm is requesting the change in an attempt to have an Engagement Review rather than a System

Review, or when a change in year-end would cause the firm's only engagement meeting the criteria described in Interpretation No. 63-1, (engagements conducted in accordance with Government Auditing Standards [GAS, also known as the Yellow Book]; audits conducted pursuant to the Employee Retirement Income Security Act of 1974 (ERISA); audits of an insured depository institution subject to the FDIC Improvement Act of 1991 or examinations of service organizations (SOC 1 and SOC 2 engagements) to fall out of the peer review selection process.

Ordinarily, the firm's due date for the subsequent peer review will be three years and six months from the year-end of the current peer review.

A firm is expected to maintain the same review due date. Nevertheless, circumstances may arise that require the firm to extend its review due date. In such situations, a firm may do so only with prior, written approval of the administering entity, and the extended review due date only applies to the current review. Extensions for subsequent review's due dates must be reapplied for.

Extensions of a review due date by more than three months should be rare. However, in some situations, due to the size of the firm, the complexity of the peer review, and whether or not the review team is integrating

100.28 A firm should have prior approval by the administering entity to change its peer review year-end. A change in peer review year-end will be applicable to current and subsequent peer reviews. (Ref: par. .A44)

100.A44 Administering entities will consider factors, including but not limited to, those described in paragraph .24 when a firm has requested a change in its peer review year. Administering entities will not approve a change in peer review year that would have a public interest concern, such as when a must-select engagement would be excluded from the scope of the peer review.

100.29 A firm should have prior approval by the administering entity to extend its peer review due date and the extension should only be applicable to the current peer review. (Ref: par. .A45)

100.A45 An administering entity will ordinarily approve a review due date extension of three months or less. If a firm's peer review is subject to oversight, the administering entity may approve an extension of up to six months.

100.30 A firm should ensure that any change in the review due date or year-end approved by the administering entity is communicated to and recognized by any other organizations requiring it to have a peer review. (Ref: par. .A42)

peer review procedures with the firm's internal inspection procedures, it is not unusual for a peer review to occur over a number of months. In such situations, a firm whose peer review has oversight performed by the administering entity may extend its review due date by up to six months with prior, written approval of the administering entity.

In any of the situations previously described, it is the responsibility of the firm to ensure that any change in the review due date (or year-end) approved by the administering entity is recognized by any other organizations requiring it to have a peer review. This includes but is not limited to state boards of accountancy, the Government Accountability Office, and other regulators.

100.A42 Organizations that may require a peer review include, but are not limited to, state boards of accountancy, the Government Accountability Office, and other regulators.

300.23 If a firm experiences a natural disaster or other catastrophic event that affects its ability to comply with the requirements of the standards, the firm should consult with its administering entity

300.24 If the situation affected both the firm's operations and its ability to comply with peer review requirements, the firm should discuss the following with the administering entity:

- a.* The firm's current peer review year-end and due date
- b.* The extent of damage to the firm's offices and the working papers subject to peer review, if applicable (This would include off-site storage or data-retention facilities that house working papers subject to peer review.)
- c.* The availability, or lack thereof, of personnel that performed engagements subject to peer review
- d.* The firm's ability to continue operating and performing engagements subject to peer review
- e.* If known, whether the firm's scheduled peer reviewer was also affected
- f.* The amount of time the firm deems necessary before it would be ready to undergo a peer review

The administering entity should assist in determining whether there could be a possible scope limitation due to the exclusion of any affected engagements or offices, the need for a change in year-end or an extension of due date, and the effect on the firm's continuing peer review cycle. These situations will be considered on a case-by-case basis.

300.25 If the firm's scheduled reviewer was directly affected by a natural disaster or other catastrophic event and may no longer be able to perform the review, the firm should consult with its administering entity. The administering entity will assist the firm in determining whether it is appropriate to extend the peer review due date or if the firm should engage another reviewer to perform its peer review. (Ref: par. .A24)

300.A24 If a reviewer was affected by a natural disaster or other catastrophic event and is not able to complete a scheduled review, the administering entity will consider the following:

- a.* The firm's peer review year-end and the timing of when engagements falling within the peer review year are performed
- b.* The length of time between when the situation arose and the firm's due date
- c.* The amount of time that the currently scheduled peer reviewer or review team

	<p>would need before being able to perform the peer review</p> <p><i>d.</i> Whether the firm has very specialized industries or types of engagements</p>	
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<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>19-1</p> <p><i>Question</i>—Paragraph .19 of the standards states that when a firm resigns from the program and subsequently reenrolls in the program, the firm’s due date is the later of the due date originally assigned or 90 days after reenrolling. How does this apply when a firm resigns from the program at the end of its peer review because it does not plan to perform engagements that require a peer review going forward, but subsequently performs such work?</p> <p><i>Interpretation</i>—If a firm performs an engagement that would require a peer review (see paragraph 7-1) subsequent to resigning from the program, the firm should immediately notify the administering entity in order to reenroll in the program and schedule its peer review. The appropriate due date for the peer review is determined as follows:</p> <ul style="list-style-type: none"> • If the firm resigned from the program and subsequently performs an engagement that requires a peer review within 3 years and 6 months of its prior peer review year-end, the current peer review due date is the 	<p>100.33 If a firm resigns or is dropped from the program and subsequently reenrolls in the program, the firm’s due date is the later of the due date originally assigned or 90 days after reenrolling.</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>later of the due date originally assigned or 90 days after reenrolling.</p> <ul style="list-style-type: none"> • If the firm resigned from the program and subsequently performs an engagement that requires a peer review after its next due date has passed (that is, the prior peer review is longer than 3 years and 6 months in the past), the current peer review due date is ordinarily 18 months from the year-end of the engagement (for financial forecasts, projections and agreed upon procedures, 18 months from the date of report) requiring a peer review. <p>In either case, the administering entity will consider the firm’s practice, the year-ends of engagements and when the procedures were performed, and the number of engagements to be encompassed in the review, as well as use its judgment, to determine the appropriate year-end and due date. A firm’s subsequent peer review ordinarily will be due 3 years and 6 months from this peer review year-end.</p>		
Independence, Integrity, and Objectivity		
21-1		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p><i>Question</i>—Paragraph .21 of the standards states that independence in fact and in appearance should be maintained with respect to the reviewed firm by a reviewing firm, by review team members, and by any other individuals who participate in or are associated with the review and that the review team should perform all peer review responsibilities with integrity and maintain objectivity in discharging those responsibilities. What criteria have been established by the board?</p> <p><i>Interpretation</i>—The following criteria have been established:</p> <p><i>a. Reciprocal Peer Reviews</i></p> <p>Reciprocal peer reviews are not permitted. This means that a firm may not perform a review of the firm that performed its most recent review. It also means that a reviewer may not serve on a review team carrying out a review of a firm whose personnel participated in the most recent review of that reviewer’s firm.</p> <p><i>b. Relationships With Clients of the Reviewed Firm</i></p>	<p>200.16 The reviewer must be independent from the reviewed firm. The reviewer’s independence would be considered impaired in the following circumstances:</p> <p><i>a.</i> A reviewer or a reviewer’s firm participates in a reciprocal peer review. (Ref: par. .A24)</p> <p><i>b.</i> A reviewer who owns securities or has an interest in a reviewed firm’s client reviews an engagement of that client.</p> <p><i>c.</i> A reviewer who was directly involved in the development, maintenance, or distribution of the reviewed firm’s quality control materials; reports to those who were directly responsible for the development, maintenance, or distribution of the materials or receives more than a <i>de minimus</i> amount of revenues or other monies generated by the sale of the materials, reviews an engagement performed and reported on using those materials.</p> <p><i>d.</i> Fees for any products or services provided or shared between firms are material to any party to the peer review. (Ref: par. .A25)</p> <p><i>e.</i> Products or services provided to or shared by the reviewed firm are an integral part of</p>	<p>See explanatory memo of the exposure draft for further explanation of “Removal of Guidance on Performing and Reporting on Reviews of Quality Control Materials”</p>

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>Review team members and, in the case of a review performed by a firm, the reviewing firm and its personnel are not precluded from owning securities in or having family or other relationships with clients of the reviewed firm. However, a review team member who owns securities of a reviewed firm's client shall not review the engagement of that client because that individual's independence would be considered to be impaired. In addition, the effect on independence of family and other relationships and the possible resulting loss of the appearance of independence must be considered when assigning team members to engagements.</p> <p><i>c. Relationships With the Reviewed Firm</i></p> <p>Reviewing firms should consider any family or other relationships, affiliate relationships, alternative practice structures, and common ownership of entities that provide products or services between the management at organizational and functional levels of the reviewing firm and the firm to be reviewed, and should assess the possibility of an impairment of independence. For peer review</p>	<p>the reviewed firm's system of quality control. (Ref: par. .A26 and .A27)</p> <p><i>f.</i> The reviewing firm performed the monitoring of the reviewed firm's accounting and auditing practice, consulting review, quality control document review, preliminary quality control procedures review, or pre- or post-issuance engagement reviews for the year immediately preceding or during the peer review year.</p> <p>200.A24 A firm may not perform a reciprocal peer review, that is, a review of the firm that performed its most recent review. The prohibition against reciprocal peer reviews also means that a reviewer may not serve on a review team carrying out a review of a firm whose personnel participated in the most recent review of that reviewer's firm.</p> <p>200.A25 Examples of products or services include, but are not limited to</p> <ul style="list-style-type: none"> <i>a.</i> consultation; <i>b.</i> expenses, office facilities, or personnel; and <i>c.</i> quality control materials. <p>200.A26 To evaluate whether products or services provided or shared are an integral part of a firm's</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>purposes (including QCM reviews), entities that are affiliated to, are part of an alternative practice structure with, or share common ownership with a reviewing firm are considered to be a part of the reviewing firm when assessing the independence of the reviewing firm.</p> <p>If the fees for any services provided between firms (whether paid by the referring firm or by the client) are material to the reviewed firm, the reviewing firm, or the firm of any member of the review team, independence for the purposes of this program is impaired.</p> <p>If arrangements exist between the reviewed firm and the reviewing firm (and any of its affiliates or related entities) or the firm of any member of the review team whereby expenses, office facilities, or personnel are shared, independence for the purposes of this program is impaired. Similarly, independence would be considered to be impaired by sharing arrangements involving, for example, extensive consultation, or pre-issuance reviews of financial statements and reports. In such circumstances, the firms involved</p>	<p>system of quality control, the reviewer and reviewed firm consider the following factors:</p> <ol style="list-style-type: none"> a. The size of the impacted portion of the practice (Ref: par. .A28) b. The risk associated with the impacted portion of the practice (for example, must-select industries) c. The degree of the reviewed firm’s reliance on the product or service provided or shared d. The significance of the product or service provided or shared <p>If the products or services provided or shared are quality control materials (QCM) that are an integral part of a firm’s system of quality control, a QCM review under the Standards for Performing and Reporting on Peer Reviews, or a QCM examination under the Statement on Standards for Attestation Engagements, could be an appropriate safeguard to offset a potential independence impairment. However, the effectiveness of this safeguard will depend on many factors, such as those considered by peer reviewers in evaluating the reliability of QCM during a peer review, as described in section 210, <i>General Principles and Responsibilities for Reviewers — System Reviews</i>.</p> <p>200.A27 The size of the impacted portion of the practice may be assessed by industry, level of service, or engagement hours.</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>are sharing services that are an integral part of their systems of quality control.</p> <p>If the reviewing firm has provided or sold QCM to the reviewed firm (such as manuals, guides, checklists, practice aids, and so on) independence for the purposes of this program is impaired. However, the impairment would be removed if an independent peer review of the QCM was performed and submitted to the National PRC before the commencement of the reviewed firm's peer review (see paragraphs .159-.160 and Interpretation No. 200-1). In addition, regardless of whether an independent review of the QCM was performed, the review team members cannot be directly involved in the development or maintenance of the provider firm's materials, report to those who were directly responsible for the development or maintenance of the materials, or receive more than a <i>de minimus</i> amount of revenues or other monies generated by the sale of the materials.</p>	<p>200.17 The effect on independence of family and other relationships and the possible resulting loss of the appearance of independence should be considered when assigning reviewers to engagements.</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>21-2</p> <p><i>Question</i>—Can an individual from Firm A be engaged by Firm B to conduct monitoring of Firm B’s accounting and auditing practice or a consulting review and then be engaged to perform Firm B’s subsequent peer review? What about another individual from Firm A?</p> <p><i>Interpretation</i>—In both cases, yes, except if the monitoring of Firm B’s accounting and auditing practice or consulting review is performed for the year immediately preceding or during the peer review year.</p>		<p>Moved remaining independence interpretations to Independence FAQ</p>
<p>21-3</p> <p><i>Question</i>—Firm A is engaged by Firm B to perform a quality control document review, a preliminary quality control procedures review, or both. Could Firm A then be engaged to perform a peer review of Firm B?</p> <p><i>Interpretation</i>—Yes, except if the quality control document review, preliminary quality control procedures review, or both are performed for the year immediately preceding or during the peer review year.</p>	<p>Removed – included in 200.16f</p>	<p>The remaining interpretations and clarified into an FAQ</p>

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>21-4</p> <p><i>Question</i>—Firm A is engaged to perform the peer review of Firm B. However, Firm A performed a pre-issuance review on one of Firm B’s reports and accompanying financial statements for an accounting or auditing engagement during the period since the last peer review year-end. Can Firm A perform the peer review of Firm B?</p> <p><i>Interpretation</i>—Yes, unless the pre-issuance review(s) was performed on an engagement within the year immediately preceding or during the peer review year.</p>		<p>Removed – included in 200.16f</p>
<p>21-5</p> <p><i>Question</i>—Firm A audits the financial statements of Firm B’s pension plan. Could either firm perform a peer review of the other?</p> <p><i>Interpretation</i>—Yes, provided that the fees incurred for the audit are not material to either of the firms. An audit of financial statements is a customary service of an accounting firm. However, reciprocal peer reviews are not permitted.</p>		<p>Removed – included in 200.16d</p>

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>21-6</p> <p><i>Question</i>—A partner in Firm A serves as an expert witness for Firm B or for a party opposing Firm B. Are Firms A and B independent of each other?</p> <p><i>Interpretation</i>—Yes, provided that the fee is not material to either firm and provided that the outcome of the matter, if adverse to Firm B, would not have a material effect on its financial condition or its ability to serve clients.</p>		<p>Removed – included in 200.16d</p>
<p>21-7</p> <p><i>Question</i>—Firm A is engaged to perform the peer review of Firm B. Firm B’s staff attends CPE programs developed by Firm A. Can Firm A perform a peer review of Firm B?</p> <p><i>Interpretation</i>—Yes, as long as Firm A has not effectively become part of Firm B’s system of quality control. If Firm A, or any affiliates of or entities related to Firm A, develop and customize CPE specifically to Firm B’s needs, both firms would need to</p>		<p>Removed – Included in 200.16e</p>

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>assess the extent and degree of customization to determine whether Firm A has become a part of Firm B's system of quality control or had a significant enough impact on that system such that Firm A's independence would be impaired. Factors to consider include the degree of customization, the significance of the programs to Firm B's system of quality control, whether Firm A was involved in determining the type of CPE programs that Firm B needs, and so on. Based on the factors considered, if the nature of Firm A's relationship with Firm B effectively makes Firm A part of Firm B's system of quality control, Firm A's independence is impaired for the first peer review immediately subsequent to the training provided.</p> <p>For example, if Firm A developed and presented CPE programs and training for Firm B that were customized to Firm B's practice, including using some of Firm B's engagements as examples and learning tools, Firm A's independence is impaired for the first peer review immediately subsequent to the training provided. However, Firm A would be permitted to perform any successive peer reviews.</p> <p>This assessment should be made by both firms prior to the commencement of the peer</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>review. Firm B should consult with the administering entity if needed.</p>		
<p>21-8</p> <p><i>Question</i>—Firm A occasionally consults with Firm B with respect to specific accounting, auditing, or financial reporting matters. Are Firms A and B independent of each other?</p> <p><i>Interpretation</i>—Yes, unless the frequency and extent of the consultation is such that Firm B is an integral part of Firm A’s consultation process.</p>		<p>Removed – included in 200.16e</p>
<p>21-9</p> <p><i>Question</i>—Firm B uses Firm A’s internally-developed accounting and auditing manual as its primary reference source. Can Firm A perform a peer review of Firm B, or can Firm B perform a peer review of Firm A?</p> <p><i>Interpretation</i>—No, unless Firm A has had a QCM review performed that covers its accounting and auditing manual and any other of its reference material used by Firm B as a</p>		<p>Removed – included in 200.16c</p> <p>See explanatory memo of the exposure draft for further explanation of “Removal of Guidance on Performing and Reporting on Reviews of Quality Control Materials”</p>

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>primary reference source (see “Performing and Reporting on Reviews of Quality Control Materials (QCM)” in the standards). This is also applicable if the manual is developed by an affiliate of Firm A, or any other entity related to Firm A. If this is Firm A’s initial QCM review, then Firm A is not independent to perform the peer review of Firm B until the QCM review is accepted. For all subsequent QCM reviews, Firm A will remain independent with respect to Firm B, as long as the QCM review is submitted by the due date. If Firm A elects not to have a QCM review performed before Firm B’s peer review commences, Firm A would not be considered independent for purposes of conducting the peer review. In all circumstances, the review team members cannot be directly involved in the development or maintenance of Firm A’s accounting and auditing manual, report to those who were directly responsible for the development or maintenance of the manual, or receive more than a <i>de minimus</i> amount of fees or other monies from the total revenues generated by the sale of the manual.</p>		
21-10		Removed – included in 200.16a and 200.A24

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p><i>Question</i>—Firm A performs a peer review of Firm B. Subsequently, Firm C performs a peer review of Firm B, and Firm D of Firm A. Would the restriction against reciprocity be violated if Firm B were now to review Firm A?</p> <p><i>Interpretation</i>—No. Although the standards state that reciprocal peer reviews are not permitted, that provision is intended only to prohibit back-to-back peer reviews when each firm has not had an intervening peer review by another firm or team. However, this may be a situation where the administering entity elects to perform oversight.</p>		
<p>21-11</p> <p><i>Question</i>—A manager from Firm A served as a team member on the most recent peer review of Firm B. Can a reviewer from Firm B serve on the peer review team of Firm A?</p> <p><i>Interpretation</i>—No, because that would be considered a reciprocal review.</p>		Removed – included in 200.16a
<p>21-12</p>		Removed – included in 200.16f

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p><i>Question</i>—Can an individual from Firm A be engaged by Firm B to perform a peer review of Firm B and subsequently be engaged the following year(s) to conduct an inspection of Firm B’s accounting and auditing practice or a consulting review? What about another individual from Firm A?</p> <p><i>Interpretation</i>—In both cases, yes; however, individual(s) from Firm A would not be eligible to perform Firm B’s subsequent peer review except as noted in Interpretation No. 21-2.</p>		
<p>21-13</p> <p><i>Question</i>—Firm A included the qualifications of Firm B in a proposal for one or more specific engagements. Could either firm perform a peer review of the other following a successful proposal?</p> <p><i>Interpretation</i>—No, unless any fees paid to Firm B are not material to either of the firms; the firms do not share directly or indirectly, or participate in, the profits of the other; the firms do not share fees, office facilities, or personnel; the firms do not have joint ownership of a for-profit entity; and the firms</p>		Removed – included in 200.16d

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
do not exercise any direct or indirect management control over the professional or administrative functions of the other.		
<p>21-14</p> <p><i>Question</i>—A group of firms places an advertisement in a trade journal indicating that its members are “specialists” and provide the “best advice.” Although the firms are not specifically identified in the advertisement, a toll-free telephone number or Internet site is provided for contact. Can one firm in the group perform the peer review of another member firm in the same group?</p> <p><i>Interpretation</i>—No, because the group is marketing or selling services to potential clients on behalf of the firms, where the representations about the firms and the quality of their services are not objective or quantifiable.</p>		Removed
<p>21-15</p> <p><i>Question</i>—A group of firms places an advertisement in a trade journal. The</p>		Removed

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>advertisement indicates the number and geographical location of the member firms and states that its members provide professional accounting and auditing services to over 2,500 industry clients nationwide and that each of the member firms passed its most recent peer review. A toll-free telephone number or Internet site is provided for contact. Can one firm in the group perform the peer review of another member firm in the same group?</p> <p><i>Interpretation</i>—Yes, provided that the group is not a network as defined by Interpretation No. 26-2, the group has submitted the Association Information Form (AIF) to the board; and the group has received notification that the AIF was accepted because the representations in the advertisement are objective or quantifiable.</p>		
<p>21-16</p> <p><i>Question</i>—What would be <i>objective and quantifiable</i> with respect to representations made in advertisements by an association of CPA firms, such as in brochures, pamphlets, websites, and the like?</p> <p><i>Interpretation</i>—Representations made in advertisements by an association of CPA</p>		<p>Removed – To be addressed in independence FAQ</p>

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>firms would be considered <i>objective and quantifiable</i> provided that the association of CPA firms maintains documentation to support the representations and such documentation is available for review by the board. For example, if an association of CPA firms advertises that its members provide professional accounting and auditing services to a designated number of industry clients in a certain geographic area, some form of client listing should be maintained in support of the representation. If an association of CPA firms advertises that each of its member firms have passed peer review, letters from the entities accepting the peer review documents of those firms should be maintained. Representations should not be made by an association of CPA firms in their advertisements that designate themselves as “the best,” “the finest,” “uniquely qualified,” “prestigious,” “elite,” or other similar language. These superlative descriptions are generic words and terms that are too subjective. Also, such representations in advertisements by an association of CPA firms cannot be readily supported by any form of documentation that can be reviewed.</p>		
21-17		Removed – included in 100.21e

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p><i>Question</i>—Certain members of an association (that is, parent association) may form a partnership or sub-association, which is a grouping of association member firms for the purpose of cooperating to enhance the firms’ capabilities to provide professional services. Can members of the sub-association perform peer reviews on firms of the parent association that are not involved in the activities of the sub-association?</p> <p><i>Interpretation</i>—Although a member of a sub-association cannot peer review another member of the same sub-association, the existence of a sub-association by itself should not disqualify members of the sub-association from performing peer reviews of nonaffiliated member firms of the parent association. However, members of a sub-association should not perform peer reviews on firms of the parent association that are not involved in the activities of the sub-association if the parent association and sub-association belong to the same network as defined by Interpretation No. 26-2.</p>		
21-18		Removed – included in 200.16e

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p><i>Question</i>—Is independence impaired when the reviewers’ firm and the firm subject to peer review have arrangements with the same non-CPA owned entity (including all entities owned or controlled by a common parent company) where the partners of both firms are also employees of that non-CPA owned entity and remit revenues or profits, or both, to the non-CPA owned entity for payment of the lease of employees, office facilities, equipment, or other services provided by the non-CPA owned entity?</p> <p><i>Interpretation</i>—Yes, independence is impaired, and the firms involved with the non-CPA owned entity are precluded from participating in the peer review of one another or of other firms related to the non-CPA owned entity.</p>		
<p>21-19</p> <p><i>Question</i>—A state CPA society places an advertisement promoting the CPA profession without identifying any specific firms. May firms whose personnel belong to that state CPA society provide peer review for each other?</p>		Removed

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<i>Interpretation—Yes.</i>		
<p>21-20</p> <p><i>Question—</i>Firm A and Firm B have shared office facilities for the last several years. Due to the growth of both firms, Firm B moved into new offices on January 1, 2014. In March 2016, Firm A engaged Firm B to perform the peer review of Firm A. Firm A’s peer review year-end is December 31, 2015. Can Firm A perform the peer review of Firm B?</p> <p><i>Interpretation—</i>Yes, because the firms did not share office facilities within the current peer review year and any subsequent periods thereafter.</p>		Removed – included in 200.16e
<p>21-21</p> <p><i>Question—</i>Firm A purchases an accounting and auditing manual developed by an association that it belongs to as its primary reference source. Personnel from Firm B who are also peer reviewers aided the association with the development of the manual by authoring significant sections of the manual.</p>		Removed – included in 200.16c

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>The association receives annual approval to form review teams for its member firms. Can the association include reviewers from Firm B on the review team to peer review Firm A?</p> <p><i>Interpretation</i>—Yes, as long as the following personnel from Firm B are not included on the review team: personnel directly involved in the development or maintenance of the association’s accounting and auditing manual (such as those who authored sections of the manual), personnel who report to those who were directly responsible for the development or maintenance of the manual, or personnel who receive more than a <i>de minimus</i> amount of fees or other monies from the total revenues generated by the sale of the manual.</p>		
<p>21-22</p> <p><i>Question</i>—ABC, Inc. (an affiliate of Firm A) is a provider of audit manuals and guides for various industries. Firm B purchases an industry-specific audit manual from ABC, Inc., to assist with performing audit engagements for a niche industry. The niche industry represents an insignificant portion of Firm B’s overall audit and attest practice. Firm B does not purchase any other practice</p>		<p>Removed- included in 200.16c</p> <p>See explanatory memo of the exposure draft for further explanation of “Removal of Guidance on Performing and Reporting on Reviews of Quality Control Materials”</p>

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>aids or manuals from ABC, Inc. Can Firm A perform the peer review of Firm B?</p> <p><i>Interpretation</i>—Yes, unless either the niche industry grows to become a more significant part of the firm’s overall practice and the same audit manual is used, or the niche industry is a must-select industry. If either occurs, then the industry manual would be assessed as being integral to Firm B’s system of quality control, and Firm A’s independence would be impaired (see Interpretations 21-1c and 159-1 for additional information on affiliate relationships). If ABC, Inc. had the relevant audit manual undergo an independent QCM review in compliance with the standards, Firm A’s independence would not be impaired. However, any reviewers from Firm A who participated in the development or maintenance of ABC, Inc.’s materials, report to those who were directly responsible for the development or maintenance of the materials, or receive more than a <i>de minimus</i> amount of the revenues generated from the sale of the materials would not be independent of Firm B and would not be approved as a part of the review team under any circumstances. This is applicable regardless of the nature of the materials purchased by Firm B, and includes audit programs, practice aids, and so on.</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>If the nature of the audit manual or guide purchased and adopted is not integral to Firm B’s system of quality control, independence would not be impaired. Factors that should be considered in assessing whether the manual is an integral part of the system of quality control include the size of the impacted portion of the firm’s practice (by industry, level of service, engagement hours, and so on); the risk associated with that portion of the firm’s practice (for example, must-select industries); the degree of reliance placed on the manual; the significance of the guidance provided by the manual to the related engagements; and so on.</p>		
<p>21-23</p> <p><i>Question</i>—Reviewers from Firm A provide technical consultation to a third-party provider of QCM. The extent of the consultation entails reviewing portions of various guides for technical accuracy and providing feedback (if any) to the provider. The reviewers have no control over whether their feedback is addressed or how it impacts the end products ultimately marketed as the guides. Firm B uses guides developed by the provider as an integral part of its system of quality control.</p>		<p>Removed</p> <p>See explanatory memo of the exposure draft for further explanation of “Removal of Guidance on Performing and Reporting on Reviews of Quality Control Materials”</p>

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p data-bbox="296 267 877 332">Can Firm A perform the peer review of Firm B?</p> <p data-bbox="296 370 892 917"><i>Interpretation</i>—Yes, Firm A would be independent for purposes of conducting the peer review of Firm B. However, when reviewers provide consulting or other services to third-party providers, they should assess whether their individual contributions were sufficiently significant to make them a part of the provider’s system. In this circumstance, the extent of the reviewers’ contributions does not make them a part of the provider’s system of quality control. Similarly, if the reviewers from Firm A authored or edited portions of a third-party provider’s guides or other materials, they should also assess the degree and impact of their contributions.</p> <p data-bbox="296 954 892 1409">If the reviewers’ contributions went beyond simple consultation and entailed more formal technical review and approval procedures as a part of the development and maintenance process, or if the reviewers exercised control within the development and maintenance process such that feedback and comments had to be addressed or incorporated into the materials, then the independence of Firm A is impaired. Firm A’s independence would also be impaired if the reviewers authored or edited substantial portions of the guides. In both of these scenarios, the reviewers’</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>contributions are significant to the provider's development and maintenance process such that the reviewers has effectively become a part of the provider's system of quality control.</p> <p>If the provider elected to have an independent QCM review, and the scope of the review included the materials technically reviewed, authored, and so on by the reviewers, then Firm A's independence would no longer be impaired. However, the specific reviewers from Firm A who participated in the development or maintenance of the materials, report to those that were directly responsible for the development or maintenance of the materials, or receive more than a <i>de minimus</i> amount of the revenues generated from the sale of the materials would not be independent of Firm B.</p>		
<p>Illegal Acts</p>		
<p>23-1</p> <p><i>Question</i>—Paragraph .23 of the standards discusses the obligation for all those involved in carrying out the review to fulfill assigned</p>	<p>200.18 Reviewers have no responsibility to detect illegal acts that have either a direct or indirect effect on the firm's ability to practice public accounting. If a reviewer comes across an illegal act during a review, they should consult with</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>responsibilities in a professional manner. What responsibilities do reviewers have to detect illegal acts during a peer review?</p> <p><i>Interpretation</i>—Reviewers have no responsibility to detect illegal acts that have either a direct or indirect effect on the firm’s ability to practice public accounting. If a reviewer comes across an illegal act during a review, he or she should consider consulting with his or her attorney, and consult with appropriate AICPA staff.</p>	<p>AICPA staff and should consider consulting with an attorney.</p>	
<p>Peer Review Documentation and Retention Policy</p>		
<p>24-1</p> <p><i>Question</i>—Paragraph .24 of the standards notes peer review documentation should be prepared in sufficient detail to provide a clear understanding of its purpose, source, and the conclusions reached. How should the peer review be documented to comply with this requirement?</p> <p><i>Interpretation</i>—Among other things, peer review documentation includes records of the</p>	<p>100.37 Reviewers and technical reviewers should use the materials and checklists developed and issued by the board to meet the requirements of the program.</p> <p>100.38 If the reviewer determines additional materials and checklists not issued by the board are</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>planning and performance of the work, the procedures performed, and conclusions reached by the peer reviewer. This includes documenting the risk assessment, the understanding of the firm’s system of quality control, and tests of compliance (including checklists for the review of engagements and staff interviews when there are professional staff). The board has authorized the issuance of materials and checklists, including checklists for the review of engagements, to guide team captains, review captains, and other members of the review team in carrying out their responsibilities under these standards.</p> <p>Ordinarily, materials and checklists developed and issued by the board are to be used by reviewers in carrying out their responsibilities under these standards. Based on its understanding of the reviewed firm’s system of quality control and its assessment of peer review risk, the review team should determine if materials and checklists issued by the board are not sufficiently comprehensive to use on the review. In this event, other materials and checklists may be used; however, they must include the same elements as, and must be more comprehensive than those versions issued by the board. Reviews conducted utilizing alternate materials and checklists will require advance notice to the administering</p>	<p>needed to complete a review, the other materials and checklists must</p> <ul style="list-style-type: none"> a. include the same elements and be more comprehensive than those versions issued by the board and b. be approved by the administering entity prior to commencement of the review. 	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>entity and the review must be subject to on-site oversight. The electronic Matter for Further Consideration (MFC), Finding for Further Consideration (FFC) and Disposition of Matter for Further Consideration forms provided by the board must be used for all peer reviews and alternative forms will not be accepted. It is the responsibility of the team captain or review captain to ensure that the materials and checklists used meet these standards. Failure to complete all relevant materials and checklists may create the presumption that the review has not been performed in conformity with these standards, and thus the administering entity should be consulted in advance of use of any equivalents to assist in reaching these conclusions.</p>		
<p>Completion of Peer Reviews Online</p>		
<p>24-2</p> <p><i>Question</i>–Paragraph .24 of the standards notes peer review documentation should be prepared in sufficient detail to provide a clear understanding of its purpose, source, and the conclusions reached. What means are available for firms and reviewers to provide documentation to the administering entity, and</p>	<p>100.39 Peer review documentation submitted to the administering entity should be in electronic format as prescribed by the AICPA.</p>	<p>Peer review contact defined in 100.11 and addressed in PR-C section 300</p>

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>who is authorized to submit such documentation?</p> <p><i>Interpretation</i>– Firms and reviewers should provide all peer review documentation to the administering entity in electronic format.</p> <p>Firms are required to submit certain peer review information to the administering entity. Reviewed firm representatives that submit peer review documentation to the administering entity on behalf of the firm are required to be a partner in the firm (or an individual with equivalent supervisory responsibilities), and have the appropriate qualifications and understanding to assume responsibility for the completeness and accuracy of such documentation.</p> <p>Per Interpretation 24-1, reviewers are expected to use the materials and checklists developed by the board when performing a review, this includes electronic submission of those materials. Reviewers should also follow Interpretation 25-3 to ensure that certain documentation will exclude firm identifying information (for example, firm name, location, and employer identification number) that could link the data back to a firm, firm’s client, review or reviewer.</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>25-1 Question—Paragraph .25 of the standards notes that all peer review documentation should not be retained for an extended period of time after the peer review’s completion. How long should peer review documents be retained? Interpretation—Peer review documentation prepared during system and engagement reviews should be retained by the reviewing firm, or association in an association-formed review team until 120 days after the peer review is completed. The administering entity should retain the peer review documentation as follows:</p> <p>[CHART]</p> <p>The administering entity’s peer review committee or the board may indicate that any or all documentation for specific peer reviews should be retained for a longer period of time than specified in the preceding paragraphs. If a firm has been enrolled in an peer review program administered by an entity approved by the board fully involved in the administration of the AICPA Peer Review Program but has not undergone a peer review in the last three years and six months since its last peer review because the firm has not performed engagements and issued reports requiring it to have a peer review, the documents previously noted should still be</p>	<p>400.07 The AE should retain peer review documentation at least 120 days, but no more than 150 days, after the peer review completion date, except for the following, as applicable: (Ref: par. .A9–.A10</p> <ul style="list-style-type: none"> a. Peer review report b. Letter of response c. Firm representation letter d. FFCs e. Letter notifying the firm that its peer review has been accepted f. Letters requesting the firm’s completion of implementation plans g. Letters requesting the firm’s completion of additional corrective actions h. Letters notifying the firm that implementation plans have been completed i. Supporting documents evidencing completion of corrective actions and implementation plans, including documentation regarding the decision to waive, replace, or extend the due date j. Committee-appointed review team (CART) engagement letter k. Letter(s) relating to peer review document recall considerations (See appendix C, “Considerations for the Recall of Peer Review Documents”) 	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>retained for 42 months after completion of the previous peer review. The administering entity may also choose to retain the administrative documents, as applicable. If a firm's most recent peer review was under the auspices of another peer review program administered by an entity not approved by the board, even if conducted in accordance with the AICPA Standards for Performing and Reporting on Peer Reviews, the documents are not required to be retained for purposes of the Program.</p>	<p>If a firm is enrolled in the program but has not undergone a peer review in the last three years and six months since the year-end date of its last peer review, all other peer review documents should be retained at least 42 months, but no more than 43 months, after the peer review completion date.</p> <p>400.A9 AEs may rely on the electronic peer review system to retain peer review documentation in accordance with the requirements if the documents are appropriately uploaded into the system. If any peer review documents are outside of the electronic peer review system, the AE retains those documents as follows:</p> <p>[CHART – See Exposure Draft]</p> <p>400.A10 The AICPA or the AE's committee may require any or all peer review documentation for specific reviews to be retained for a longer period than specified in paragraph .07 if there are regulatory investigations, pending litigation, or other appropriate circumstances.</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
	<p>200.31 Peer review documentation should be retained by the review team until 120 days after the peer review is completed.</p>	
<p>25-2 Question—The standards and interpretations refer to acceptance and completion of peer reviews in several contexts, such as in relation to the retention policy for peer review documentation (paragraph .25 of the standards), when a review can be publicized (paragraph .146) and the qualifications for service as a peer reviewer (paragraph .31[c]) and a report acceptance body member (Interpretation No. 132-1). Is there a difference between the acceptance and completion dates of a peer review? Interpretation—There is no difference in those cases in which the report and letter of response thereto, if applicable (peer review documents), are presented to the administering entity’s peer review committee, and the committee requires no additional corrective action(s) related to the deficiencies or significant deficiencies in a peer review report with a rating of pass with deficiency(ies) or fail by the reviewed firm, nor are there any revisions necessary to the peer review documents. In this circumstance, the date that the committee (or technical</p>	<p>100.11</p> <p>Acceptance date. A peer review is accepted on the date the peer review committee (the committee) or report acceptance body (RAB) concludes a peer review was performed and reported in accordance with the standards and, for <i>pass with deficiencies</i> and <i>fail</i> reports, when the reviewed firm has agreed to perform required corrective actions as a condition of acceptance. (Ref: par. .A13–.A14)</p> <p>Completion date. For <i>pass</i> reports, the completion date is the same as the acceptance date. For <i>pass with deficiencies</i> and <i>fail</i> reports, the completion date is the date the reviewed firm has completed all required corrective actions to the satisfaction of the committee (or its designee). (Ref: par. .A14)</p> <p>.A13 Implementation plans do not affect the acceptance or completion date of a review.</p> <p>.A14 The committee or RAB may require revisions to peer review documents. In those situations, the review is not considered accepted until the</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>reviewer in most cases on an Engagement Review) makes this decision is defined as the acceptance date, and is also defined as the completion date of the peer review. The acceptance date is noted in a letter from the administering entity to the reviewed firm. There is a difference between the acceptance and completion dates of a peer review when the peer review documents are presented to the committee and the committee does not require any revisions to the peer review documents but does require the reviewed firm to take corrective action(s) related to deficiencies or significant deficiencies in the report. In this circumstance, the acceptance date is defined as the date that the reviewed firm signs the letter from the administering entity agreeing to perform the required corrective action(s). The completion date is then defined as the date the committee decides that the reviewed firm has performed the agreed-to corrective action(s) to the committee's satisfaction and the committee requires no additional corrective action(s) by the reviewed firm. This date is noted in a final letter from the administering entity to the reviewed firm. In either of the situations described in the preceding paragraphs, the committee may require revisions to any of the peer review documents or have other matters that require resolution. In those cases, a</p>	<p>revisions have been made to the satisfaction of the committee or RAB (or its designee).</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>review may not be deemed as accepted nor completed until such date that the peer review document(s) is (are) revised or the matter is resolved to the satisfaction of the committee. When there are required revisions or other matters that require resolution and a follow up action has been requested by the committee, the date of acceptance is the later of the date the required revisions are made or the matters are resolved, OR the date the firm has agreed to the follow up action.</p>		
<p>25-3 Question—Interpretation No. 25-1 and paragraph .25 of the standards notes that all peer review documentation should not be retained for an extended period of time after the peer review’s completion. May the AICPA retain any peer review documentation (or data derived from that documentation) beyond the relevant documentation retention requirements outlined in Interpretation No. 25-1 (retention requirements)? If so, for what purpose? Interpretation—Yes, certain peer review documentation may be retained beyond the retention requirements if such documentation is needed to comply with peer review standards and guidance. For example, the peer review report may be retained in order to track the number of consecutive non-pass peer review reports a firm has received. In addition, the AICPA may retain data</p>	<p>100.A48 The AICPA or an administering entity may retain peer review documentation beyond the retention requirements if such documentation is needed to comply with peer review standards and guidance. For example, the peer review report may be retained in order to track the number of consecutive non-pass peer review reports a firm has received.</p> <p>100.A49 The AICPA may retain data derived from peer review documentation beyond the retention requirements to monitor trends in peer review, facilitate research and otherwise promote quality in the accounting and auditing services provided by CPA firms. Any such data provided to others will exclude firm-identifying information (for example,</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>derived from peer review documentation beyond the aforementioned retention requirements in order to monitor trends in peer review, facilitate research and otherwise promote quality in the accounting and auditing services provided by CPA firms. Any such data provided to others will exclude firm identifying information (for example, firm name, location, and employer identification number) that could link the data back to a firm, firm's client, review or reviewer. This data may only be provided to parties outside of the AICPA with the firm's consent. The AICPA will describe the nature of the data which may be shared and the reason behind the request when asking for consent from firms.</p>	<p>firm name, location, and employer identification number) that could link the data back to a firm, firm's client, review or reviewer. This data may only be provided to parties outside of the AICPA with the firm's consent. The AICPA will describe the nature of the data that may be shared and the reason behind the request when asking for consent from firms.</p>	
<p>Associations of CPA Firms and Association Formed Review Teams</p>		
<p>26-1</p> <p><i>Question</i>—Paragraph .26 of the standards states that a review team may be formed by a firm engaged by the firm under review (a firm-on-firm review) or an association of CPA firms authorized by the board to assist its members in forming review teams (an association formed review team). What</p>	<p>100.11</p> <p>Association of CPA firms (association). Any group, affiliation, or alliance of accounting firms. The term also applies to two or more firms or a group of firms (whether a formal or informal group) that jointly market or sell services. Firms and other entities in the association cooperate with</p>	<p>Removed middle section b/c covered in the AIF.</p>

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>criteria have been established by the board for association formed review teams?</p> <p><i>Interpretation</i>—Associations of CPA firms include any group, affiliations, or alliances of accounting firms. The term also applies to two or more firms or a group of firms (whether a formal or informal group) that jointly market or sell services. Firms and other entities in the association cooperate with one another to enhance their capabilities to provide professional services.</p> <p>A member firm of an association may conduct a peer review of another association-member firm enrolled in the program, provided that the association is not a network as defined by Interpretation No. 26-2 and the association receives annual approval from the board. The National PRC administers this process on behalf of the board. The association must submit an AIF to the National PRC that must be approved by the board prior to any aspect of the review being planned, scheduled, or performed.</p> <p>The AIF contains questions regarding general information about the association, independence matters, and whether the association requests to be approved to assist its members in the formation of review teams, provide technical assistance to such review</p>	<p>one another to enhance their capabilities to provide professional services. (Ref: par. .A54–.A56)</p> <p>100.48 For a member firm of an association of CPA firms (association) to conduct peer reviews of another association member firm enrolled in the program, in addition to the peer review independence requirements, the association and its member firms must meet all of the following additional independence criteria:</p> <ul style="list-style-type: none"> a. The association, as distinct from its member firms, does not perform any professional services other than those it provides to its member firms or affiliates. (Ref: par. .A54) b. The association does not make representations regarding the quality of professional services performed by its member firms to assist member firms in obtaining engagements unless the representations are objective or quantifiable. (Ref: par. .A55) c. Referral or participating work among member firms is arranged directly by the firms involved. <p>100.49 For a member firm of an association to conduct a peer review of another association member firm enrolled in the program, the</p>	<p>See explanatory memo of the exposure draft for further explanation of “Removal of Guidance on Performing and Reporting on Reviews of Quality Control Materials”</p>

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>teams, or do both. All review teams must still be approved by the administering entity. The AIF is subject to oversight by the board.</p> <p>The approval of the AIF specifically relates to AICPA members of an association having the ability to perform peer reviews of other firms in the same association enrolled in the program. Furthermore,</p> <ul style="list-style-type: none"> a. Annual approval of the AIF does allow, where the association is not a network and has answered the specific questions making such a request, the association the ability to assist its members in the formation of review teams (association formed review teams) or to provide technical assistance to such review teams. b. The reviewed firm and administering entity, not the association, is ultimately responsible for ensuring that its peer review is scheduled, performed, and completed in a timely manner. c. Annual approval of the AIF does not grant the association the authority to administer the program; therefore, the 	<p>association must submit an Association Information Form (AIF) to, and obtain approval from the board or its designee prior to any aspect of the review being planned, scheduled, or performed. All review teams must still be approved by the administering entity. (Ref: par. .A56)</p> <p>100.A56 The AIF contains questions regarding general information about the association, independence matters, and whether the association requests to be approved to assist its members in the formation of review teams, provide technical assistance to such review teams, or do both. The National PRC is currently designated by the board to consider all AIFs for approval, regardless of whether the association has any firms whose peer review is administered by the National PRC.</p> <p>100.A54 For purposes of this requirement, <i>professional services</i> include accounting, tax, personal financial planning, litigation support, and professional services for which standards are promulgated by bodies designated by AICPA Council.</p> <p>100.A55 Member firms may independently publicize their membership in the association. In addition, an association may respond to inquiries and prepare promotional materials that firms may</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>association is not deemed an approved administering entity.</p> <p><i>d.</i> Approval of the AIF is not an endorsement of, approval of, or has any applicability to a separate peer review program that an association may conduct or administer for firms not enrolled in the program.</p> <p><i>e.</i> If the association makes any representations (in brochures, directories, pamphlets, websites, or any marketing or selling materials regarding its member firms in obtaining engagements), in order for the AIF to be approved such representations must be objective and quantifiable. The purpose of this requirement is to mitigate the appearance of a lack of independence. The board does not prohibit an association from making representations that are not objective or quantifiable; however, associations that make the decision to do so should understand that its member firms will then be unable to peer review other association members.</p> <p>For a member firm of an association to conduct peer reviews of another association-</p>	<p>use to obtain professional engagements on their own behalf.</p> <p>100.50 In an association-formed review team, the captain should be from an association member firm.</p> <p>100.51 An association-formed review should be performed in accordance with these standards. Additionally, the peer review report should be issued on the letterhead of and signed by the captain's firm (not the association).</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>member firm enrolled in the program, in addition to the independence requirements related to network firms appearing in Interpretation No. 26-2 and other peer review independence requirements, the association and its member firms must meet the following independence criteria:</p> <ul style="list-style-type: none"> <li data-bbox="346 553 877 951">a. The association, as distinct from its member firms, does not perform any professional services other than those it provides to its member firms or affiliates. For purposes of this requirement, <i>professional services</i> include accounting, tax, personal financial planning, litigation support, and professional services for which standards are promulgated by bodies designated by AICPA Council. <li data-bbox="346 987 890 1414">b. The association does not make representations regarding the quality of professional services performed by its member firms to assist member firms in obtaining engagements unless the representations are objective or quantifiable. However, member firms may independently publicize their membership in the association. In addition, an association may respond to inquiries and prepare promotional materials that firms may use to obtain 		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>professional engagements on their own behalf.</p> <p>c. Referral or participating work among member firms is arranged directly by the firms involved.</p> <p>An association may voluntarily elect to have an independent QCM review of its system of quality control to develop and maintain QCM used by its member firms (see paragraphs .154-.205 of the standards). An association may wish to have such a review to enable its member firms that use the materials it develops to have more efficient peer reviews. Associations that elect to have this type of review should consult with AICPA program staff.</p> <p>An association formed review team,</p> <p>a. requires that a majority of the review team members, including the team captain in a System Review, and all members in an Engagement Review, be from association member firms.</p> <p>b. performs peer reviews in accordance with these standards, interpretations, and other guidance and the peer review report is issued on the letterhead of the team captain or</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>review captain's firm and signed in the name of the team captain or review captain's firm (not the association).</p> <p>Peer reviews performed by association-formed review teams are subject to oversight by the board and the administering entities and other bodies agreed upon by the board and the administering entity.</p>		
<p>26-2</p> <p><i>Question</i>—How are the terms network and network firm defined for peer review purposes? Is it appropriate for a network firm to perform the peer review of a firm within the same network?</p> <p><i>Interpretation</i>—Consistent with the "Network and Network Firms" interpretation (AICPA, <i>Professional Standards</i>, ET sec. 1.220.010), for peer review purposes, a network is an association of entities that includes one or more firms that cooperate for the purpose of enhancing the firms' capabilities to provide professional services and share one or more of the following characteristics:</p>	<p>100.52 An association of CPA firms cannot be a network, as defined by the "Network and Network Firms" interpretation (ET sec. 1.220.010), and conduct peer reviews of another association member firm. A network firm is not independent with respect to other firms in the same network.</p> <p>100.53 Whether an association is a network and whether an entity is a network firm should be applied consistently by all members of the association.</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<ul style="list-style-type: none"> <li data-bbox="346 267 884 370"><i>a.</i> The use of a common brand name (including common initials) as part of the firm name. <li data-bbox="346 407 842 621"><i>b.</i> Common control (as defined by generally accepted accounting principles in the United States of America) among the firms through ownership, management, or other means. <li data-bbox="346 659 863 873"><i>c.</i> Profits or costs, excluding costs of operating the association; costs of developing audit methodologies, manuals and training courses; and other costs that are immaterial to the firm. <li data-bbox="346 911 884 1162"><i>d.</i> Common business strategy that involves ongoing collaboration amongst the firms whereby the firms are responsible for implementing the association's strategy and are held accountable for performance pursuant to that strategy. <li data-bbox="346 1200 793 1268"><i>e.</i> Significant part of professional resources. <li data-bbox="346 1305 873 1367"><i>f.</i> Common quality control policies and procedures that firms are required to 		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p data-bbox="394 267 869 332">implement and that are monitored by the association.</p> <p data-bbox="298 375 894 805">A network firm is a firm or other entity that belongs to a network. This includes any entity, including another firm that the network firm, by itself or through one or more of its owners, controls, as defined by generally accepted accounting principles in the United States of America is controlled by; or is under common control with. For a further description of the characteristics of a network and network firm, reference the "Network and Network Firms" interpretation (AICPA, <i>Professional Standards</i>, ET sec. 1.220.010).</p> <p data-bbox="298 846 894 1341">It is not appropriate for a network firm to perform the peer review of a firm within the same network. A network firm is not considered to be independent with respect to other firms within the same network. The owners and employees of network firms are also not considered to be independent with respect to other firms within the same network. Whether an association is a network and whether an entity is a network firm should be applied consistently by all members of the association. Due consideration should be given to what a reasonable and informed third party would be likely to conclude after</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
weighing all the specific facts and circumstances.		
Organizing the System or Engagement Review Team		
<p>30-1</p> <p><i>Question</i>—Paragraph .30 of the standards states that a System Review team, a review captain on an Engagement Review, and, in unusual circumstances, any additional reviewers on an Engagement Review ordinarily should be approved by the administering entity prior to the planning and commencement of the review. How is this accomplished?</p> <p><i>Interpretation</i>—The firm and the reviewer should submit scheduling information as required by the administering entity, and the System Review team, a review captain on an Engagement Review, and, in unusual circumstances, any additional reviewers on an Engagement Review should be approved by the administering entity prior to the commencement of the review. The administering entity will consider various factors, including the industries of the engagements of the firm, its size, whether or</p>	<p>200.A32 Various factors, including the industries of the engagements of the firm, its size, whether or not the review is administered by the National PRC, and other factors related to the knowledge and experience of the members of the review team will be considered to determine if the team has the appropriate qualifications and capability to perform the review.</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>not the review is administered by the National PRC, and other factors in relation to the knowledge and experience of the members of the review team to determine if the team has the appropriate qualifications and capability to perform the review.</p>		
<p>Qualifying for Service as a Peer Reviewer</p>		
<p>31-1</p> <p><i>Question</i>—Paragraph .31 of the standards provides minimum requirements to serve as a peer reviewer. Are there exceptions allowed for any of the requirements?</p> <p><i>Interpretation</i>—Peer reviewers should meet the minimum requirements described in paragraph .31 of the standards. However, 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.</p>	<p>200.A6 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.</p>	
<p>31-2</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p data-bbox="296 266 892 407"><i>Question</i>—I recently left my firm where I performed peer reviews and started my own firm. May I continue performing peer reviews in my new firm?</p> <p data-bbox="296 444 892 732"><i>Interpretation</i>—Maybe. Peer Review Standards allow for a transition period. The transition period begins with the earlier of the date you left your previous firm or when you start or become associated with your new firm. The transition period ends with the earlier of 18 months from the beginning date or the peer review due date of your new firm.</p> <p data-bbox="296 769 892 911">Your previous firm should have received a <i>pass</i> peer review report. You should also meet all of the other required qualifications (see standards paragraph .31 for complete details):</p> <ul data-bbox="348 948 892 1382" style="list-style-type: none"> <li data-bbox="348 948 892 1019">• A partner or manager with supervisory responsibilities <li data-bbox="348 1057 892 1273">• Currently active (presently involved) in the accounting or auditing (A&A) function of your firm or carrying out a quality control function on the firm’s A&A engagements (see interpretation 31b-1) <li data-bbox="348 1310 892 1382">• Your firm must be enrolled in the Peer Review Program 	<p data-bbox="919 266 1577 846">200.A3 A reviewer that becomes employed by or an owner of a newly formed firm (or a firm that has not had a peer review) may continue to serve in the same capacity as a reviewer during an 18-month transition period, as long as they meet the other requirements in paragraph .05. The transition period begins with the earlier of the dates of disassociation from the previous firm or when the reviewer becomes employed by or an owner of a new firm. After the 18-month transition period, the reviewer’s current experience is dependent upon the practice composition of the new firm. A reviewer employed by or owner of a firm without any engagements subject to peer review, even if actively pursuing or with a signed engagement letter, does not meet current practice experience.</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>31-3</p> <p><i>Question</i>—I brought several clients over to my new firm with the same practice areas and industry codes as I previously had with my old firm. How do I get approved to perform peer reviews?</p> <p><i>Interpretation</i>—First, you need to submit the <i>AICPA Peer Review Program Enrollment Form</i> or the <i>Peer Review Program Change Form</i>, as applicable, to your administering entity. Then, you contact the Peer Review Hotline at 919.402.4502 to obtain approval as a reviewer with a new firm (provided you meet the qualifications to be a reviewer).</p>		Removed
<p>31-4</p> <p><i>Question</i>—I was approved to perform peer reviews before I left my old firm, but the reviews have not commenced yet. Since I do not have any clients in my new firm and I no longer meet the qualifications to serve as a peer reviewer, what do I do?</p> <p><i>Interpretation</i>—Contact the reviewed firm(s) and the administering entity immediately. You should also update your reviewer resume to reflect your experience. Since you currently</p>	<p>200.13 Reviewer resumes should be updated at least annually to accurately reflect reviewer qualifications and experience. (Ref: par. .A20)</p> <p>200.A20 To accurately reflect reviewer qualifications and experience, a reviewer may need to update their own reviewer resume more</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>do not have any clients in your new firm, you are not eligible to include any experience level codes on your reviewer resume.</p>	<p>frequently than annually. Situations that may warrant more frequent updates include, but are not limited to, the following:</p> <ul style="list-style-type: none"> a. The renewal timing of a reviewer’s license b. Issuance of reports in new levels of service, engagement types, or industries c. A change in firm that the reviewer is employed by or owner of d. Peer review continuing education courses taken 	
<p>31-5</p> <p><i>Question</i>—I performed a peer review during a time when I did not meet the qualifications to serve as a peer reviewer. How does this impact the peer review I performed?</p> <p><i>Interpretation</i>—Since you did not meet the qualifications to perform a peer review at the time it was performed, the peer review committee (committee) of the administering entity may decide that oversight (onsite or offsite) should be performed at your expense. If the review has already been accepted, it may be necessary for you or the committee to consider recalling the previously accepted peer review documents. This could put the</p>	<p>200.A10 If a reviewer performed a peer review while ineligible, the peer review committee of the administering entity may decide to perform oversight at the reviewer’s expense or consider other appropriate measures. If the review has already been accepted, the committee may consider recalling the previously accepted peer review documents. This could put the reviewed firm in jeopardy of its practice unit or firm license in states where the firm is licensed.</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>reviewed firm in jeopardy of its practice unit or firm license in states where they are licensed.</p>		
<p>31b-1</p> <p><i>Question</i>—Paragraphs .31(b) and (c) of the standards state that an individual serving as a peer reviewer should be currently active in public practice at a supervisory level in the accounting or auditing function of a firm enrolled in the program and the firm (or all firms if associated with more than one firm) that the member is associated with should have received a report with a peer review rating of <i>pass</i> for its most recent System Review or Engagement Review that was accepted timely, ordinarily within the last 3 years and 6 months. Does this apply to all firms the individual is associated with? Is the individual still qualified to serve as a reviewer if the individual starts, or becomes associated with, a newly formed firm (or a firm that has not had a peer review)?</p> <p><i>Interpretation</i>—If the individual is associated as a partner with more than one firm, then each of the firms the individual is associated with should have received a report with a peer review rating of <i>pass</i> for its most recent System Review or Engagement Review that</p>	<p>200.A4 The requirement of having received a report with a peer review rating of <i>pass</i> or <i>pass with scope limitations</i> for its most recent peer review, that was accepted timely, is applicable to any firm through which a reviewer receives qualifications.</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>was accepted timely, ordinarily within the last three years and six months.</p> <p>An individual who was previously a System Review team captain, a reviewer in a System Review or a review captain in an Engagement Review that starts or becomes associated with a newly formed firm (or a firm that has not had a peer review) may continue to serve in such capacity during a transition period. The transition period begins with the earlier of the dates of disassociation from the previous firm or when the individual starts or becomes associated with a new firm. The transition period ends with the earlier of 18 months from the beginning date or the peer review due date of the new firm. In no circumstances will the transition period exceed 18 months. The previous firm should have received a report with a peer review rating of <i>pass</i> on its most recently accepted peer review, and the individual should meet all of the other qualifications for service as a team captain or reviewer in a System Review or review captain in an Engagement Review. An individual who was previously a team captain or reviewer in a System Review qualified to perform peer reviews administered by the National PRC that starts or becomes associated with a newly formed firm (or a firm that has not had a peer review), or a firm enrolled in the program that has undergone a</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>peer review administered by another administering entity, may serve as a team captain or a reviewer on a review administered by the National PRC under the same conditions and requirements mentioned previously.</p>		
<p>31b-2</p> <p><i>Question</i>—What if the individual was a sole practitioner that has given up his or her own accounting and auditing practice, but is now serving in the capacity of an external quality control or concurring reviewer for other enrolled firms?</p> <p><i>Interpretation</i>—If the individual was a sole practitioner that has given up his or her own accounting and auditing practice, but is now serving in the capacity of an external quality control or concurring reviewer for other enrolled firms, he or she would meet many of the minimum requirements in paragraph .31(b) of the standards, except for being a professional employee of the firm the work is being performed for, and therefore he or she would not meet the qualification requirements to serve in the capacity of a peer reviewer.</p>		<p>Removed, as is covered by other requirements section (e.g. being a professional employee)</p>

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>31b-3</p> <p><i>Question</i>—If the individual is associated with a firm who received a report with a peer review rating of <i>pass with scope limitation</i> on its most recent System Review or Engagement Review, does this meet the qualification requirements to be a peer reviewer?</p> <p><i>Interpretation</i>—There are three different grades which can be considered passing: <i>pass</i>, <i>pass with scope limitation</i>, and <i>pass with deficiencies</i>. Only the first two (<i>pass</i> and <i>pass with scope limitation</i>) are acceptable grades in order to qualify as a peer reviewer.</p>		<p>Removed, as is included in 200.A4</p>
<p>31b-4</p> <p><i>Question</i>—What further qualifications are necessary to perform a peer review of a firm whose review is required to be administered by the National PRC?</p> <p><i>Interpretation</i>—In order to be qualified to perform a peer review of a firm required to be administered by the National PRC, ordinarily a peer reviewer must currently be with a firm whose most recent review was administered by the National PRC. This is not a requirement for a peer reviewer on a review of</p>	<p>200.08 In order to be qualified as captain for a peer review of a review for a firm whose review is required to be administered by the National Peer Review Committee (PRC), a captain should currently be employed by or be an owner of a firm whose most recent review was administered by the National PRC. (Ref: par. .A12—.A13)</p> <p>200.A12 If a firm elects, but is not required, to have its peer review administered by the National PRC, the captain does not have to be employed by or be an owner of a firm whose most recent review was administered by the National PRC.</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>a firm that elects (but is not required) to have their peer review administered by the National PRC.</p>		
<p>31b-5</p> <p><i>Question</i>—Paragraph .31(b) of the standards states that, to be considered currently active in the accounting or auditing function, a reviewer should be presently involved in the accounting or auditing practice of a firm supervising one or more of a firm’s accounting or auditing engagements or carrying out a quality control function on a firm’s accounting or auditing engagements. How is a “quality control function” defined?</p> <p><i>Interpretation</i>—In the context of standards paragraph .31(b), a quality control function is defined as performing an Engagement Quality Control Review as part of the Engagement Performance element of a firm’s system of quality control or supervising or performing the inspection as part of the Monitoring element of a firm’s system of quality control. Definitions of these terms appear in SQCS No. 8.</p>	<p>100.11 Quality control function. Performing an engagement quality control review as part of the engagement performance element of a firm’s system of quality control or supervising or performing an inspection as part of the monitoring element of a firm’s system of quality control.</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>31b-6</p> <p><i>Question</i>—Paragraph .31(b) of the standards states that CPAs who wish to serve as reviewers should carefully consider whether their day-to-day involvement in accounting and auditing work is sufficiently comprehensive to enable them to perform a peer review with professional expertise. What factors should a reviewer consider when determining whether their day-to-day involvement is sufficiently comprehensive?</p> <p><i>Interpretation</i>—The reviewer should consider whether he or she is currently involved in supervising (or carrying out a quality control function on) the same levels of service of accounting or auditing engagements they will review. For example,</p> <ul style="list-style-type: none"> <i>a.</i> a reviewer of auditing engagements should be presently involved in supervising (or carrying out a quality control function on) a firm’s auditing engagements; <i>b.</i> a reviewer of examination engagements performed under Statements on Standards for Attestation Engagements (SSAE) should be presently involved in 	<p>200.A7 Current knowledge may be obtained from on-the-job training, training courses, or a combination of the two.</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>supervising (or carrying out a quality control function on) a firm's examination engagements; and</p> <p>c. a reviewer of compilation or preparation engagements with disclosures should be presently involved in supervising (or carrying out a quality control function on) engagements with disclosures.</p> <p>A reviewer that only currently supervises (or carrying out a quality control function on) compilation or preparation engagements should not review audit, attestation, or review engagements.</p> <p>If a peer reviewer does not meet the preceding qualifications, but believes they possess current knowledge of professional standards applicable to the kind of practice to be reviewed, the peer reviewer may contact the firm's administering entity to justify their qualification, see Interpretation 31d-1. Acceptable proof of qualification may include, but is not limited to, CPE certifications, training courses, and evidence of on-the-job training. Reviewer qualifications applicable to industries that have a significant public interest would ordinarily be excluded from this provision.</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>31b-7</p> <p><i>Question</i>—Paragraph .31(b) of the standards uses the term <i>presently involved</i> in defining currently active in accounting or auditing functions. What is meant by <i>presently involved</i>?</p> <p><i>Interpretation</i>—<i>Presently involved</i> means currently performing (working on) accounting or auditing engagements in your firm with the intent to undergo a peer review within 18 months from enrollment.</p>	<p>200.A21 Current experience is performing, supervising, or carrying out a quality control function on an engagement with a report date within the last 18 months.</p>	
<p>31b-8</p> <p><i>Question</i>—If I did not bring any clients over to my new firm, but actively pursuing clients, does this meet the qualification of “presently involved”?</p> <p><i>Interpretation</i>—No, it does not. You do not meet the qualifications to serve as a peer reviewer because you are not performing (working on) accounting or auditing engagements and will likely not undergo a peer review within 18 months of enrollment.</p>		<p>Removed as is covered in the definition of presently involved or the qualifications</p>

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>31b-9</p> <p><i>Question</i>—I have signed engagement letters, but have not performed any work yet. Does this meet the qualification of “presently involved”?</p> <p><i>Interpretation</i>—No, it does not. You do not meet the qualifications to serve as a peer reviewer.</p>		<p>Removed as is covered in the definition of presently involved or the qualifications</p>
<p>31b-10</p> <p><i>Question</i>—I was team captain qualified when I was with my old firm, but have only issued reports on reviews of financial statements in my new firm. Could I still perform a system review?</p> <p><i>Interpretation</i>—No. In accordance with Peer Review Standards paragraph 31(b), you would only be qualified to perform engagement reviews for firms that have the same type of engagements.</p>		<p>Removed, as is covered by mapping of 31b-6</p>
<p>31c-1</p> <p><i>Question</i>—Paragraph .31(c) of the standards indicates that a peer reviewer should be associated with a firm (or all firms if</p>		<p>Removed</p>

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>associated with more than one firm) that has received a report with a peer review rating of <i>pass</i> for its most recent System or Engagement Review that was accepted timely, ordinarily within the last three years and six months. What is meant by “accepted timely, ordinarily within three years and six months?”</p> <p><i>Interpretation</i>—Peer reviewers are expected to have their own firm’s peer review performed timely. They are also expected to cooperate with the program in all matters related to the peer review that could impact the firm’s enrollment in the program. The peer review working papers and report for reviewers’ firms should be submitted on or before the extended due date, ordinarily within six months of the peer review year end. If a valid extension is approved by the administering entity, the review working papers and report should be submitted by the approved extended due date. The review should be accepted by the administering entity ordinarily within 120 days of receipt of the working papers and report from the reviewer. Indications of his or her firm’s noncooperation with the program may disqualify the peer reviewer from being able to schedule and perform reviews until the firm’s peer review has been accepted.</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>31d-1</p> <p><i>Question</i>—Paragraph .31(d) of the standards states that an individual serving as a peer reviewer should possess current knowledge of professional standards applicable to the kind of practice to be reviewed, including quality control and peer review standards. This includes recent experience in and knowledge about current rules and regulations appropriate to the level of service applicable to the industries of the engagements the individual will be reviewing. How may such knowledge be obtained, and is there a minimum amount of CPE required to be a peer reviewer?</p> <p><i>Interpretation</i>—Such knowledge may be obtained from on-the-job training, training courses, or a combination of both.</p> <p>If the administering entity determines that the peer reviewer does not have such experience, the peer reviewer may be called upon to justify why he or she should be permitted to review engagements in that industry. The administering entity has the authority to decide whether a reviewer or review team’s experience is sufficient and whether they have the capability to perform a particular review</p>	<p>200.A7 Current knowledge may be obtained from on-the-job training, training courses, or a combination of the two.</p>	<p>Removed as is covered in .A7</p>

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>whether related to high-risk engagements or other factors.</p> <p>The fundamental purpose of CPE is to maintain or increase, or both, professional competence. AICPA members are required to participate in 120 hours of CPE every 3 years. In order to maintain current knowledge of accounting, auditing, and quality control standards, peer reviewers should obtain at least 40 percent of the AICPA required CPE in subjects relating to accounting, auditing, and quality control. Peer reviewers should obtain at least 8 hours in any 1 year and 48 hours every 3 years. The terms <i>accounting</i>, <i>auditing</i>, and <i>quality control</i> should be interpreted as CPE that would maintain current knowledge of accounting, auditing, and quality control standards for engagements that fall within the scope of peer review as described in paragraphs .06–.07 of the standards.</p> <p>Peer reviewers have the responsibility of documenting their compliance with the CPE requirement. They should maintain detailed records of CPE completed in the event they are requested to verify their compliance. The reporting period will be the same as that maintained for the AICPA.</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>31f-1</p> <p><i>Question</i>—Paragraph .31(f) of the standards states that an individual serving as a peer reviewer on a System or Engagement Review should have provided the administering entity with information that accurately reflects the qualifications of the reviewer, including recent industry experience, and is updated timely. How is this accomplished?</p> <p><i>Interpretation</i>—Ordinarily, an individual serving as a reviewer on a System or Engagement Review should have completed a peer reviewer resume in accordance with guidance issued by the board that is updated timely and accurately reflects the qualifications of the reviewer, including recent industry experience. This may also be accomplished by providing similar information to those performing an on-site oversight under the direction of a National PRC panel.</p>	<p>200.14 The reviewer’s resume should provide the following information for the administering entity to determine if the reviewer has current or recent experience by level of service, engagement type, and industry (Ref: par. .A21 and .A22):</p> <ul style="list-style-type: none"> a. Whether the reviewer was performing, supervising, or carrying out a quality control function b. The date of the last report for the engagement the reviewer was involved in c. The approximate number of engagements the reviewer was involved in d. Whether the reviewer currently meets relevant industry specific educational requirements, and e. Whether experience was obtained from the reviewer’s firm or another firm (Ref: par. .A23) <p>200.A22 Recent experience is having performed, supervised, or carried out a quality control function on an engagement in your firm within the last five years.</p> <p>200.A23 A reviewer with current experience in an industry through a firm other than the firm the reviewer is employed by or is an owner of may be qualified to review engagements in that industry. At a minimum, the services performed for another firm should include a review of the financial</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
	<p>statements and involvement in or review of the significant judgments and conclusions of the engagement team.</p> <p>200.15 The reviewer resume should communicate if the reviewer, the reviewer’s firm, or a firm the reviewer has obtained industry experience from has received communications relating to allegations or investigations or has been restricted.</p>	
<p>31g-1</p> <p><i>Question</i>—Paragraph .31(g) of the standards states that reviewers must possess specific additional qualifications to review engagements that must be selected in a System Review under paragraph .63. What additional qualifications must the reviewer possess?</p> <p><i>Interpretation</i>—The additional qualifications that reviewers must possess in order to review must-select engagements are as follows. However, these additional qualifications do not apply to must-cover engagements. The</p>	<p>210.06 In addition to the qualifications discussed in section 200, a reviewer of must-select engagements should meet the following criteria:</p> <ul style="list-style-type: none"> a. Have completed additional training focused on must-select engagements that meets the requirements of the board (Ref: par. .A2) b. Be presently involved in one of the following areas in the must-select engagements in the reviewer’s firm: 	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>peer reviewer should adhere to the general reviewer qualifications in those areas.</p> <p>a. The reviewer should have completed additional training focused on must-select engagements that meets the requirements of the board. Peer review training and criteria for demonstrating proficiency in the standards, interpretations and guidance of the program is established by the board. Those criteria are located on the Peer Review page of the AICPA website.</p> <p>b. The reviewer must be currently (presently involved in) supervising or performing engagements, in his or her own firm, in the must-select industry or area; performing Engagement Quality Control Reviews on engagements in the must-select industry or area in his or her own firm; or performing the inspection of engagements in the must-select industry or area as part of his or her firm’s monitoring process; and currently meeting relevant, industry specific educational requirements, as applicable.</p> <p>c. Where AICPA Audit Quality Centers exist (such as, but not limited to, the</p>	<p>i. Supervising or performing engagements</p> <p>ii. Performing engagement quality control reviews on engagements</p> <p>iii. Performing the inspection of must-select engagements as part of their firm’s monitoring process</p> <p>c. Be employed by or be an owner of a firm that is a member of the respective audit quality center, if applicable</p> <p>210.A2 The must select additional training courses designed to meet the requirement are described on the Peer Review page of the AICPA website.</p> <p>210.07 The additional training requirements in paragraphs .05 and .06 should be completed within one year prior to the commencement of the review of a must-select engagement.</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>Employee Benefit Plan and Governmental Audit Quality Centers), reviewers of must-select engagements must be associated with firms that are members of the respective Audit Quality Center.</p>		
<p>31g-2</p> <p><i>Question</i>—Are there any exceptions to the additional training requirements described in paragraph 31g-1?</p> <p><i>Interpretation</i>—Ordinarily, the must-select training courses developed and issued by the board are to be used to meet the requirements to review must-select engagements. However, reviewers may undergo training which includes the same elements as, and is as comprehensive as, the must-select training required by the board.</p>		<p>Reemoved as is included in 210.06</p>
<p>32-1</p> <p><i>Question</i>—Paragraph .32 of the standards states that a team captain, or the review captain in limited circumstances, is required to ensure that all team members possess the necessary capabilities and competencies to perform assigned responsibilities and that</p>	<p>200.23 A captain should ensure that all team members possess the necessary qualifications and</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>team members are adequately supervised. The team captain or review captain has the ultimate responsibility for the review, including the work performed by team members. What do those responsibilities include?</p> <p><i>Interpretation</i>—Team members should be brought on to a team when the team captain, or the review captain in limited circumstances, does not possess the adequate qualifications necessary in order to perform the review of engagements within certain industries or type of engagement in the reviewed firm’s practice. In addition, there may be reasons, for instance depending on the size of the firm and its practice, that team members may be brought onto a team to assist the team captain in performing the review in an efficient and effective manner. Whether the team member is brought onto the team to cover certain industries or types of engagement, or just to assist the team captain in performing the review, it is still the responsibility of the team captain or review captain to ensure the team member selected has the appropriate qualifications and to supervise and review the work of the team member. The team captain or review captain is essentially relying on the work of the team member and accepting it as his or her own. The team captain or review captain should</p>	<p>competencies to perform assigned responsibilities and that team members are adequately supervised.</p> <p>200.29 The captain should do the following:</p> <ul style="list-style-type: none"> a. Supervise, perform and report on the review in accordance with the standards. b. Accept responsibility for the work of team members, including specialists (Ref: par. .A37 and .A38) c. Communicate the review results to the reviewed firm and to the administering entity. d. Ensure that peer review documentation is complete and submitted to the administering entity on a timely basis. (Ref. par. .A36) 	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>ensure that all of the working papers (engagement questionnaires, MFCs, and so on) completed by the team member are reviewed by the team captain or another appropriately qualified team member, and follow up with the reviewed firm or team member as necessary. By signing off on the Summary Review Memorandum or Review Captain Summary, the team captain or review captain is approving the team member's working papers and accepting responsibility for the work of the team member.</p> <p>Team members may review their engagements prior to the team captain or review captain beginning their field work. Reviews of engagements that are performed by team members at locations other than the reviewed firm's office are acceptable, but the quality of work must be at the same level as it would be had the review been performed at the reviewed firm's office. In these situations, a review is considered to have commenced when the team member begins the review of engagements (if this is prior to the team captain or review captain beginning their fieldwork). All engagement checklists, MFC and FFC forms should be signed off by the team member prior to the exit conference. The team captain or review captain should</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>consider if the team member should participate in the exit conference.</p>		
<p>33-1</p> <p><i>Question</i>—Paragraph .33 of the standards states that a team captain in a System Review or a review captain in an Engagement Review should “have completed peer review training that meets the requirements established by the board.” Interpretation No. 132-1 states that each report acceptance body member should demonstrate proficiency in the standards, interpretations, and guidance of the program. Interpretation No. 132-1 also states that a technical reviewer charged with the responsibility for performing technical reviews should meet the requirements of the team captain or review captain training requirements established by the board. What peer review training meets the requirements established by the board and what are the criteria for demonstrating proficiency?</p> <p><i>Interpretation</i>—The peer review training and the criteria for demonstrating proficiency in the standards, interpretations, and guidance of the program is established from time to time by the board. Those criteria are located on the Peer Review page of the AICPA website.</p>		<p>REMOVED</p>

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>34-1</p> <p><i>Question</i>—Paragraph .34 of the standards discusses that a peer reviewer or reviewing firm may have received communications from regulatory, monitoring, or enforcement bodies relating to allegations or investigations of the peer reviewer or reviewing firm’s accounting and auditing practice. A peer reviewer or reviewing firm may also have received notifications of limitations or restrictions on the peer reviewer’s or reviewing firm’s ability to practice. How do these allegations or investigations, limitations or restrictions, or both, affect the reviewer’s or reviewing firm’s ability and qualifications to perform the peer review?</p> <p><i>Interpretation</i>—The peer reviewer and reviewing firm should notify the relevant administering entity of any communications relating to allegations or investigations from regulatory, monitoring, or enforcement bodies in the conduct of accounting, audit, or attestation engagements performed by the reviewer. For these purposes, an allegation or investigation is defined as a formal declaration, statement, or other similar assertion, the validity of which has not been established, indicating that there may be deficiencies in the reviewer or reviewing</p>	<p>200.09 Reviewers and reviewing firms should notify the relevant administering entity of communications from regulatory, monitoring, or enforcement bodies in the conduct of engagements in a firm’s accounting and auditing practice performed by the reviewer. Notification should happen prior to being scheduled to perform a peer review or immediately, if already scheduled to perform a peer review. (Ref: par. .A14 and .A15)</p> <p>100.11 Allegation or investigation. A formal declaration, statement, or other similar assertion, the validity of which has not been established, indicating that there may be deficiencies in the reviewer or reviewing firm’s compliance with a regulatory, monitoring, or enforcement body’s (regulatory body’s) rules (procedures, laws, professional standards, or practices). (Ref: par. .A15)</p> <p>200.10 Reviewers and reviewing firms should notify AICPA staff and all relevant administering entities of any limitations or restrictions on the reviewer’s or reviewing firm’s ability to practice or perform peer reviews. Notification should happen prior to being scheduled to perform a peer review or immediately, if already scheduled to perform a peer review. (Ref: par. .A16–.A18)</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>firm's compliance with a regulatory, monitoring, or enforcement body's (regulatory body) rules (procedures, laws, professional standards, or practices).</p> <p>The peer reviewer and reviewing firm should notify the AICPA technical staff, then their relevant administering entity, of any limitations or restrictions on the peer reviewer's or reviewing firm's ability to practice. For these purposes, a limitation or restriction is a corrective or disciplinary action or sanction imposed on a reviewer or reviewing firm by a regulatory body). Examples include constraint of scope or volume of accounting and auditing engagements, required periodic reporting to the regulatory body, pre-issuance reviews of engagements, or additional peer review or professional education requirements.</p> <p>The notifications should occur prior to the peer reviewer or reviewing firm's being engaged to perform a peer review, or immediately (if after engaged). The objective of the reviewer or reviewing firm informing the relevant administering entity or AICPA technical staff (as applicable) of such allegations or investigations, limitations or restrictions, or both, is to enhance the program's oversight process, which includes ensuring that peer reviewers and reviewing</p>	<p>200.A16 Limitations or restrictions may include, but are not limited to, the following:</p> <ul style="list-style-type: none"> a. Constraint of scope or volume of accounting and auditing engagements b. Required periodic reporting to the regulatory body c. Pre-issuance reviews of engagement d. Additional peer review or professional education requirements <p>200.A14 The receipt of communications relating to allegations or investigations does not automatically mean that a reviewer is ineligible to perform reviews. However, there may be situations in which the nature, significance, or pervasiveness of the alleged deficiencies or an existing preponderance of evidence would necessitate more immediate action in order to address the public interest. The administering entity's peer review committee will consider whether any action or oversight is appropriate. This decision may be appealed by the reviewer to the administering entity's peer review committee.</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>firms are appropriately qualified to perform reviews.</p> <p>The fact that a reviewer or reviewing firm has received communication(s) relating to allegations or investigations does not automatically mean that he, she, or it is ineligible to perform peer reviews. However, there could be situations where the nature, significance, or pervasiveness of the alleged deficiencies, or an already existing preponderance of evidence, would necessitate immediate action in order to address the public interest. The administering entity's peer review committee will consider and investigate, as deemed necessary, the specific circumstances, including whether any action, including performing oversight on the reviewer or reviewing firm, is appropriate. This decision can only initially be appealed to the administering entity's peer review committee. For actions previously appealed to the committee, if the reviewer or reviewing firm disagrees with the action(s), he or she may appeal the decision by writing the board, explaining why he or she believes that the action(s) are unwarranted. The board will review and consider the request and respond to it as necessary and appropriate.</p> <p>However, an individual may not serve as a peer reviewer if his or her ability to practice</p>	<p>200.11 A reviewer does not meet the required qualifications described in paragraph .05 if the reviewer's ability to practice public accounting or perform peer reviews has been restricted by a regulatory, monitoring, or enforcement body, beginning on the date that the reviewer is notified of the restriction and ending on the date that the restriction has been removed.</p> <p>200.A17 If the restriction has been placed on the reviewer's firm or one or more of its offices, then the OTF will consider and investigate the specific circumstances, including how the restriction relates to the firm's accounting and auditing practice and personnel, to determine whether any of the individuals associated with the firm may serve as reviewers</p> <p>200.A18 The reviewer, reviewing firm, the administering entity, or AICPA staff may receive notification or knowledge of a limitation or restriction on a reviewer or reviewing firm when a review is in different stages (scheduling, commencement, fieldwork, acceptance or completion, within the working paper retention period or not). In these circumstances, the board will consider various factors in determining</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>public accounting has been limited or restricted in any way (including any specific industry restrictions) by the regulatory body beginning on the date he or she is notified by the regulatory body of the limitation or restriction, until it has been removed. If the limitation or restriction has been placed on the reviewer's firm, or one or more of its offices, then the board will consider and investigate the specific circumstances, including how the limitation or restriction relates to the firm's accounting and auditing practice and personnel, to determine whether any of the individuals associated with the firm may serve as reviewers.</p> <p>The reviewer, reviewing firm, the relevant administering entity, or the AICPA technical staff may receive notification or knowledge of a limitation or restriction on a reviewer or reviewing firm when a review is in different stages (scheduling, commencement, fieldwork, acceptance or completion, within working paper retention period or not). In these circumstances, the board will consider various factors in determining if the review should be rescheduled, oversights or other additional procedures performed, or a new review performed.</p>	<p>whether the review should be rescheduled or oversights, other additional procedures should be performed, or a new review should be performed.</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>34-2</p> <p><i>Question</i>—What if a reviewer or reviewing firm fails to notify the relevant administering entity or AICPA technical staff, as applicable, of any such allegations or investigations, limitations or restrictions, or both, relating to the conduct of his, her or its performance of accounting, audit, or attestation engagements within the specified time requirements?</p> <p><i>Interpretation</i>—If a reviewer or reviewing firm fails to notify the relevant administering entity or AICPA technical staff, as applicable, of such allegations or investigations, limitations or restrictions, or both, within the specified time requirements of “prior to being engaged to perform a peer review, or immediately, (if after engaged)” the reviewer or reviewing firm is not cooperating with the program. The board will consider and investigate, as deemed necessary, what actions should be taken in the specific circumstances. These actions may include, but are not limited to, on-site oversight at the reviewer’s expense, permanent removal from the list of qualified peer reviewers and referral of any AICPA members to the AICPA’s Professional Ethics Division for violating the</p>	<p>200.A15 If a reviewer fails to notify the relevant parties of communications of allegations or investigations, limitations or restrictions, or both, within the specified timing the board may consider whether actions are warranted given the specific circumstances. Such actions may include, but are not limited to, the following:</p> <ul style="list-style-type: none"> a. Oversight at the reviewer’s expense b. Permanent removal from the list of qualified reviewers c. Referral of any AICPA members to the AICPA’s Professional Ethics Division for violating the AICPA Code of Professional Conduct 	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
AICPA Code of Professional Conduct, if applicable.		
<p>34-3</p> <p><i>Question</i>—What are some types of communications of allegations or investigations, or notifications of limitations or restrictions, that are appropriately related to meeting the objectives described in this interpretation?</p> <p><i>Interpretation</i>—There are many types of communications and notifications that are appropriately related to meeting the objectives described in this interpretation. See Interpretation No. 181-1b-1 for a list, which is not intended to be all-inclusive, that represents examples of the types of organizations where communications of allegations or investigations or notifications of limitations or restrictions would be relevant to meeting the objectives of the requirement.</p>		Removed
Qualifying for Service as a Specialist		
35-1		Removed – as is covered by 200.29-.30.

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p><i>Question</i>—Paragraph .35 of the standards states that if required by the nature of the reviewed firm’s practice, individuals with expertise in specialized areas may assist the review team in a consulting capacity. At what point is a specialist going beyond a consulting capacity on the peer review?</p> <p><i>Interpretation</i>—The specialist is going beyond a consulting capacity when he or she prepares any other peer review documentation beyond preparing and completing the engagement checklist and Matter for Further Consideration (MFC) forms. When MFC forms are prepared for the engagement the specialist is reviewing, the specialist should plan on being available during the exit conference.</p>		
<p>35-2</p> <p><i>Question</i>—If a review team uses a specialist to prepare and complete the engagement checklist and MFC forms for a must select engagement as described in Interpretation No. 63-1, is another team member required to have experience with the must select industry?</p> <p><i>Interpretation</i>—Yes. An approved team member with the appropriate experience is required to review all must select</p>	<p>200.A32 Various factors, including the industries of the engagements of the firm, its size, whether or not the review is administered by the National PRC, and other factors related to the knowledge and experience of the members of the review team will be considered to determine if the team has the appropriate qualifications and capability to perform the review.</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>engagements except service organization control (SOC 1 and SOC 2) engagements. A specialist meeting criteria established by the AICPA may be approved to assist the team in reviewing SOC 1 or SOC 2 experience. A list of preapproved specialists will be maintained by the AICPA.</p> <p>When a specialist is used, the team captain, as always, is responsible for supervising and conducting the review, communicating the review team's findings to the reviewed firm and administering entity, preparing the report on the review, and ensuring that peer review documentation is complete and submitted to the administering entity on a timely basis. The team captain should supervise and review the work performed by the specialist. The team captain will furnish instructions to the specialist regarding the manner in which materials and other notes relating to the review are to be accumulated to facilitate summarization of the review team's findings and conclusions. The specialist may be required to be available or participate in the exit conference.</p>	<p>200.A37 The captain will furnish instructions to the specialist regarding the manner in which materials and other notes relating to the review are to be accumulated to facilitate summarization of the reviewer's findings and conclusions. The specialist may be required to be available or participate in the exit conference.</p> <p>200.A38 A specialist meeting criteria established by the AICPA, located on the AICPA webpage, may be approved as part of the review team, therefore assuming the responsibilities of a review team member.</p> <p>210.A53 If the engagement was reviewed by a specialist, it may be beneficial for the specialist to be available for or participate in the exit conference.</p>	
<p>Other Planning Considerations</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>39-1</p> <p><i>Question</i>—Paragraph .39 of the standards notes that the team captain should evaluate the actions of the firm in response to the prior review report and FFC forms. What considerations should be made if the firm did not perform the actions noted in the prior review letter of response and FFC forms?</p> <p><i>Interpretation</i>—The team captain should consider whether the firm performed sufficient alternative actions after further assessment of the systemic cause. If sufficient alternative actions were performed, the alternative procedures and the reviewer’s assessment of those procedures should be noted in the Summary Review Memorandum. However, if sufficient alternative actions were not performed, the team captain should gain an understanding from the firm about why the actions were not performed and consider whether there are deficiencies in other elements of quality control, such as leadership responsibilities for quality within the firm (the tone at the top). This evaluation should be documented in the Summary Review Memorandum.</p>		<p>Recommend removal b/c inherently covered in mapping of interpretation 52-1</p>

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>40-1</p> <p><i>Question</i>—Paragraph .40 of the standards notes that the peer reviewer should consider whether the areas to be addressed in the written representation require additional emphasis in the course of the review. To what extent should the team captain consider the results of regulatory or governmental oversights in the planning and performance of the peer review?</p> <p><i>Interpretation</i>—If the firm has undergone oversights or inspections by regulatory or governmental entities (for instance, the Department of Labor, the Department of Health and Human Services, or other local, state, or federal entities), the team captain should consider the results of those oversight reviews during planning and when determining the nature and extent of peer review procedures. The results from regulatory or governmental oversights are sources of information that should be considered within the context of peer review, as they can provide valuable information that may assist the review team in planning its procedures. However, the team captain should keep in mind that the goals of regulatory or governmental oversight may differ from the purpose of a system review, and it would be</p>		<p>See 210.A66 Appendix A</p>

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>inappropriate to place reliance on regulatory or governmental oversight results. The team captain should consider and document the following factors regarding the procedures and results of regulatory or governmental oversights and communications from regulatory or governmental bodies:</p> <ul style="list-style-type: none"> • <i>The impact of regulatory or governmental oversight on the scope of the peer review.</i> When the types of engagements subject to regulatory or governmental oversight are also within the scope of engagements that can be selected for peer review, the review team should consider how the nature, systemic cause, pattern, or pervasiveness of the oversight results impact the peer review in terms of inherent risk (for example, the firm’s demonstrated expertise in performing those types of engagements) and control risk (for example, how the system of quality control is designed to prevent issues in those types of engagements and the effectiveness of those controls based on the regulatory or governmental results), and document those considerations in the risk assessment. 		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>If the oversight results indicate a lack of comments or only minor issues, the team captain should document the nature of the oversight results as a consideration in the risk assessment. Although a lack of comments is not necessarily indicative that the firm’s system of quality control is operating effectively for the relevant industry practice, it is a factor in assessing inherent and control risk. When the oversight results include more substantive comments, the review team should evaluate the significance of the comments relative to the applicable industry and other industries and practice areas, and consider what impact, if any, they have on the peer review scope.</p> <p>If the oversight results include deficiencies or indications of engagements that were not performed or reported on in conformity with applicable professional standards in all material respects in the view of the oversight body, the team captain should understand the systemic cause(s) identified by the firm and evaluate how the firm responded to the oversight results in order to properly consider the impact on the peer review</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>risk assessment and engagement selection. If similar matters are identified as a result of the review team's review of engagements during the peer review, the team captain should consider whether the systemic causes identified by the firm (if any) are similar to the systemic causes identified by the review team.</p> <ul style="list-style-type: none"> <li data-bbox="348 630 884 1247">• <i>The timing of the regulatory or governmental oversight results.</i> The team captain should consider the time period covered by the regulatory oversight results in determining their usefulness for assessing peer review risk and determining the impact (if any) on the extent of peer review procedures. When possible, the team captain should obtain the oversight results from the most recently available oversight reviews. The team captain should inquire about any open or ongoing oversight reviews, the status of those oversight reviews, and the firm's preliminary remediation plans (if applicable). <li data-bbox="348 1287 884 1419">• <i>The firm's responsiveness to regulatory or governmental oversight results.</i> The team captain should consider the degree of the firm's 		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>responsiveness to oversight findings and other communications, as evidenced by the remediation planned or taken. Remediation efforts by the firm may impact industries that are subject to peer review and can be useful in assisting the team captain with considering the design of the firm’s system of quality control or compliance with it. The team captain should document this consideration in the risk assessment during the planning of the review.</p> <ul style="list-style-type: none"> • <i>The size of the firm relative to its specialized industry practice(s).</i> The team captain should consider the relative significance of the specialized industry practice(s) subject to regulatory oversight to the firm’s total practice in determining the relevance of the regulatory oversight results to the peer review. The team captain should document this consideration in the Summary Review Memorandum (when applicable). 		
<p>40-2</p> <p><i>Question</i>—What additional considerations related to the results of PCAOB inspections</p>		See 210.A67 Appendix A

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>should the team captain address in the planning and performance of the peer review?</p> <p><i>Interpretation</i>—Although the PCAOB inspection reports only cover the portion of a firm’s practice that is subject to permanent inspection, most firms typically have only one system of quality control. As a result, the PCAOB inspection report may contain information that could assist the reviewer in assessing risk, planning, and performing peer review procedures. The team captain should read the public portions of the most recently released PCAOB inspection reports and discuss both the public and nonpublic portions of the reports with appropriate firm personnel. If the report on the firm’s most recent PCAOB inspection report has not been released, the team captain should discuss any findings that may have been communicated orally or in draft form with appropriate firm personnel. The firm is required to discuss relevant PCAOB matters with the team captain.</p> <p>In considering the impact of the PCAOB report on the nature, planning, and extent of peer review procedures, the review team should consider the nature, systemic cause, pattern, or pervasiveness of the findings contained in the PCAOB inspection report. The review team should also consider the relative importance of the finding(s) to the</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>firm as a whole. When applicable, the review team should</p> <ul style="list-style-type: none"> • consider the information contained in public portions of the PCAOB inspection reports. • consider the information in the nonpublic portions of the PCAOB inspection reports (based upon discussion with the firm). • perform further inquiry of the firm in determining the offices, partners, and so on related to findings detailed in the PCAOB report. • determine which PCAOB findings (if any) may be applicable to the portion of the firm's practice that was not subject to PCAOB inspection. • understand the systemic cause(s) of the findings (as determined by the firm). • understand how the firm remediated the findings for the most current inspection (or the firm's remediation plan). 		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<ul style="list-style-type: none"> • consider the firm’s remediation history with respect to PCAOB inspection findings (if any). <p>The team captain should document in the risk assessment how this information impacts the planned peer review procedures. Discussion of PCAOB inspection findings should not be interpreted as permitting the peer reviewer to request the nonpublic portions of the PCAOB inspection report.</p>		
<p>Understanding the Firm’s System of Quality Control</p>		
<p>42-1</p> <p><i>Question</i>—Paragraph .42 of the standards requires the review team to obtain a sufficient understanding of the reviewed firm’s system of quality control. How should the review team address elements of the system that reside outside of the firm?</p> <p><i>Interpretation</i>—The review team should inquire of the firm regarding elements of the system of quality control residing outside of the firm, for instance, membership in associations, joint ventures, non-CPA owned entities, alternative practice structures,</p>	<p>210.A5 & 310.A8 Examples of elements that could reside outside of the firm include, but are not limited to, membership in associations, joint ventures, non-CPA owned entities, alternative practice structures, arrangements with outside consultants, third party quality control materials, or CPE.</p>	<ul style="list-style-type: none"> • Removed the last two sentences because they are covered by other requirements • See explanatory memo of the exposure draft for further explanation of “Removal of Guidance on Performing and Reporting on Reviews of Quality Control Materials”

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>arrangements with outside consultants, third party QCM, or CPE (including whether they are peer reviewed) and other. The inquiries should include how they influence the firm’s system of quality control, for instance by providing consultation opportunities, CPE, and monitoring services. These elements should be considered and documented within the risk assessment.</p>		
<p>42-2</p> <p><i>Question</i>—How should the review team evaluate the firm’s quality control policies and procedures for the adequacy of the QCM used by the reviewed firm?</p> <p><i>Interpretation</i>—To plan the review, the review team should obtain a sufficient understanding of the reviewed firm’s system of quality control, including how the firm uses QCM to promote consistency in the quality of engagement performance.</p> <p><i>Firm’s Policies and Procedures</i></p> <p>As a part of obtaining the understanding of the system of quality control, the review team should understand the firm’s policies and procedures for adopting, developing, updating, modifying, and maintaining QCM</p>		<p>Removed - See explanatory memo of the exposure draft for further explanation of “Removal of Guidance on Performing and Reporting on Reviews of Quality Control Materials”.</p>

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>that are purchased from a third party or developed internally and determine if those policies and procedures are appropriately designed and implemented.</p> <p><i>Reliability</i></p> <p>The review team should understand the firm’s policies and procedures for determining the reliability of the QCM utilized by the reviewed firm and determine if those policies and procedures are appropriately designed and implemented. The review team should also determine that the firm’s QCM are reliable. If the QCM, whether developed by a third party or internally developed, underwent a separate QCM review, then the results of that review should be considered as per Interpretation No. 42-3. Provider’s QCM review results may be obtained from the AICPA’s website, the provider, or the reviewed firm (which could also be the provider).</p> <p>If the QCM did not undergo a separate QCM review, then the team captain should consult paragraphs .167–.176 for the procedures typically performed in assessing QCM for a QCM review performed for a provider. This step applies whether the QCM were obtained from a third party or were internally developed.</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>The objectives of those procedures are to determine whether the provider’s system for the development and maintenance of the QCM was suitably designed and was being complied with during the year under review to provide firms with reasonable assurance that the materials are reliable aids to assist firms in conforming with all those components which are integral to the professional standards the materials purport to encompass. The procedures from paragraphs .167–.176 need to be adapted to the review team’s use during a peer review of a reviewed firm. The team captain should use professional judgment in determining the extent of the procedures that need to be performed to evaluate the reliability of the QCM. Further, if the QCM were obtained from third parties, the team captain may be limited in his or her ability to assess the provider’s system for the development and maintenance of the QCM and its compliance with that system. Therefore, there is a greater focus on whether the QCM is reliable.</p> <p><i>Suitability</i></p> <p>The review team should understand the firm’s policies and procedures for determining the suitability of the QCM utilized by the reviewed firm, and determine if they are appropriately designed, implemented, and</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>suitable for the firm. Examples of factors to be considered include whether the QCM</p> <ul style="list-style-type: none"> • cover the practice areas and industries of the firm. • are used for the intended type of client and users. • are used by the firm as intended by the QCM's instructions and guidance (see Interpretation No. 176-1 for further guidance). • contain an appropriate level of explanatory guidance for the users. • are updated with current professional standards. <p>Any weaknesses noted in the system of quality control as a result of the preceding procedures should be considered when the team captain assesses other aspects of the firm's system of quality control. This includes the firm's compliance with quality control standards established by the AICPA and how the firm's policies and procedures identify and mitigate the risk of material noncompliance with applicable professional standards. The weaknesses should also be considered when the team captain prepares his risk assessment,</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>determines scope, performs his functional testing, concludes on the peer review, and considers the systemic causes for matters, findings, deficiencies and significant deficiencies.</p>		
<p>42-3</p> <p><i>Question</i>—Many firms rely on third party QCM as integral portions of the firm’s system of quality control. Some third party providers elect to undergo QCM reviews. How should the review team evaluate the results of a QCM review in its consideration of the design of a reviewed firm’s system of quality control?</p> <p><i>Interpretation</i>—An independent QCM review entails an assessment of the provider’s system of quality control to develop and maintain the QCM, and an assessment of the resultant materials.</p> <p>The QCM review report includes opinions on the</p> <ul style="list-style-type: none"> • provider’s system to develop and maintain reliable aids (see paragraph .175). 		<ul style="list-style-type: none"> • Removed - See explanatory memo of the exposure draft for further explanation of “Removal of Guidance on Performing and Reporting on Reviews of Quality Control Materials”

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<ul style="list-style-type: none"> • reliability of the specific QCM covered by the review. <p>The review team’s evaluation of the design of the reviewed firm’s system of quality as it relates to the QCM materials should assess the</p> <ul style="list-style-type: none"> • reliability of the QCM and • the firm’s policies and procedures for adopting, updating, and modifying the provider’s QCM. <p>The review team should obtain the QCM review results (that is, the report or letter of response, if applicable) to consider the impact on the reviewed firm’s system of quality control. The provider’s QCM review results may be obtained from the AICPA’s website, the provider, or the reviewed firm.</p> <p>The review team should carefully compare the specific QCM utilized by the firm with those materials and elements opined on within the QCM report. The provider determines which QCM are included within the scope and may not include all material published by the provider in the scope of a QCM review. The specific QCM opined on in the QCM review report will be listed in the first paragraph of</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>the QCM review report or in an addendum to the report.</p> <p>Other scoping factors to consider include the following:</p> <ul style="list-style-type: none"> • The QCM review report is applicable to the substance and content of the specified QCM regardless of the different formats or media through which it could be available or marketed (for example, print or electronic), unless specified in the QCM review report. • QCM will often have different elements, such as written guidance, practice aids, letter templates, sample completed aids or templates, and continuing professional education modules. The QCM report will identify specific exclusions or inclusions if only a particular element or portion of a guide (for example, practice aids) is opined on in the QCM review report. <p>The review team should also consider the QCM review's report rating as it relates to the QCM used by the firm.</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>If the provider received a <i>pass</i> report, then the review team can place reliance on the provider's QCM review results with respect to that portion of the reviewed firm's design of its system. This should be reflected in the review team's discussion of control risk in the overall peer review risk assessment. Ordinarily, a <i>pass</i> QCM report on materials that are integral to the firm will help lower control risk.</p> <p>If the provider received a <i>pass with deficiencies</i> report, the review team should first determine whether the deficiency(ies) impacted the reliability of one or more of the QCM listed in the report. Next, the review team should consider the reasons for the deficiencies identified in the report and assess their relevance to the reviewed firm. Once this assessment is made, the review team can determine the degree of reliance it can place on the provider's results.</p> <p>If a deficiency is impacting the reliability of one or more QCM used by the reviewed firm, the review team should determine whether the reviewed firm has mitigated the risk that its reliance on the QCM may lead to the firm not addressing one or more integral components of professional standards in its performance of audit or attest engagements.</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>If a deficiency is on the provider's system of quality control but does not directly affect the separate opinion on the QCM, or is specific to QCM that are not used by the reviewed firm (for example, a deficiency related to an employee benefit plan manual, but the firm only uses a construction manual from that provider), then once this assessment is made, the review team can determine the degree of reliance it can place on the provider's results.</p> <p>The impact (or lack thereof) of a <i>pass with deficiencies</i> QCM report should be fully explained in the discussion of control risk in the overall peer review risk assessment.</p> <p>If the provider received a <i>fail</i> report, no reliance can be placed on the results and the review team should evaluate and document the impact on the reviewed firm's system of quality control in the peer review risk assessment. The review team will also need to consider the impact on the peer review scope if the firm fully relied on QCM that are not reliable aids.</p> <p>If applicable, the review team should review the definitions of deficiencies and significant deficiencies in QCM reviews provided in paragraph .178 to further understand the impact to the reviewed firm .</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>If the provider obtained a QCM review, but the specific QCM used by the reviewed firm were not opined on in the QCM report, the review team will need to perform the appropriate procedures to evaluate whether the QCM were suitably designed. See Interpretation No. 42-2 for additional information.</p> <p>The review team should always obtain the most recently accepted QCM report, and consider (a) the version date of the materials relative to the period covered by the report and (b) the amount of time that has passed since the period covered by the report in determining the degree of reliance that can be placed on the QCM review results.</p> <p>Factors to consider include the following:</p> <ul style="list-style-type: none"> • The issuance of new standards • Changes in regulatory requirements • Changes in economic conditions that affect the provider • Limitations or restrictions on authors of the materials 		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<ul style="list-style-type: none"> • Any substantial changes or updates to the materials <p>Regardless of the degree of reliance placed on the provider's QCM review results, the review team is still responsible for determining which forms, checklists, or programs are used by the reviewed firm as a part of its system of quality control, how often the materials are updated, the degree of reliance that the reviewed firm placed on the materials, and assessing compliance with their use. The results of the provider's QCM review should weigh in the assessment of control risk and be documented in the risk assessment.</p> <p>For additional information on QCM reviews, please see paragraphs .154–.204 and appendix A, "Summary of the Nature, Objectives, Scope, Limitations of, and Procedures Performed in System and Engagement Reviews and Quality Control Materials Reviews (as Referred to in a Peer Review Report)," of the standards.</p>		
<p>Considering the Firm's Monitoring Procedures</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>45-1</p> <p><i>Question</i>—Paragraph .45 of the standards notes that the review team should obtain a sufficient understanding of the reviewed firm’s monitoring policies and procedures since its last peer review, and their potential effectiveness, to plan the current peer review. In doing so, the review team may determine that the current year’s internal monitoring procedures could enable the review team to reduce, in a cost-beneficial manner, the number of offices and engagements selected for review or the extent of the functional area review. What are some factors to consider in obtaining an understanding of the firm’s monitoring procedures? If the review team plans to consider the current year’s internal inspection procedures to reduce the scope of the peer review, what procedures are necessary?</p> <p><i>Interpretation</i>—Factors to consider in obtaining the understanding of the firm’s monitoring procedures include</p> <ul style="list-style-type: none"> a. the qualifications of personnel performing the monitoring procedures. b. the scope of the monitoring procedures (coverage of functional areas and 	<p>See 210.A68 Appendix B</p> <p>210.23 If a reviewer significantly reduces the scope of procedures to be performed due to reliance on the firm’s monitoring procedures, the reviewer should inform the administering entity and AICPA staff during review planning and document the reviewer’s procedures in the Summary Review Memorandum. (Ref: par. .A17–.A18)</p> <p>210.A18 Staff may recommend that a panel from the board or its task forces review a firm’s internal inspection or peer review planning in advance. In addition, a firm, or peer reviewer may request that the administering entity review the internal inspection or peer review planning in advance.</p>	<p>See appendix B in PR-C section 210 for this information.</p> <p>See Explanatory Memorandum for further explanation: “Change to the Requirements for Onsite Office Visits in System Reviews”</p>

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>engagements and the criteria for selecting offices and engagements for review).</p> <ul style="list-style-type: none"> c. the appropriateness of the materials used for monitoring procedures (for example, questionnaires or checklists and instructions). d. the depth of the review of individual engagements, particularly with respect to the review of working papers and coverage of significant areas. e. the findings of the monitoring procedures, including internal inspections. f. the nature and extent of reporting and communicating the results of the monitoring procedures. g. the follow-up of findings resulting from the monitoring procedures. <p>In making a judgment about the effects that the firm's current year's internal inspection procedures will have on the selection of offices and engagements to be reviewed, the review team should consider the size of the</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>firm and the potential effectiveness of the internal inspection procedures.</p> <p>If internal inspection procedures were not, or will not be, performed to cover the review year, the review team may not consider the prior year's internal inspection procedures to reduce the scope of the peer review.</p> <p>If the review team does not plan to consider the reviewed firm's current year's internal inspection procedures to reduce the scope of the peer review, the review team need not necessarily perform the review of any of the engagements on which internal inspection procedures were performed by the reviewed firm. However, the review team may still wish to re-perform the review of a few such engagements to assist the review team in obtaining a better understanding of the effectiveness of the internal inspection procedures performed by the reviewed firm.</p> <p>If the review team plans to consider the current year's internal inspection procedures to reduce the scope of the peer review, the review team should test the firm's internal inspection procedures at selected offices and on selected engagements. These tests should be sufficient to provide the review team with a basis for determining whether (a) the reviewed firm's internal inspection procedures</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>were applied properly in the reviews of individual practice offices and engagements, (b) the practice office and Engagement Reviews were carried out conscientiously by competent persons with appropriate expertise and objectivity, and (c) the findings from the reviewed firm’s internal inspection procedures are indicative of the work performed in the particular office and therefore can be considered by the review team to reach an overall conclusion regarding the reviewed firm’s compliance with its quality control policies and procedures. The testing of internal inspection procedures can be performed (a) contemporaneously with the reviewed firm’s internal inspection procedures (commonly called <i>piggyback reviews</i>) or (b) after the internal inspection procedures are completed. Because of the insight gained from observing the performance of internal inspection procedures, a review team testing the effectiveness of internal inspection procedures contemporaneously is generally in a better position to assess the effectiveness of the procedures.</p> <p>When the review team tests the effectiveness of the internal inspection procedures contemporaneously with the performance by the internal inspection team performing the procedures, the review team should visit selected practice offices during the</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>performance of the internal inspection procedures to (a) re-perform the review of a sample of engagements subjected to internal inspection procedures and (b) re-perform the review of a sample of the quality control policies and procedures (functional elements) subjected to internal inspection procedures in the office. During the visits, the review team should compare its findings to the internal inspection team’s findings and resolve any differences. In addition, if applicable, the review team should attend discussions of engagement findings and the overall office findings.</p> <p>When the review team tests the effectiveness of the internal inspection procedures after the procedures have been completed, the review team should re-perform the review of a sample of engagements and the quality control policies and procedures (functional elements) subjected to internal inspection procedures in the office(s). The review team should compare its findings to the internal inspection team’s findings and resolve any differences.</p>		
<p>45-2</p> <p><i>Question</i>—Is there more guidance regarding the extent that scope may be reduced, and what factors must be considered and steps</p>		<p>See appendix B in PR-C section 210 for this information.</p>

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>performed in order to conclude on the effectiveness? In addition, may a review team apply this same guidance to the involvement of and results from regulatory oversight?</p> <p><i>Interpretation</i>—Peer reviewers should refer to guidance on reducing scope included in section 3100, <i>Supplemental Guidance</i>. If, after considering that guidance, the peer reviewer plans on significantly reducing the scope of the procedures he or she will be performing, he or she is required to inform AICPA technical staff during peer review planning.</p>		
<p>Understanding, Assessing, and Documenting Peer Review Risk Factors and Risk Assessment</p>		
<p>52-1</p> <p><i>Question</i>—Paragraphs .46–.52 discuss peer review risk factors and risk assessment. What other guidance should be considered?</p> <p><i>Interpretation</i>—Reviewers must assess peer review risk and use a risk-based approach in the selection of engagements and offices for review. Reviewers should formalize the risk assessment before arriving on-site in the reviewed firm’s office and before selecting</p>	<p>210.09 The reviewer should perform planning procedures before selecting engagements for review.</p> <p>210.16 To assess inherent risk, the reviewer should consider the following:</p>	<p>Deleted section after control risk is covered in mapping of extant par. .49-.50.</p> <p>See Explanatory Memorandum for further explanation: “Change to the Requirements for Onsite Office Visits in System Reviews”</p>

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>one or more engagements for review, otherwise they should expect ineffectiveness and, at the very least, inefficiency.</p> <p><i>Inherent Risk Factors</i></p> <p>In assessing inherent risk factors, the reviewer should consider</p> <ul style="list-style-type: none"> a. circumstances arising within the firm (for example, the firm or individual partners have engagements in several specialized industries); b. circumstances outside the firm that impact the firm’s clients (for example, new professional standards or those being applied initially for one or more clients, changes in regulatory requirements, adverse economic developments in an industry in which one or more of the firm’s clients operate, or significant developments in the client’s organization); and c. variances that may occur from year to year, engagement to engagement or, perhaps, from partner to partner, within the firm 	<ul style="list-style-type: none"> a. Circumstances arising within the firm (Ref: par. .A6) b. Circumstances outside the firm that affect the firm’s accounting and auditing clients (Ref: par. .A7) <p>210.A6 Circumstances within the firm may include the following:</p> <ul style="list-style-type: none"> a. The relationship of the firm’s audit hours to total accounting and auditing hours b. The size of the firm’s major engagements relative to the firm’s practice as a whole c. Initial engagements and their impact on the firm’s practice d. The industries in which the firm’s clients operate, especially the firm’s industry concentrations e. The results of the prior peer review f. The actions of the firm in response to the prior report and FFC g. The results of any regulatory or governmental oversight or inspection procedures (Ref: par. .A8) 	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>(for example, inherent risk will always be higher for an audit of a company or organization operating in a high-risk industry than for a compilation of financial statements without disclosure for a company operating in a noncomplex industry; and there are many situations between these two extremes).</p> <p><i>Control Risk Factors</i></p> <p>Assessing control risk requires reviewers to evaluate the effectiveness of the reviewed firm’s quality control policies and procedures in preventing the performance of engagements that do not comply with professional standards. When assessing control risk, the review team should evaluate the reviewed firm’s quality control policies and procedures and discuss with the firm if it considered the guidance in AICPA Accounting and Auditing Practice Aid <i>Establishing and Maintaining A System of Quality Control for a CPA Firm’s Accounting and Auditing Practice</i>. The reviewer should evaluate whether the reviewed firm has adopted appropriately comprehensive and suitably designed policies and procedures for each of the elements of quality control in the context of the firm’s overall control environment and the inherent</p>	<ul style="list-style-type: none"> <i>h.</i> The risk level of the engagements performed (Ref: par. .A9) <i>i.</i> The extent of non-audit services <i>j.</i> Significant changes in the firm’s practice <p>210.A7 Circumstances outside the firm may include the following:</p> <ul style="list-style-type: none"> <i>a.</i> New professional standards or those being applied initially for one or more clients <i>b.</i> Changes in regulatory requirements <i>c.</i> Adverse economic developments in an industry in which one or more of the firm’s clients operate <i>d.</i> Significant developments in the client’s organization <p>210.A8 Regulatory or governmental oversight agencies may include, but are not limited to, the Department of Labor or the Department of Health and Human Services. Refer to the guidance in appendix A, “Consideration of the Results of Regulatory Oversight or Inspections in the Planning and Performance of a Peer Review.”</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>risk embodied in its accounting and auditing practice.</p> <p>The assessed levels of risk are the key considerations in deciding the number and types of engagements to review and, where necessary, offices to visit. Through the assessment of risk, the reviewer determines the coverage of the firm’s accounting and auditing practice that will result in an acceptably low peer review risk. Engagements selected should provide a reasonable cross-section of the firm’s accounting and auditing practice, with a greater emphasis on those engagements in the practice with higher assessed levels of peer review risk.</p> <p>Reviewers must document, as part of the Summary Review Memorandum (SRM), the risk assessment of the firm’s accounting and auditing practice and its system of quality control, the number of offices and engagements selected for review, and the basis for that selection in relation to the risk assessment. To effectively assess risk of the firm’s accounting and auditing practice and its quality control policies, risk assessment documentation should not only address the engagements selected and the reasoning behind that selection, but also the environment of the firm and its system of quality controls. Some factors that should be</p>	<p>210.A12 The assessed levels of risk are the key considerations in deciding the number and types of engagements to review and, where necessary, offices to visit. Through the assessment of risk, the reviewer determines the coverage of the firm’s accounting and auditing practice that will result in an acceptably low peer review risk.</p> <p>210.19 The reviewer should document the assessment of peer review risk, which includes inherent risk, control risk, and detection risk, to provide a basis for engagement selections and the extent of procedures performed. (Ref: par. .A12).</p> <p>210.17 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 quality control standards established by the AICPA. (Ref: par. .A10)</p> <p>210.A10 Control risk factors may include, but are not limited to, the team captain’s evaluation of the firm’s policies and procedures related to the following:</p> <ul style="list-style-type: none"> a. CPE b. The firm’s professional library 	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>considered in assessing risk include the following:</p> <ul style="list-style-type: none"> a. The relationship of the firm’s audit hours to total accounting and auditing hours b. Size of the firm’s major engagement(s), relative to the firm’s practice as a whole c. Initial engagements and their impact on the firm’s practice d. The industries in which the firm’s clients operate, especially the firm’s industry concentrations e. The results of the prior peer review f. The results of any regulatory or governmental oversight or inspection procedures g. The results of the team captain’s assessment of the firm’s design of and compliance with quality controls in accordance with SQCS No. 8 h. Risk level of the engagements performed (For example, does the 	<ul style="list-style-type: none"> c. Engagement acceptance d. Engagement review and supervision e. Engagement quality control review (EQCR) f. Monitoring processes g. Recruitment and hiring h. Monitoring independence i. Timely completion of the assembly of final engagement files by engagement teams <p>210.A9 Examples of higher-risk engagements include but are not limited to, audits of employee benefit plans, entities subject to the Single Audit Act, entities subject to SEC complex independence requirements, and others with high-risk features or complex accounting or auditing applications.</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>firm perform audits of employee benefit plans, entities subject to the Single Audit Act, entities subject to SEC complex independence requirements, and others under <i>Government Auditing Standards</i>, HUD-regulated entities, and others with high-risk features or complex accounting or auditing applications?)</p> <p>i. Have there been any major changes in the firm’s structure or personnel since the prior peer review?</p> <p><i>Detection Risk</i></p> <p>Inherent risk and control risk directly relate to the firm’s accounting and auditing practice and its system of quality control, respectively, and should be assessed in planning the review. Based on the combined assessment, the reviewer selects engagements for review and determines the scope of other procedures to reduce the peer review risk to an acceptable level. The lower the combined inherent and control risk, the higher the detection risk that can be tolerated. Conversely, a high combined inherent and control risk assessment results in</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>a low detection risk and the resulting increase in the scope of review procedures.</p>		
<p>Review of CPE Records During a Peer Review</p>		
<p>53-1</p> <p><i>Question</i>—Paragraph .53 discusses testing the functional areas of a firm. What are some factors to consider regarding continuing professional education (CPE) records?</p> <p><i>Interpretation</i>—In accordance with SQCS No. 8, a firm should establish policies and procedures designed to provide it with reasonable assurance that its personnel have the appropriate competence, capabilities, and commitment to ethical principles. Such policies and procedures should address, among other items, professional development (including training or CPE). The fundamental purpose of CPE is to maintain or increase professional competence. Team captains on System Reviews should carefully consider a firm’s CPE policies and the firm’s philosophy toward continuing education when assessing risk during planning. In addition, team captains should carefully test a firm’s CPE records to the extent deemed necessary during</p>	<p>FN: The review team should ascertain that the appropriate amounts and types (accounting, auditing and quality control) of CPE are being taken by the appropriate firm personnel, including that personnel are in compliance with CPE requirements for boards of accountancy in states in which the firm’s personnel are licensed. The team captain should also consider if the firm is taking appropriate action to correct situations where personnel are not in compliance with CPE requirements. The lack of appropriateness or quality of a firm’s compliance with CPE requirements can be the systemic cause of a matter, finding or deficiency and thus affect the firm’s peer review results.</p>	<p>Removed as is addressed in as applicable in quality control checklists, and in FN for template regarding procedures for amounts and types of CPE.</p>

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>their testing of the functional areas of a firm. They should ascertain that the appropriate amounts and types (accounting, auditing and quality control) of CPE are being taken by the appropriate firm personnel, including that personnel are in compliance with CPE requirements for boards of accountancy in states in which the firm's personnel are licensed. The team captain should also consider if the firm is taking appropriate action to correct situations where personnel are not in compliance with CPE requirements. The lack of appropriateness or quality of a firm's compliance with CPE requirements can be the systemic cause of a matter, finding or deficiency and thus affect the firm's peer review results. A team captain's diligence in considering and testing CPE can impact the quality of the peer review and hence the program's goal of improving audit quality. A team captain's steps in considering and testing CPE during a peer review are subject to review and oversight by the administering entity.</p>		
<p>Planning and Performing Compliance Tests of Requirements</p>	<p>Performing Compliance Tests</p>	
<p>54c-1</p>	<p>210.A26 If no events relative to an element of a firm's system of quality control occurred during</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p><i>Question</i>—Paragraph .54(c) discusses the peer reviewer’s requirement in a System Review to review evidential material, to determine whether the firm has complied with its policies and procedures for each element of its system of quality control, which may include evidence since the previous peer review. When is it appropriate to review evidential matter from prior to the peer review year and what are the reporting implications?</p> <p><i>Interpretation</i>—In performing a review of a firm’s system of quality control, a team captain will develop a plan for the nature and extent of testing relative to the firm’s compliance with their quality control policies and procedures. As the team captain will be opining on design and compliance with the system of quality control in effect for the year ending the peer review year end date, it is necessary to test compliance with each element of the firm’s system of quality control.</p> <p>Interpretations 58-1, 58-2, and 58-3 under the heading “Office and Engagement Selection in System Reviews” provide considerations for when it is appropriate to test the engagement performance element of a firm’s system of quality control outside of the peer review year. If no events relative to the other element policies and procedures occurred during the</p>	<p>the peer review year, it may be necessary for a team captain to review evidence from prior to the peer review year. For example, if there were no instances of accepting new clients in the peer review year, it is appropriate to test compliance in prior years, assuming the design of the policies and procedures is the same.</p> <p>Another example would be when the team captain reviews the monitoring and inspection results from the intervening periods to determine appropriate design and compliance of monitoring procedures. Looking at the intervening periods allows the team captain to evaluate whether the firm is properly communicating, and remediating engagement and systemic issues identified.</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>peer review year, it may be necessary for a team captain to review evidential matter from prior to the peer review year. For example, the firm may have accepted a new engagement in the year following the previous peer review but did not accept any during the current peer review year. In such a situation, the team captain may review evidential matter since the previous peer review year to evaluate the firm's compliance with its engagement acceptance quality control policies and procedures. If the team captain discusses the firm's procedures for acceptance of the new client and the firm indicates its only procedures were to review the predecessor auditor's workpapers, this may indicate there is a design matter in the firm's system of quality control related to acceptance and continuance. The team captain will then need to evaluate if there are any indicators of change to that policy since the last acceptance of an engagement and determine if the matter should be elevated to either an FFC or a deficiency in the report. If the team captain determines that the policy is designed appropriately and there is a compliance matter, it should be treated as any other compliance matter for actions during the peer review year.</p> <p>Another example would be when the team captain reviews the monitoring and inspection</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>results from the intervening periods to determine appropriate design and compliance of monitoring procedures. Looking at the intervening periods allows the team captain to evaluate whether the firm is properly communicating and remediating engagement and systemic issues identified.</p> <p>As stated above, the team captain will be opining on design and compliance with the system of quality control in effect for the year ending the peer review year end date. If, for example, there were no instances of accepting new clients in the peer review year, it is appropriate to test compliance in prior years assuming the design of the policies and procedures is the same.</p>		
<p>54d-1</p> <p><i>Question</i>—Paragraph .54(d) discusses the peer reviewer’s requirement in a System Review to review other evidential material as appropriate, including selected administrative or personnel files. Should the reviewer test the firm’s compliance with requirements of voluntary membership organizations?</p> <p><i>Interpretation</i>—Voluntary membership requirements that are not directly imbedded into the firm’s written system of quality</p>	<p>210.A28 A firm may have requirements embedded in its quality control policies and procedures that do not directly contribute to the firm’s compliance with the quality control standards established by the AICPA. For example, voluntary membership requirements that do not directly contribute to the firm’s compliance would not be tested, addressed, or reported on in the peer review process.</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>control for its accounting and auditing practice are not tested as a part of the peer review. In addition, voluntary membership requirements, even those included in the firm’s written system of quality control, that do not directly contribute to the firm’s compliance with the requirements of the SQCSs are not tested, addressed, or reported on in the peer review process. Those membership requirements that are specifically imbedded into the firm’s written system of quality control and directly contribute to the firm’s compliance with the SQCSs are within the scope of peer review, but not because they are a membership requirement, but rather because they are an integral part of the firm’s system of quality control for the firm to comply with the SQCSs. In this instance, any matters, findings, or deficiencies noted in these areas would only be addressed as they relate to the firm’s system of quality control and they would not be described as related to the voluntary membership requirements.</p>		
<p>Inclusion of Engagements and Aspects of Functional Areas in the Scope of the Peer Review</p>		
<p>55-1</p>		<ul style="list-style-type: none"> • See mapping of extant par. 1000.55.

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p><i>Question</i>—Paragraph .55 of the standards notes that there is a presumption that all engagements and all aspects of functional areas otherwise subject to the peer review will be included in the scope of the review. Could a firm have a legitimate reason for an exclusion and what is the effect on the performance of the review?</p> <p><i>Interpretation</i>—In rare situations a reviewed firm may have legitimate reasons for excluding certain engagements or certain aspects of functional areas, for example when an Engagement or an employee’s personnel records are subject to pending litigation. In those instances a reviewer should carefully consider the implication of such exclusions. Those considerations should include assessing the reasonableness of the reasons for the exclusions and assessing the effect on peer review risk assessments and scope, including whether alternate procedures can be performed. To reduce the potential for disagreement about such matters among the reviewed firm, the reviewer, and the administering entity, ordinarily, when the reviewed firm contemplates excluding engagement(s) or aspect(s) of functional area(s), it should notify the team captain in a timely manner and submit a written statement to the administering entity, ordinarily prior to the commencement of the review, indicating</p>	<p>310.09 The firm should notify the team captain and the administering entity, prior to the commencement of the review, if it intends to exclude one or more engagements or elements of the firm’s system of quality control. This notification should indicate</p> <ul style="list-style-type: none"> a. its plans to exclude one or more engagements or aspects of functional areas from the peer review selection process, b. the reasons for the exclusion, and c. that it is requesting a waiver from the administering entity for the exclusion. <p>210.30 In the event of an exclusion, the reasons for the exclusion and the considerations detailed in paragraph .29 should be documented in the peer review working papers which will be evaluated by the peer review committee as part of the peer review acceptance process.</p>	<p>AE evaluation of such requests is inherent in its obligations to administer the program – See PR-C section 400.</p>

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>(a) it plans to exclude an engagement(s) or aspect(s) of functional area(s) from the peer review selection process, (b) the reasons for the exclusion, and (c) it is requesting a waiver for the exclusion. The administering entity should satisfy itself concerning the reasonableness of the explanation before agreeing to the exclusion.</p> <p>For peer reviews overseen by a panel pre-assigned by the administering entity for on-site oversight purposes, the reviewed firm should notify the team captain in advance that it is probable that engagement(s) or aspect(s) of functional area(s) will be excluded from the review, the general reasons for such exclusion, and a detailed description of the procedures used to identify and assess those situations. The panel as previously described should determine that those procedures are appropriate in light of the circumstances. They should consider the level of oversight to which the review may be subject and the level of involvement that members of the board have in that oversight. In addition, they should consider the practicality of selecting a replacement and the availability of other engagement(s) or aspect(s) of functional area(s) as appropriate replacements. Ordinarily, the greater the population to select from, the more there is an opportunity to find</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>an appropriate replacement, and the less there is a risk that there is a scope limitation.</p> <p>The administering entity (or panel as previously described) should approve the request to exclude engagement(s) or aspect(s) of functional area(s) as the situation arises only when it is satisfied that, based on the reasonableness of the procedures used to identify and assess the situations and the other factors described in the preceding, there will be no limitations on the scope of the review.</p> <p>Regardless of the approach used to notify the administering entity of exclusions, the reasons for the exclusions and the risk assessment implications should be fully documented in the peer review working papers, and the peer review committee should consider those factors as part of its evaluation and acceptance process.</p> <p>An administering entity may conclude that scope has been limited due to circumstances beyond the firm's control and the review team cannot accomplish the objectives of those procedures through alternate procedures, thus precluding the application of one or more peer review procedure(s) considered necessary in the circumstances. For example, ordinarily, the team would be unable to apply alternate procedures if the firm's only engagement in</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>an industry that must be selected is unavailable for review and there isn't an earlier issued engagement that may be able to replace it, or when a significant portion of the firm's accounting and auditing practice during the year reviewed had been divested before the review began. In these circumstances, the team captain or review captain should consider issuing a report with a peer review rating of <i>pass (with a scope limitation)</i>, <i>pass with deficiency (with a scope limitation)</i>, or <i>fail (with a scope limitation)</i>, as applicable. The existence of a scope limitation in and of itself does not result in a report with a peer review rating of <i>pass with deficiencies</i> or <i>fail</i>; it is in addition to the grade that was determined to be issued (which is why it is possible to have a report with a grade of <i>pass (with a scope limitation)</i> to which there would be no letter of response).</p> <p>If the administering entity (or panel as previously described) concludes that there is not a legitimate reason for the requested exclusion and the firm continues to insist on the exclusion, it should be evaluated whether this is a matter of noncooperation (see Interpretation No. 5h-1).</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>Office and Engagement Selection in System Reviews</p>		
<p>56-1</p> <p><i>Question</i>—Paragraph .56 of the standards provides factors to consider when assessing peer review risk at the office level. What are some other examples of factors to consider?</p> <p><i>Interpretation</i>—Other examples of factors to consider when assessing peer review risk at the office level follow. This list is for illustrative purposes only, and does not include all possible inherent and control risk factors, nor is the peer reviewer required to consider every item on the list when assessing inherent and control risk:</p> <ul style="list-style-type: none"> a. Offices with one or a few engagements comprising a significant portion of the office’s accounting and auditing practice b. Offices with concentrations of high risk engagement c. Offices with a pattern of litigation or regulatory actions 		<p>See application material in par. .A14 of PR-C section 210 regarding risk factors for selection of offices.</p> <p>Removed as this does not establish any requirements, but considerations are included in risk assessment tool.</p>

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<ul style="list-style-type: none"> <i>d.</i> Offices identified in the preceding peer review or through monitoring procedures as operating at a level significantly below the firm's quality standards <i>e.</i> Offices with an unreasonably large number of accounting and auditing hours per engagement partner <i>f.</i> Offices with only one or a few engagements in a specialized industry <i>g.</i> Offices not subjected to monitoring procedures or not scheduled to be subject to monitoring procedures since the last peer review <i>h.</i> Offices where individual partners practice in many industries <i>i.</i> Offices in geographic areas that are experiencing economic hardships <i>j.</i> Offices with numerous clients in industries experiencing economic hardships 		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>58-1</p> <p><i>Question</i>—Paragraph .58 of the standards provides guidance on steps to follow if a current year’s engagement has not been completed and issued. What is the impact, if any, for audit engagements subject to professional standards, statutes, regulations, or the firm’s quality control policies, which may allow a specified time for an assembly process after issuance?</p> <p><i>Interpretation</i>—Professional guidance indicates that auditors should not date the audit report until they have obtained sufficient appropriate audit evidence to support the opinion. At that point audit documentation should have been reviewed, financial statements should have been prepared, and management should have asserted its responsibility for them. Document completion dates specify a date certain by which assembly of the audit file must be completed. During the period leading up to that date, changes can be made to the audit documentation to complete the documentation and assembly of audit evidence, perform routine file-assembling procedures, sign off on file completion checklists and add information received after the date of the auditor’s report; for example, an original</p>		<ul style="list-style-type: none"> Removed as conclusion is no impact to the peer review and substance is related to documentation requirements of other professional standards.

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>confirmation that was previously faxed. However, the sufficient appropriate audit evidence would have already been required to be in place when the report was dated and thus would be in place when it was issued. Thus, there is no impact on the process of selecting engagements for review.</p>		
<p>58-2</p> <p><i>Question</i>—What if the incomplete engagement is an initial engagement and there is no comparable engagement?</p> <p><i>Interpretation</i>—If there is an incomplete engagement (which is an initial engagement) and there is no comparable engagement, the firm should request an extension from the administering entity. The administering entity will consider the circumstances and evaluate whether there is actually a matter of noncooperation (see Interpretation No. 5h-1). Although the administering entity will otherwise likely grant the extension, the firm needs to consider if it will be meeting the requirements of its state board of accountancy or other regulatory bodies. If an extension is not possible, the peer review should be</p>	<p>310.18 If a firm performs a must-select engagement in an industry not subject to the current review, after the year-end and before the due date of its system review, the reviewed firm should: (Ref: par. .A24–.A25)</p> <ul style="list-style-type: none"> a. immediately notify the administering entity, and b. determine if the due date should be extended to include the must-select engagement. <p>310.A24 Before requesting a due date extension, the firm would need to consider the effect of the extension on any state boards of accountancy requirements or other regulatory peer review requirements.</p> <p>310.A25 If the circumstances described in paragraph .18 represent a long-term change in the nature of the firm’s business, the firm may consult with its administering entity and consider requesting a change in peer review year-end.</p>	<p>Requirement for reviewed firm, reflected in PR-C section 310.</p>

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>performed and the report should include a scope limitation.</p> <p>If the situation arose due to a permanent change in the nature of the firm’s business, the firm should consider requesting a change in its peer review year-end date. If there is any uncertainty concerning how the situation should be handled, the administering entity should be contacted. See section 3100 for an example when there is an initial engagement performed under <i>Government Auditing Standards</i> (GAS, also known as the Yellow Book) meeting the preceding criteria.</p>		
<p>58-3</p> <p><i>Question</i>—Paragraph .58 of the standards indicates that if the subsequent year’s engagement has been completed and issued, the review team should consider, based on its assessment of peer review risk, whether the more recently completed and issued engagement should be reviewed instead. What are some factors to be considered and implications on the peer review?</p> <p><i>Interpretation</i>—Other than consideration of the firm’s risk assessment and the factors that contributed to it, the reviewer may consider if the subsequent engagement was performed</p>		<ul style="list-style-type: none"> • Removed this option for the reviewer; therefore removed from AE section as well.

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>during or after the peer review year. In addition, the reviewer should consider the number of subsequent engagements available and selected for review, as well as the differences in issues encountered in the engagements whether the year-end was within the peer review year or subsequent to it. The greater the number of subsequent year engagements selected, the greater the risk that the results of the review are not appropriate or matched in relation to the peer review year covered by the report and the related peer review results. In some situations, the team captain should consider whether it is more appropriate to issue the peer review report on the subsequent year. However, this should be a rare situation, would require advance approval from the administering entity, and that entity may request that the next review be accelerated to put the firm back on cycle. If many of the subsequent engagements have been issued, the reviewer should discuss the timing of the peer review with the firm so that future reviews may benefit from the results of the peer review before the subsequent engagements are issued.</p>		
<p>59-1</p> <p><i>Question</i>—Paragraph .59 of the standards requires that engagements selected for review</p>	<p>210.21 There is a relationship between a reasonable cross section of the firm’s accounting and auditing practice and a risk-based approach to engagement selections. The reviewer should document in the risk assessment key decisions</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>should provide a reasonable cross section of the reviewed firm’s accounting and auditing practice, with greater emphasis on those engagements in the practice with higher assessed levels of peer review risk, and the guidance provides examples of factors to consider when assessing peer review risk at the engagement level. What are some other considerations?</p> <p><i>Interpretation</i>—A reasonable cross section of a firm’s accounting and auditing practice, not only includes consideration of the specific industries that are required to be selected, but other industries that have a significant public interest. Industries that have a significant public interest are those that benefit the general welfare of the public, such as those that have recent regulatory and legislative developments. Public interest industries will vary across firms and reviewers should consider the composition of a firm’s accounting and auditing practice when determining if their risk assessment should address a public interest industry. The reviewer also needs to carefully consider the industries that the firm has identified in the category of “other audits” when determining whether to select such an engagement(s). A selection consisting solely of public interest industries would not necessarily represent a reasonable cross section. Other factors to</p>	<p>made when the engagement selections do not include</p> <ul style="list-style-type: none"> a. a level of service, b. public interest industries, (Ref: par. .A15) c. an engagement type within an industry, or d. industries where the firm performs a high volume of engagements. (Ref: par. .A16) <p>210.A15 Public interest industries are those that benefit the general welfare of the public, such as those that have recent regulatory and legislative developments. Public interest industries will vary across firms.</p> <p>.A16 In response to the reviewer’s assessed levels of risk and to obtain a reasonable cross section of the firm’s accounting and auditing practice, it may be more appropriate for the engagement selection to include more than one engagement from a particular industry or engagement type (including must-select).</p> <p>210.22 To support the reviewer’s selection of a reasonable cross section of the firm’s accounting and auditing practice, the reviewer should</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>consider in selecting a reasonable cross section may include the number of partners, the number of practice offices, and materiality thresholds of accounting and auditing hours.</p> <p>The reviewer should explain and document in the <i>Summary Review Memorandum</i> key decisions that he or she made when he or she chose not to select any one or more of the following: a level of service, industries in which a significant public interest exists, and industries in which the firm performs a significant number of engagements. This does not give authority to the reviewer to avoid selecting an engagement(s) by simply documenting the reason(s) why he or she did not select certain engagement(s). Therefore the reviewer should document important considerations regarding the engagement selection process.</p> <p>A reasonable cross section does not always require that at least one engagement from every level of service provided by the firm be selected for review; however, it often may be appropriate in the circumstances. There is no percentage of coverage that necessarily ensures a reasonable cross section. Therefore, there is a relationship between a risk-based approach and a reasonable cross section when selecting engagements, and in that regard each</p>	<p>document in their risk assessment their consideration of industries that are represented in the firms “other audits” category.</p> <p><i>a-d</i> are mapped to 210.A69 Appendix C – Additional Requirements for Must-Select and Must-Cover Engagements.</p> <p><i>Engagements Under Government Auditing Standards</i></p> <p>210.A69.03 <i>Government Auditing Standards</i> (GAS), issued by the U.S. Government Accountability Office, requires auditors conducting engagements in accordance with those standards to have a peer review that includes the review of at least one engagement conducted in accordance with those standards. Additionally, if the firm performs engagements of entities subject to the Single Audit Act, the reviewer must evaluate a compliance audit.</p> <p>210.A69.04 Inclusion of a must-select engagement should not supersede the reviewer’s consideration of engagements and industries that have a significant public interest, such as state and local governments, school districts, and Department of Housing and Urban Development (HUD) engagements. For example, if for-profit HUD multifamily housing project audit engagements constitute a significant percentage of a firm’s practice, one would expect the reviewer to select at</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>peer review needs to be considered on a case-by-case basis.</p> <p>The following are examples of risk considerations when addressing obtaining a reasonable cross section of the engagements, including engagements that must be selected. It is expected that the various types of engagements within an industry are specifically addressed in the risk assessment. Similar considerations should be made for industries that have a significant public interest, such as engagements subject to SEC independence rules.</p> <p><i>a. Governmental—Government Auditing Standards</i>—Inclusion of a must select engagement should not supersede the reviewer’s consideration of engagements and industries that have a significant public interest such as state and local governments, school districts and HUD engagements. For example, if for-profit HUD multifamily housing project audit engagements constitute a significant percentage of a firm’s practice, one would expect the reviewer to select at least one such engagement for review. However, if the firm also performed an audit of an engagement subject to the Single Audit Act, such as a local government</p>	<p>least one such engagement for review. However, if the firm also performed an audit of an engagement subject to the Single Audit Act, such as a local government or not-for-profit organization, one such engagement must also be selected to perform an evaluation of the firm’s single audit compliance. Peer reviewers should also consider audit firm experience such as how many governmental audits the firm performs, the number of years’ experience in performing these engagements, the number of team members with experience, whether the team members have undergone CPE or specialized training, and reasonableness of hours spent on GAS engagements. Further consideration should be given to communications from regulatory agencies.</p> <p>Audits of Employee Benefit Plans Under ERISA</p> <p>210.A69.05 Regulatory and legislative developments have made it clear that there is a significant public interest in, and a higher risk associated with, audits conducted pursuant to the Employee Retirement Income Security Act of 1974 (ERISA).</p> <p>210.A69.06 For employee benefit plans under ERISA, the peer reviewer should consider whether the engagement selection process has adequately addressed the risks involved in ERISA section 103(a)(3)(C) (formerly called limited-scope) audits versus non-ERISA 103(a)(3)(C) (formerly called</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>or not-for-profit organization, one such engagement must also be selected to perform an evaluation of the firm’s single audit compliance. Peer reviewers should also consider audit firm experience such as how many governmental audits the firm performs, the length of experience in performing these engagements, the number of team members with experience, whether the team members have undergone CPE or specialized training, and reasonableness of hours spent on GAS engagements. Further consideration should be given to communications from regulatory agencies.</p> <p><i>b. Employee benefit plans</i>—For employee benefit plans under ERISA, the peer reviewer should consider whether the engagement selection process has adequately addressed the risks involved in limited versus full scope audits and in different types of benefit plans such as defined benefit, defined contribution, and voluntary health and welfare plans. If a firm has more than one of the preceding types of plans, the reviewer must consider the unique risks associated with that type of plan and document how these</p>	<p>full-scope) audits and in different types of benefit plans such as defined benefit, defined contribution, and voluntary health and welfare plans. If a firm has more than one of the preceding types of plans, a selection from each type of plan is not required, however the reviewer must consider the unique risks associated with those types of plans and document how these risks were addressed in the risk assessment. Peer reviewers should also consider audit firm experience such as how many ERISA audits the firm performs, the number of years’ experience in performing these engagements, the number of team members with experience, whether the team members have undergone CPE or specialized training, and reasonableness of hours spent on ERISA engagements. Further consideration should also be given to communications from regulatory agencies.</p> <p>Audits Under FDICIA</p> <p>210.A69.07 The 1993 FDIC guidelines implementing the FDICIA require auditors of federally insured depository institutions having total assets of \$500 million or greater at the beginning of the fiscal year to have a peer review that includes the review of at least one audit of an insured depository institution subject to the FDICIA.</p> <p>210.A69.08 For FDICIA engagements, peer reviewers should take into consideration the</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>risks were addressed in the risk assessment. Peer reviewers should also consider audit firm experience such as how many ERISA audits the firm performs, the length of experience in performing these engagements, the number of team members with experience, whether the team members have undergone CPE or specialized training, and reasonableness of hours spent on ERISA engagements. Further consideration should be given to communications from regulatory agencies.</p> <p><i>c. Depository Institutions</i>—For FDICIA engagements, peer reviewers should take into consideration the amount of total assets held by the federally insured depository institution (less than \$500 million, more than \$500 million, more than \$1 billion). Peer reviewers should also consider audit firm experience such as how many FDICIA audits the firm performs, the length of experience in performing these engagements, the number of team members with experience, whether the team members have undergone CPE or specialized training, and reasonableness of hours spent on FDICIA engagements.</p>	<p>amount of total assets held by the federally insured depository institution (less than \$500 million, more than \$500 million, more than \$1 billion). Peer reviewers should also consider audit firm experience, such as how many FDICIA audits the firm performs, the length of experience in performing these engagements, the number of team members with experience, whether the team members have undergone CPE or specialized training, and reasonableness of hours spent on FDICIA engagements. Further consideration should be given to the risks of the audited company, such as the level of reporting the institution complies with (the holding company level or the bank subsidiary level, and the regulatory issues associated with each), the balance of the lending portfolio (the industries and concentration percentage of the portfolio), any regulatory correspondence and examination results, capital ratios, financial institution management experience, economic environment and geographic location of the institution, number of branches, and experience and longevity of the board of directors and audit committee.</p> <p>Examinations of Service Organizations</p> <p>210.A69.09 Due to the reliance of user entities on system and organization control (SOC) reports,</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>Further consideration should be given to the risks of the audited company such as the level of reporting the institution complies with (the holding company level or the bank subsidiary level and the regulatory issues associated with each), the balance of the lending portfolio (the industries and concentration percentage of the portfolio), any regulatory correspondence and examination results, capital ratios, financial institution management experience, economic environment and geographic location of the institution, number of branches, and experience and longevity of the board of directors and audit committee.</p> <p><i>d. Service Organizations</i>—The peer reviewer should consider whether the engagement selection process has adequately addressed the risks involved in different types of SOC engagements (SOC 1 and SOC 2 engagements). If a firm performs more than one of the preceding types of</p>	<p>particularly SOC 1[®] and SOC 2[®] reports,¹ 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.</p> <p>210.A69.10 The peer reviewer should consider whether the engagement selection process has adequately addressed the risks involved in different types of SOC engagements (SOC 1 and SOC 2 engagements). If a firm performs more than one of the preceding types of SOC engagements, the reviewer must consider the unique risks associated with that type of engagement and document how these risks were addressed in the risk assessment. Peer reviewers should also consider audit firm experience such as how many SOC engagements the firm performs, the length of experience in performing these engagements, the number of team members with experience, whether the team</p>	

¹ In 2017, the AICPA introduced the term *system and organization controls* (SOC) to refer to the suite of services practitioners may provide relating to system-level controls of a service organization and system- or entity-level controls of other organizations. Formerly, SOC referred to service organization controls. By redefining that acronym, the AICPA enables the introduction of new internal control examinations that may be performed (a) for other types of organizations, in addition to service organizations, and (b) on either system-level or entity-level controls of such organizations.

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>SOC engagements, the reviewer must consider the unique risks associated with that type of engagement and document how these risks were addressed in the risk assessment. Peer reviewers should also consider audit firm experience such as how many SOC engagements the firm performs, the length of experience in performing these engagements, the number of team members with experience, whether the team members have undergone CPE or specialized training, whether the firm utilizes a group that specializes in internal controls for completing its SOC engagements, and reasonableness of hours spent on SOC engagements. Additional considerations should be given to whether the firm performs SOC engagements with significant sub-service organizations identified in the auditor's opinion (inclusive method is higher risk than carve out). Further consideration should be given to communications from regulatory agencies. Although SOC 1 and SOC 2 engagements are different, noncompliance for one type may be indicative of noncompliance in the other. SOC 3[®] engagements are not</p>	<p>members have undergone CPE or specialized training, whether the firm utilizes a group that specializes in internal controls for completing its SOC engagements, and reasonableness of hours spent on SOC engagements. Additional consideration should be given to whether the firm performs SOC engagements with significant sub-service organizations identified in the auditor's opinion (the inclusive method is higher risk than the carve-out method). Further consideration should be given to communications from regulatory agencies. Although SOC 1 and SOC 2 engagements are different, noncompliance for one type may be indicative of noncompliance in the other. SOC 3[®] engagements are not must select engagements but when considering the pervasiveness of a systemic cause and the portion of the firm's practice that may be affected by matters identified with other SOC engagements, the reviewer should also consider SOC 3 engagements.</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>must select engagements but when considering the pervasiveness of a systemic cause and the portion of the firm’s practice that may be impacted by matters identified with other SOC engagements, the reviewer should also consider SOC 3 engagements.</p>		
<p>59-2</p> <p><i>Question</i>—Paragraph .59 of the standards provides factors to consider when assessing peer review risk at the engagement level. What are some other examples of factors to consider?</p> <p><i>Interpretation</i>—Other examples of factors to consider when assessing peer review risk at the engagement level follow. This list is for illustrative purposes only, and does not include all possible inherent and control risk factors, nor is the peer reviewer required to consider every item on the list when assessing inherent and control risk:</p> <ul style="list-style-type: none"> a. Engagement size, in terms of the hours required to plan and perform it b. Engagements involving experienced personnel hired from other firms, and partners who also have office, regional 	<p>210.A13 Risk factors that may influence a reviewers decision to select engagements include, but are not limited to the following:</p> <ul style="list-style-type: none"> a. Engagement size, in terms of the hours required to plan and perform the engagement b. Engagements involving experienced personnel hired from other firms, and partners who also have office, regional or firm-wide management, administrative, or functional responsibilities c. Engagements in which work on segments has been referred to other firms, foreign offices, domestic or foreign affiliates, or correspondents d. Engagements in which one or more affiliated entities (for example, parent companies and subsidiaries or brother and 	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>or firm-wide management, administrative, or functional responsibilities</p> <p><i>c.</i> Engagements where work on segments has been referred to other firms, foreign offices, domestic or foreign affiliates, or correspondents</p> <p><i>d.</i> Engagements where one or more affiliated entities (for example, parent companies and subsidiaries or brother and sister companies) constitute a large portion of the firm's overall clientele</p> <p><i>e.</i> Engagements identified in the firm's quality control System or guidance material as having a high degree of risk</p> <p><i>f.</i> Engagements where departures from professional standards and failure to comply with the firm's quality control policies and procedures were noted in the preceding year's monitoring procedures</p> <p><i>g.</i> Engagements in industries where the firm has experienced high instances of</p>	<p>sister companies) constitute a large portion of the firm's overall clientele</p> <p><i>e.</i> Engagements identified in the firm's quality control system or guidance material as having a high degree of risk</p> <p><i>f.</i> Engagements where departures from professional standards and failure to comply with the firm's quality control policies and procedures were noted in the preceding year's monitoring procedures</p> <p><i>g.</i> Engagements in industries where the firm has experienced high instances of litigation, proceedings, or investigations</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>litigation, proceedings, or investigations</p> <p><i>h.</i> Engagements affected by recently implemented revisions of the firm's quality control policies and procedures</p> <p><i>i.</i> Engagements affected by newly effective professional standards</p> <p><i>j.</i> Clients in industries in poor financial condition</p> <p><i>k.</i> Clients in industries with complex or sophisticated transactions</p> <p><i>l.</i> Engagements from merged-in practices</p> <p><i>m.</i> Engagements subject to <i>Government Auditing Standards</i></p> <p><i>n.</i> Engagements subject to the Employee Retirement Income Security Act of 1974 (ERISA)</p> <p><i>o.</i> Engagements subject to the Federal Deposit Insurance Corporation Improvement Act of 1991 (FDICIA)</p> <p><i>p.</i> Audits of commodities broker-dealers</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p><i>q.</i> Examinations of controls relevant to both a service organization and its user entities</p> <p><i>r.</i> Engagements subject to SEC independence rules</p>		
<p>59-3</p> <p><i>Question</i>—What factors should be considered if a firm has an office in a foreign country or other territory?</p> <p><i>Interpretation</i>—The standards are intended for firms enrolled in the program who are engaged in the practice of public accounting in the United States or its territories. Some firms also have offices in foreign countries or their territories (“foreign jurisdictions”), including the Cayman Islands and Bermuda. One important factor to consider in determining whether reports issued for clients in those foreign jurisdictions are to be included in the scope of the peer review is the letterhead of the report issued. For instance, ordinarily if a U.S. firm issues a report on letterhead from its office in that foreign jurisdiction, the engagement would not be included in the scope of the peer review. Another factor is whether the reports issued for clients in the foreign jurisdictions are</p>	<p>210.26 If a U.S. firm has offices in foreign countries or other “foreign jurisdictions”, the reviewer should consider whether those engagements should be subject to selection for review. If a report is issued on letterhead of an office in a foreign jurisdiction, the engagement should not be subject to selection for review. If the reviewer is unable to conclude whether an engagement should be subject to selection, the reviewer should consult with AICPA staff.</p> <p>300.09 It is the reviewed firm’s responsibility to understand and comply with its licensing requirements. Therefore, it should be prepared to respond to the reviewer’s inquiries and requests for documentation. This is also important for out-of-state firm and individual licenses when licensing requirements may be more difficult to identify and understand.</p>	<p>PR-C section 300.09 - Firm section contains requirement for reviewed firm to understand and comply with licensing requirements.</p>

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>addressed by guidance from the state board of accountancy(s) that issues the firm’s license(s). Team or review captains should consult with AICPA technical staff if there is any question of whether an engagement is subject to peer review under these circumstances. In addition, reviewed firms need to consider whether there are peer review or practice monitoring requirements issued by the licensing authority of the foreign jurisdiction which are applicable to the reviewed firm.</p>		
<p>61-1</p> <p><i>Question</i>—Paragraph .61 of the standards requires that at least one engagement from the initial selection to be reviewed should be provided to the firm once the review commences and not provided to the firm in advance (the surprise engagement). What steps should be followed when making the selection of the surprise engagement?</p> <p><i>Interpretation</i>—The following steps should be followed:</p> <ol style="list-style-type: none"> 1. Complete the risk assessment as described in paragraphs .46–.52 of the standards. 	<p>210.A24 The reviewer may request that the firm provide access to one of the reviewer’s selections (a surprise engagement) as soon as practical. The selection is ordinarily an audit engagement.</p>	<p>Surprise selections are not required under proposed PR-C sections.</p> <p>See further detailed explanation in the explanatory memo regarding “Removal of the Requirement for Surprise Engagements in System Reviews”</p>

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p data-bbox="348 267 890 444">2. Plan the compliance tests as described in paragraphs .53–.63 of the standards and determine which engagements should be selected for the review, independent of any surprise selections.</p> <p data-bbox="348 483 877 695">3. Based on those engagements selected for review, determine which engagement should be the surprise engagement. If the risk assessment warrants, more than one surprise engagement may be selected.</p> <p data-bbox="298 734 894 1414">Although the standards indicate that the engagement should be the firm’s highest level of service (which ordinarily means an audit), in situations where the audit cannot be the surprise selection (for instance, if there is only one audit required to be selected or the only audit is a must select engagement), an engagement from the next highest level of service should be selected. It is not always possible for the reviewer to know whether a reviewed firm expects a certain engagement to be selected. Reviewers are asked to use their professional judgment in these situations. The selection should be based on the risk assessment performed in step 1 and the engagement should be from the list of engagements determined in step 2. The team captain should not increase the original scope of the selection whether another audit or</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>another level of service is selected as the surprise engagement.</p> <p>See section 3100 for several examples for selecting surprise engagements.</p>		
<p>61-2</p> <p><i>Question</i>—How does the requirement to select a surprise engagement apply for a System Review performed at a location other than the reviewed firm’s offices (Interpretation No. 8-1)?</p> <p><i>Interpretation</i>—For System Reviews approved by the administering entity to be performed at a location other than a reviewed firm’s offices, engagements selected to be reviewed are submitted to the reviewer by the firm. As a result, the requirement to select a surprise engagement on a System Review performed at a location other than the reviewed firm’s offices is not applicable.</p>		<p>Removed – See further detailed explanation in the explanatory memo regarding “Removal of the Requirement for Surprise Engagements in System Reviews”</p>
<p>62-1</p> <p><i>Question</i>—Paragraph .62 of the standards requires that the team captain consult with the administering entity about the selection of engagements for review if the team captain</p>		<p>Removed – Risk based selection considerations included in PR-C section 210.</p>

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>finds that meeting all of the criteria in the related guidance results in the selection of an inappropriate scope of the firm’s accounting and auditing practice. What items should the team captain consider to determine if the selection is appropriate?</p> <p><i>Interpretation</i>—The team captain should carefully consider whether</p> <ul style="list-style-type: none"> a. significant risk areas have appropriate coverage (see paragraph .65 of the standards). b. appropriate weight has been given to reviewing work performed by all or most supervisory personnel. c. adequate consideration has been given to engagement selection based on peer review risk on a firm-wide basis. For example, if two offices are selected for review and each has a large client in the same specialized industry, peer review risk should be considered in determining whether more than one of these engagements should be selected for review. <p>If an engagement(s) within the team captain’s selection is not available for review, a comparable engagement within the peer</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>review year-end is also not available, nor is there a prior year's engagement that may be reviewed; the team captain should consult with the administering entity to determine the effects on the timing or year-end of the peer review, if any, and whether a report with a peer review rating with a scope limitation should be issued.</p>		
<p>63-1</p> <p><i>Question</i>—Paragraph .63 of the standards requires that specific types or number of engagements must be selected in a System Review as well as specific audit areas. In a System Review, what specific types and number of engagements, if any, should be included in the sample of engagements selected for review or assessed at a higher level of peer review risk?</p> <p><i>Interpretation</i>—At least one of each of the following types of engagements is required to be selected for review in a System Review:</p> <p><i>a. Governmental</i>—<i>Government Auditing Standards</i>, issued by the U.S. Government Accountability Office, requires auditors conducting engagements in accordance with those standards to have a peer review that</p>		<p>These considerations, including must-cover designations are reflected in PR-C section 210, Appendix C</p>

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>includes the review of at least one engagement conducted in accordance with those standards. If a firm performs an engagement of an entity subject to GAS and the peer review is intended to meet the requirements of those standards, at least one engagement conducted pursuant to those standards should be selected for review. Additionally, if the engagement selected is of an entity subject to GAS but not subject to the Single Audit Act and the firm performs engagements of entities subject to the Single Audit Act, at least one such engagement should also be selected for review. The review of this additional engagement must evaluate the compliance audit requirements and may exclude those audit procedures strictly related to the audit of the financial statements.</p> <p><i>b. Employee Benefit Plans</i>—Regulatory and legislative developments have made it clear that there is a significant public interest in, and a higher risk associated with, audits conducted pursuant to ERISA. Therefore, if a firm performs the audit of one or more entities subject to ERISA, at least one such audit engagement conducted</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>pursuant to ERISA should be selected for review. Refer to Interpretation No. 59-1.</p> <p><i>c. Depository Institutions</i>—The 1993 FDIC guidelines implementing the FDICIA require auditors of federally insured depository institutions having total assets of \$500 million or greater at the beginning of its fiscal year to have a peer review that includes the review of at least one audit of an insured depository institution subject to the FDICIA. If a firm performs an audit of a federally insured depository institution subject to the FDICIA and the peer review is intended to meet the requirements of the FDICIA, at least one engagement conducted pursuant to the FDICIA should be selected for review. The review of that engagement should also include a review of the reports on internal control if applicable because those reports are required to be issued under the FDICIA when total assets exceed \$1 billion.</p> <p><i>d. Service Organizations</i>—Due to the reliance on Service Organization Control Reports, particularly SOC 1 and SOC 2 reports, there is a significant public interest in</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>examinations of service organizations relevant to user entities. Therefore, if a firm performs an examination of one or more service organizations and issues a SOC 1 or SOC 2 report, at least one such engagement should be selected for review. 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, ordinarily a SOC 1 engagement should be selected over a SOC 2 engagement due to the reliance upon the report by other auditors. Because SOC 2 engagements are a new type of service, peer reviewers may deem it necessary to select both SOC 1 and SOC 2 engagements. However, there may also be situations in which it would be appropriate to pick on SOC 2 engagement and not select a SOC 1 engagement. An example may be that the SOC 2 engagements have not been previously selected and the SOC 1 engagements have been selected; the SOC 2 practice is growing and the SOC 1 practice is stable; and so on.</p> <p>In complying with the requirements in the previous list, peer reviewers should also ensure that the engagements selected include a</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>reasonable cross section of the firm’s accounting and auditing engagements, appropriately weighted considering risk. Thus, the peer reviewer may need to select greater than the minimum of one engagement from these industries in order to attain this risk weighted cross section. Refer to Interpretation No. 59-1.</p> <p>The team captain’s consideration of this coverage should be discussed in his or her risk assessment documentation. This discussion should include any factors considered when the reviewed firm has a significant number of engagements in one of these high risk areas and it is not otherwise evident why only one engagement from the industry has been included in the scope of the review.</p>		
<p>63-3</p> <p><i>Question</i>—Paragraph .63 of the standards requires that specific types or number of engagements must be selected in a System Review as well as specific audit areas. What is the difference between a must select and a must cover engagement?</p> <p><i>Interpretation</i>—Must select engagements must be included in the sample of engagements selected for review. A must</p>	<p>100.11 Must Select. A type of engagement that must be included in the sample of engagements selected for review. Appendix C of section 210 contains the industries or engagements with this designation.</p> <p>100.11 Must Cover. An engagement industry that does not have to be selected for review, but a team member must have recent experience in the industry to aid in the risk assessment process and determination of whether an engagement from the must-cover industry should be selected for review.</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>cover industry does not have to be selected for review, however, either the team captain or a team member must have at least recent experience in the industry to aid in the risk assessment process and determination of whether an engagement from the must cover industry should be selected for review.</p> <p>The Board periodically assesses engagements to determine which may have the most significant public interest of the moment. These engagements are deemed to be must cover engagements. Currently, the list includes state and local governments. These engagements, in addition to the must select engagements (as described in Interpretation No. 63-1), are must cover engagements for all firms. A firm may have additional must cover industries based on the concentration of its practice that subjects it to a System Review (as described in paragraph .07 of the standards). Industries in which a firm’s practice that subjects it to a System Review has a 10 percent or more concentration are also considered must cover engagements.</p> <p>A team member must have recent experience in and knowledge about rules and regulations appropriate to the level of service applicable to the industries of the engagements the individual will be reviewing, regardless of</p>	<p>Appendix C of section 210, “<i>Additional Requirements for Must-Select and Must-Cover Engagements</i>” contains the industries or engagements with this designation.</p> <p>210.08 For must-select and must-cover engagements, a reviewer should have experience in and knowledge about rules and regulations appropriate to the level of service applicable to the industries of the engagements the individual will be reviewing.</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>whether the engagement is a must select or must cover.</p>		
<p>Concluding on the Review of an Engagement</p>		
<p>66-1</p> <p><i>Question</i>—Paragraphs .66–.67 and .109 of the standards requires the review team to conclude on the review of an engagement by determining whether the engagement was performed or reported on in conformity with applicable professional standards in all material respects. How should this conclusion be made?</p> <p><i>Interpretation</i>—The review team should use practice aids that document, for each engagement reviewed, whether anything came to the review team’s attention that caused it to believe the following, as applicable:</p> <p><i>a.</i> The financial statements were not in conformity with GAAP in all material respects or, if applicable, with a special purpose framework^{fn 5} and the</p>	<p>220.17 For each engagement reviewed, the review captain should use peer review checklists and questionnaires to determine if:</p> <p><i>a.</i> the financial statements are fairly presented in accordance with generally accepted accounting principles in all material respects (or when applicable, with a special purpose framework) and</p> <p><i>b.</i> the firm has performed and reported on the engagement in accordance with the SSARSs or SSAEs in all material respects.</p>	

^{fn 5} See [footnote 3](#).

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>auditor or accountant's report was not appropriately modified.</p> <p><i>b.</i> The firm did not perform or report on the engagement in all material respects in accordance with generally accepted auditing standards and other applicable standards; for example, <i>Government Auditing Standards</i>.</p> <p><i>c.</i> The firm did not perform or report on the engagement in all material respects in accordance with SSARS.</p> <p><i>d.</i> The firm did not perform or report on the engagement in all material respects in accordance with SSAEs or any other applicable standards not encompassed in the preceding.</p> <p>In Engagement Reviews, these results should be considered by the review captain in determining the type of report to issue.</p>	<p>210.38 For each engagement reviewed, the reviewer should use peer review checklists and questionnaires to determine whether:</p> <p><i>a.</i> the financial statements are fairly presented in accordance with GAAP in all material respects (or when applicable, with a special purpose framework), and</p> <p><i>b.</i> the firm has performed and reported on the engagement in accordance with the requirements of the applicable professional standards in all material respects.</p>	
67-1		Included first paragraph in the MFC requirement in 220.18

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p><i>Question</i>—Paragraphs .67 and .109 of the standards notes that the team captain or review captain should promptly inform the firm when an engagement is not performed or reported on in conformity with applicable professional standards in all material respects and remind the firm of its responsibilities under professional standards to take appropriate actions. How is this communication made?</p> <p><i>Interpretation</i>—If the reviewer concludes that an engagement is not performed or reported on in conformity with applicable professional standards in all material respects, the team captain or review captain should promptly inform an appropriate member of the reviewed firm on an MFC form. The team captain or review captain should remind the reviewed firm of its responsibilities under professional standards to take appropriate actions as addressed in the following professional standards, as applicable: AU-C section 560, <i>Subsequent Events and Subsequently Discovered Facts</i> (AICPA, <i>Professional Standards</i>)</p> <p>SSARS No. 19, <i>Framework for Performing and Reporting on Compilation and Review Engagements</i> (AICPA, <i>Professional Standards</i>, AR sec. 60, 80, and 90), or SSARS No. 21, <i>Statements on Standards for Accounting and Review Services</i>:</p>		<p>Removed middle section b/c covered in firm responses.</p> <p>Last paragraph (firm rep) covered in requirements for written representations in section 300.</p>

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p data-bbox="296 264 892 370"><i>Clarification and Recodification (AICPA, Professional Standards, AR-C sec. 60, 70, 80, and 90) as applicable</i></p> <p data-bbox="296 407 877 513"><i>AU-C section 585, Consideration of Omitted Procedures After the Report Release Date (AICPA, Professional Standards)</i></p> <p data-bbox="201 550 835 656">The “Breach of Independence” interpretation (AICPA, Professional Standards, ET sec. 1.298.010)</p> <p data-bbox="201 758 888 1227">The reviewed firm should investigate the issue questioned by the review team and determine what timely action, if any, should be taken, including actions planned or taken to prevent unwarranted continued reliance on its previously issued reports. The reviewed firm should then advise the team captain or review captain of the results of its investigation, including parties consulted, and document the actions planned or taken or its reasons for concluding that no action is required as follows: In the firm’s response to the MFC form</p> <p data-bbox="344 1268 821 1336">a. In the firm’s response to the FFC form, if applicable</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p data-bbox="346 267 884 410"><i>b.</i> In the firm’s letter of response to deficiencies and significant deficiencies identified in the report, if applicable</p> <p data-bbox="203 513 884 727">The firm is also expected to make a representation in its representation letter to the team or review captain confirming it will remediate nonconforming engagements as stated by the firm on its MFC forms, FFC forms, or letter of response, as applicable.</p>		
<p data-bbox="203 865 264 894">67-2</p> <p data-bbox="296 935 894 1333"><i>Question</i>—Paragraphs .67 and .109 of the standards note that the team captain or review captain should promptly inform the firm when an engagement is not performed or reported on in conformity with applicable professional standards in all material respects and remind the firm of its responsibilities under professional standards to take appropriate actions. What other responsibilities do the team and review captain have when nonconforming engagements are identified?</p>	<p data-bbox="919 935 1570 1295">210.A55 & 220.A15 & 320.A12 & 310.A17 The administering entity’s peer review committee (committee) may require the firm to make and document appropriate considerations regarding nonconforming engagements as a condition of acceptance of the peer review. The firm response may affect other monitoring actions the committee may impose, including actions to verify that the firm adheres to the intentions indicated in its response.</p>	<p data-bbox="1606 833 1959 935">First sentence covered in 220.23 (see mapping of extant par. 99-1)</p>

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p><i>Interpretation</i>—Reviewers or administering entities should not instruct firms to perform omitted procedures, reissue accounting or auditing reports, or have previously issued financial statements revised and reissued because those are decisions for the firm and its client to make. However, the administering entity can require the firms to make and document appropriate considerations regarding such engagements as a condition of acceptance of the peer review. The firm’s response may affect other monitoring actions the administering entity’s peer review committee may impose, including actions to verify that the firm adheres to the intentions indicated in its response.</p> <p>If the firm has taken action, ordinarily the review team should review documentation of such actions (for example, omitted procedures performed, reissued report and financial statements, or notification to users to discontinue use of previously issued reports) and consider whether the action is appropriate. If the firm has not taken action, the review team should consider whether the planned actions are appropriate (genuine, comprehensive, and feasible).</p> <p>On a System Review, the team captain should consider expanding scope to determine the pervasiveness of the nonconforming</p>	<p>210.62 c. If the firm has taken action, the reviewer should review documentation of actions taken and consider whether the action is appropriate.</p> <p>320.15 The firm’s draft responses should be provided to the review captain as soon as possible after the closing meeting to allow the review captain enough time to assess the firm’s response prior to the exit conference. (Ref: par. .A15)</p> <p>210.A56 & 220.A16 & 320.A13 & 310.A18 Examples of actions a firm may take in response to nonconforming engagements include, but are not limited to</p> <ul style="list-style-type: none"> a. Omitted procedures performed (including documentation) b. Reissued report and financial statements c. Notification to users to discontinue use of previously issued reports 	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>engagements. The extent of the nonconforming engagements is considered when determining the systemic cause and whether the matter should be elevated to a finding, deficiency, or significant deficiency.</p> <p>Refer to paragraphs .68 and .84 of the standards for additional guidance on assessing when to expand scope and when matters may be isolated. Refer to Interpretation 100-1 for additional guidance for the evaluation of a firm’s response.</p>		
<p>Aggregating and Evaluating Matters</p>	<p>Aggregating and Evaluating Matters</p>	
<p>79-1</p> <p><i>Question</i>—Paragraph .79 of the standards indicates that in the absence of findings or deficiencies in the engagements reviewed, the reviewer may still conclude that there are conditions in the design of the firm’s system of quality control that could create a situation in which the firm would not have reasonable assurance of performing or reporting in conformity with applicable professional standards. When would a design matter or compliance with a functional area, by itself,</p>	<p>210.A48 A design or compliance matter, by itself, may result in a peer review rating of pass with deficiencies or fail when one or more conditions are present in the firm’s system of quality control and the reviewer has concluded that the conditions could create a situation in which the firm would not have reasonable assurance of performing or reporting in conformity with applicable professional standards in one or more respects. Examples include, but are not limited to the following:</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>result in a peer review rating of pass with deficiencies or fail?</p> <p><i>Interpretation</i>—A design matter or compliance with a functional area, by itself, may result in a peer review rating of pass with deficiencies or fail when one or more conditions are present in the firm’s system of quality control and the reviewer has concluded that the conditions could create a situation in which the firm would not have reasonable assurance of performing or reporting in conformity with applicable professional standards in one or more respects.</p> <p>a. Examples may include but are not limited to the failure to establish or comply with policies and procedures designed to provide the firm with reasonable assurance that the internal culture is based on recognition that quality is essential in performing engagements. This may be identified by firm leadership failure to have a quality control document, failure to appropriately respond to findings in a regulatory investigation, failure to have a timely peer review, and so on.</p> <p>b. the firm and its personnel comply with relevant ethical requirements. This</p>	<p>a. Failure to establish or comply with quality control policies and procedures designed to provide the firm with reasonable assurance that the internal culture is based on recognition that quality is essential in performing engagements. This may be evidenced by the lack of a quality control document, failure to appropriately respond to findings in a regulatory investigation, or failure to have a timely peer review.</p> <p>b. Failure to comply with relevant ethical requirements. This may be evidenced by failure to obtain independence confirmations from all personnel, failure to inform personnel on a timely basis of changes to the list of clients and related entities, or failure to address potential breaches of independence.</p> <p>c. Failure of the firm to undertake or continue relationships and engagements only when the firm is competent to perform the engagements. This may be evidenced by failure to have policies and procedures in place to require evaluation of the nature of the services to be provided, evaluation of the firm’s resources to provide the services, or evaluation of the need to engage a third party to assist in new industries.</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>may be identified by failure to obtain independence confirmations from all personnel, failure to inform personnel on a timely basis of changes to the list of clients and related entities, failure to address potential breaches of independence, and so on.</p> <p>c. the firm will undertake or continue relationships and engagements only when the firm is competent to perform the engagements. This may be identified by failure to have policies and procedures in place to require evaluation of the nature of the services to be provided, evaluation of the firm's resources to provide the services, evaluation of the need to engage a third party to assist in new industries, and so on.</p> <p>d. the firm has sufficient personnel with the competence, capabilities, and commitment to ethical principles necessary to perform engagements in accordance with professional standards. This may be identified by failure to have policies and procedures requiring personnel to maintain a CPA license, comply with industry specific CPE requirements, ensure appropriate</p>	<p>d. Failure of the firm to have personnel with the competence, capabilities, and commitment to ethical principles necessary to perform engagements in accordance with professional standards. This may be evidenced by failure to have policies and procedures requiring personnel to maintain a CPA license, comply with industry-specific CPE requirements, or ensure appropriate industry experience on engagement teams.</p> <p>e. Failure of the firm to comply with monitoring of the firm's system of quality control. This may be identified by lack of monitoring of appropriate CPE for all firm personnel, lack of monitoring of all elements of the firm's system of quality control in the firm's peer review year, or failing to appropriately respond to issues identified during engagement inspection.</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>industry experience on engagement teams, and so on.</p> <p>e. the firm’s compliance with all areas of the firm’s system of quality control is effectively monitored. This may be identified by lack of monitoring of appropriate CPE for all firm personnel, lack of monitoring of functional areas in the firm’s peer review year, failing to appropriately respond to issues identified during engagement inspections, and so on.</p>		
<p>Determining Whether There is a Systemic Cause</p>	<p>Determining Whether There is a Systemic Cause</p>	
<p>83-1</p> <p><i>Question</i>—Paragraph .83 of the standards notes that when a review team is faced with an indication that a matter(s) could be a finding, the review team’s first task in such circumstances, in collaboration with the firm, is to determine the systemic cause. Why?</p> <p><i>Interpretation</i>—The evaluation of a firm’s system of quality control is the primary</p>	<p>210.A37 Matters may be symptoms of weaknesses in the firm’s system of quality control.</p> <p>210.A38 The ”no” answers identified when completing peer review checklists for the review and testing of quality control policies and procedures are a helpful resource for reviewers to assess the systemic cause.</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>objective of a System Review and the basis for the peer review report.</p> <p>As such, when a reviewer in a System Review discovers a matter, including an engagement that was not performed or reported in conformity with applicable professional standards in all material respects, he or she should avoid considering the type of report to issue until the systemic cause of the matter (to determine if it rises to the level of a finding, deficiency or significant deficiency) is identified, where it is reasonably possible to do so.</p> <p>Reviewers in a System Review must think of matters as symptoms of weaknesses in the firm’s system of quality control. Further, reviewers, in collaboration with the firm, must make a good faith effort to try to identify the systemic cause for those matters to determine if they rise to the level of a finding. A finding has a systemic definition; a finding is one or more related matters that result from a <i>condition</i> in the reviewed firm’s system of quality control or compliance with it such that there is more than a remote possibility that the reviewed firm would not perform or report in conformity with applicable professional standards. With a finding, the reviewer is considering more than just the “matter;” they are considering the condition (that is, systemic</p>	<p>210.A39 Separate matters that are exactly the same may result from different weaknesses in the firm’s system of quality control. Likewise, separate matters that are different may result from the same weakness in the firm’s system of quality control.</p> <p>210.47 If the firm’s response during the discussion and determination of the systemic cause of a matter is that the matter resulted from an “oversight” or was “isolated,” the reviewer should investigate further. Refer to paragraphs. .48 and .49 under “Isolated Matters” for additional procedures the reviewer should perform.</p> <p>310.13 Responses to matters, findings, deficiencies, or significant deficiencies should include an assessment of the systemic cause, which should provide enough detail for the reviewer to understand how the firm arrived at its conclusion.</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>cause) that resulted in the matter(s) occurring. Otherwise said, the reviewer must determine why the matters occurred. Upon further evaluation, a finding may rise to a systemically oriented deficiency or significant deficiency.</p> <p>The system risks identified as part of the completion of the <i>Guidelines for Review and Testing of Quality Control Policies and Procedures</i> (sections 4500 to 4650) will be a helpful resource for reviewers in assessing the systemic cause. The assessment of the systemic cause should consider that separate matters that are exactly the same may result from completely different quality control weaknesses in the firm.</p> <p>To properly assess the systemic cause, reviewers should not accept “oversight” or “isolated” as the firm’s response without further investigation. Accordingly, the firm should provide sufficient detail for the reviewer to understand what caused the matter. For example, the failure to follow the firm’s practice aid for a particular area may have been an isolated occurrence; however, failure to follow the practice aid would still be identified as the systemic cause resulting in the matter. Further guidance is provided in</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>Interpretation 84-1 to assist reviewers in determining if the matter is isolated.</p>		
<p>83-2</p> <p><i>Question</i>—For System Reviews and Engagement Reviews, what is considered a repeat finding on a finding for further consideration (FFC) form?</p> <p><i>Interpretation</i>—On System Reviews, a repeat finding is one or more related matters that result from a condition in the reviewed firm’s system of quality control or compliance with it that is noted during the current review and also on a FFC form in the prior peer review. The review team should read the prior review documentation, including the report, letter of response and FFC forms, if applicable, and evaluate whether the firm’s planned actions noted on those forms were implemented. If the firm’s planned actions to remediate the prior review findings were implemented, and the same finding is occurring, the review team should determine the condition in, or compliance with, the firm’s system of quality control that caused the current finding. If it is determined to be the same systemic cause, the FFC form should indicate that similar findings were noted in the prior review. The review team should also consider whether there are</p>	<p>210.57 When the same systemic cause identified in the prior review is also identified in the current review, the reviewer should determine if a repeat finding, deficiency, or significant deficiency exists. To make this determination, the reviewer should review the results of the reviewer’s planning procedures to determine if the firm implemented their planned actions documented in the prior review’s FFCs or letter of response, as applicable. If the actions were implemented, the reviewer should</p> <ul style="list-style-type: none"> a. consider if the actions taken were appropriate to remediate the weakness in the firm’s system of quality control, and b. reconsider if the same weakness from the prior review is causing the current finding, deficiency, or significant deficiency. <p>210.58 If a repeat finding, deficiency, or significant deficiency is identified, it should be documented as such in the FFC or report, as applicable.</p>	<ul style="list-style-type: none"> • Definition covered in mapping of extant interpretation 96n-1. • Additional guidance not considered necessary.

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>findings in other elements of quality control. If the prior remedial actions (corrective actions, implementation plans, or as discussed in the firm's response on the FFC form) appear to be effective, the finding may be caused by some other condition in, or compliance with, the firm's system of quality control. If the systemic cause of the finding is different from that noted in the prior review, it would not be a repeat.</p> <p>See section 3100 for an example of identifying repeat findings, deficiencies and significant deficiencies in a System Review.</p> <p>On Engagement Reviews, a repeat is one in which the identified finding is substantially the same (that is, the same kind or very similar) as noted on a FFC form in the prior peer review as it relates to reporting, presentation, disclosure or documentation. For example, if a reviewer notes an engagement that had a disclosure or financial statement presentation finding on a FFC form in the prior peer review, the disclosure or financial statement presentation finding noted in the current review would need to be substantially the same disclosure or financial statement presentation finding to qualify as a repeat.</p> <p>A firm that repeatedly receives peer reviews with consistent findings that are not corrected</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>may be required to complete an implementation plan.</p>		
<p>83-3</p> <p><i>Question</i>—Paragraph .83 of the standards notes the importance of determining the systemic cause of the identified findings. How do the results of regulatory or governmental oversight or inspection factor into this determination?</p> <p><i>Interpretation</i>—If similar issues were raised in both the regulatory or governmental oversight(s) and in the peer review, the review team should further understand the systemic causes identified by the reviewed firm and consider whether there may be a systemic issue related to the design of the system of quality control or compliance with it. See Interpretations 40-1 and 40-2 for additional considerations.</p>	<p>210.46 If the firm underwent regulatory or governmental oversight or inspection, and similar issues were raised in both the regulatory or governmental oversights and in the peer review, the reviewer should further understand the systemic causes identified by the reviewed firm and consider whether there may be a systemic issue related to the design of or compliance with the system of quality control.</p>	
<p>Isolated Matters in a System Review</p>		
<p>84-1</p> <p><i>Question</i>—Paragraph .84 refers to isolated matters in a System Review. What is an</p>	<p>100.11 Isolated matter. An incident (or limited incidents) of noncompliance with professional standards or the firm’s quality control policies and procedures on one or more engagements (or</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>isolated matter and what further guidance is there to address isolated matters?</p> <p><i>Interpretation</i>—An isolated matter occurs when there is an incident (or limited incidents) of noncompliance with professional standards or the firm’s quality control policies and procedures on one or more engagements (or aspect of a functional area) and the identical standards or policies and procedures were complied with on the remaining engagements or aspect of a functional area.</p> <p>Reviewers should follow the guidance in paragraph .68, “Expansion of Scope,” and paragraphs .84–.85, “Determining the Systemic Cause,” of the standards. The reviewer needs to evaluate the pervasiveness of the issue, including expanding scope if necessary. In some instances the team captain should expand scope to other engagements or aspects of functional areas, and determine that such matters did not occur elsewhere, thus evidencing that the noncompliance with the firm’s system of quality control was truly isolated. In these situations, team captains should focus on the systemic cause of the matter when analyzing if it is isolated and may consider a key area approach when expanding scope to other engagements or aspects of functional areas to determine if the matter is isolated. The reviewer’s ability to</p>	<p>elements of the quality control system), but the same standards or policies and procedures were complied with on the remaining selected engagements or elements. (Ref: par. .A22)</p> <p>100.A22 More than one incident of noncompliance may still be considered isolated, if the reviewer is able to conclude there is no systemic cause and such instances of noncompliance are insignificant to the reviewer’s evaluation of the firm’s system of quality control.</p> <p>210.48 If a matter is identified as isolated, the reviewer should follow the guidance in the section, “Expansion of Scope ” and “Determination of the Systemic Cause.” The reviewer should evaluate the pervasiveness of the issue, including expanding the scope if necessary, to provide evidence that the noncompliance with the firm’s system of quality control was truly isolated. Reviewers should focus on the systemic cause of the matter when analyzing whether it is isolated. (Ref: par. .A41–.A42)</p> <p>210.A41 The reviewer’s ability to conclude that a matter is isolated may be dependent on the reviewer’s ability to expand the scope to engagements or elements that are classified by common characteristics such as, but not limited to, the industry, level of service, the practitioners in charge, or must-select engagements.</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>conclude a matter is isolated may be dependent on his or her ability to expand scope to engagements or aspects of functional areas that are classified by common characteristics such as, but not limited to, the industry, level of service, the practitioners in charge, or engagements that must be selected in a peer review.</p> <p>The reviewer should consider that a single disclosure matter and a single documentation matter may be isolated when taken individually but they may have resulted from the same systemic cause. They should further consider that an isolated matter may be materially significant in amount or nature or both.</p> <p>Reviewers should document their consideration of an isolated matter and the conclusions reached in the MFC form. Team captains should document the same in the Summary Review Memorandum. The documentation should include the details of the matter noted, how the reviewer expanded scope, if applicable, and why the reviewer concluded the matter was isolated. The documentation should provide enough information for the administering entity's peer review committee to determine if the team captain's conclusion is appropriate.</p>	<p>210.A42 A matter is not isolated if there is only one instance available for the reviewer to evaluate.. For example, if the matter relates to noncompliance with professional standards regarding employee benefit plans and the firm only performs only one employee benefit plan engagement, then the matter would not be considered isolated.</p> <p>210.A45 An isolated matter or instance of noncompliance with the firm's system of quality control may be elevated to a finding, deficiency, or significant deficiency when evaluated with the review's other matters (in the aggregate). For example, a single disclosure matter and a single documentation matter may be isolated when taken individually, but they may have resulted from the same systemic cause, or an isolated matter may be materially significant in amount or nature, or both.</p> <p>210.49 Reviewers should document their considerations regarding an isolated matter, including, at a minimum,</p> <p><i>a.</i> the details of the matter noted;</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
	<p><i>b.</i> how the reviewer expanded scope, if applicable; and</p> <p><i>c.</i> why the reviewer concluded the matter was isolated.</p> <p><i>d.</i> The documentation should provide enough information for the administering entity’s peer review committee to determine whether the conclusion is appropriate. (Ref: par. .A43)</p> <p>210.A44 Considerations of an isolated matter may be documented in the related MFC, Disposition of Matters for Further Consideration (DMFC) form, or Summary Review Memorandum.</p>	
<p>Communication Requirements for Closing Meeting and Exit Conference</p>	<p>Communication Requirements for Closing Meeting and Exit Conference</p>	
<p>91-1</p> <p>Question—Paragraphs .91–.92 and .115 of the standards instruct peer reviewers on communicating conclusions at the closing meeting and exit conference. What other guidelines should be followed?</p> <p>Interpretation—The peer reviewer should consider the need to have the team member(s)</p>	<p>220.A11 Team members or specialists may participate in or be available for the closing meeting and exit conference. This may be useful when the review captain does not have the experience to review the industry of an engagement that was reviewed by a team member.</p> <p>210.61 The team captain should consider the need to have the team members participate or be</p>	<ul style="list-style-type: none"> • For engagement reviews, left as a general application guidance b/c there typically aren’t team members • Last sentence covered in mapping of extant par. 92

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>participate or be available for consultation (in person or via teleconference) during the closing meeting or exit conference, especially when, in unusual circumstances, the team or review captain does not have the experience to review the industry of an engagement that was reviewed by the team member.</p> <ul style="list-style-type: none"> · Furthermore, for System Reviews, the closing meeting and exit conference are not the appropriate place or time to surprise the firm with the intention of issuing a pass with deficiency or fail re-report or to discuss any unresolved accounting and auditing issues. It is expected that the team captain will have an open means of communication with various levels of personnel leading up to the closing meeting, having at a minimum and as applicable, promptly informed them when an engagement is not performed or reported on in conformity with applicable professional standards; · discussed MFC and FFC forms including the systemic causes and related remedial actions of the firm for any matters, findings, deficiencies, and significant deficiencies in advance; and · followed up on open questions and issues. 	<p>available for consultation (in person or via teleconference) during the closing meeting or exit conference, especially when, in unusual circumstances, the team captain does not have the experience to review the industry of an engagement that was reviewed by the team member. (Ref: par. .A53)</p> <p>210.A53 If the engagement was reviewed by a specialist, it may be beneficial for the specialist to be available for or participate in the exit conference.</p> <ul style="list-style-type: none"> · <p>210.60 The closing meeting should be held within a reasonable timeframe before the firm's due date to allow enough time for the firm to determine appropriate remediation with respect to findings, deficiencies, and significant deficiencies, if applicable. (Ref: par. .A52)</p> <p>210.A52 A reasonable timeframe is typically 30 days.</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>The closing meeting should ordinarily occur at least 30 days prior to the firm’s due date to allow sufficient time for the firm to determine appropriate remediation with respect to findings, deficiencies, and significant deficiencies, if applicable. The exit conference should be used as a time to communicate the final results of the peer review and should only be conducted after the peer reviewer has assessed the appropriateness of the firm’s responses on the MFC forms, FFC forms, and letter of response, if applicable.</p>	<p>220.25 The closing meeting should be held within a reasonable timeframe before the firm’s due date to allow enough time for the firm to determine appropriate remediation with respect to findings, and deficiencies, if applicable. (Ref: par. .A13)</p> <p>220.A13 A reasonable timeframe is typically 30 days.</p>	
<p>91-2</p> <p><i>Question</i>—Paragraphs .91 and .115 of the standards states the reviewer should discuss matters, findings, deficiencies and significant deficiencies with the firm at the closing meeting. Does the reviewer need to document these items on MFC Forms, FFC Forms, and in the report, respectively, prior to the closing meeting or can that be performed subsequent to the closing meeting?</p> <p><i>Interpretation</i>—Prior to and during the closing meeting, the reviewer should provide the firm with the details supporting why a</p>		Removed

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>matter, finding, deficiency or significant deficiency have been identified. However, the documentation of these items on MFC forms, FFC forms, and in the report may occur after the closing meeting. The reviewer should ensure that the forms and deficiency descriptions are provided to the firm with sufficient time for the firm to document its response and for the reviewer to assess that response prior to the exit conference.</p>		
<p>Notification and Submission of Peer Review Documentation to the Administering Entities by the Team Captain or Review Captain</p>		
<p>94-1</p> <p><i>Question</i>—Paragraphs .94, .120, and .190 of the standards instruct a reviewer to see the interpretations for guidance on notification requirements and submission of peer review documentation to the administering entity. What materials should be submitted by the team captain or review captain, and when should they be submitted by?</p>	<p>220.34 Within 30 days of the exit conference date or by the firm’s peer review due date, whichever date is earlier, the review captain should submit to the administering entity or complete electronically, as applicable, the following documents: (Ref: par. .A28)</p> <ul style="list-style-type: none"> a. Report and letter of response, if applicable b. Review Captain Summary 	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p><i>Interpretation</i>—The team captain or review captain should notify the administering entity that the review has been performed. Within 30 days of the exit conference date or by the firm’s peer review due date, whichever date is earlier, the team captain should submit the following documentation to the administering entity.</p> <p><i>For System and Engagement Reviews:</i></p> <ul style="list-style-type: none"> a. Report and letter of response, if applicable b. Summary Review Memorandum, or Review Captain Summary, as applicable c. Engagement Summary Form (For Engagement Reviews) d. FFC forms, as applicable e. MFC forms, submitted electronically or hard copy, as applicable f. DMFC form, submitted electronically or hard copy, as applicable g. Firm’s representation letter h. Section 22100—Part A, <i>Supplemental Checklist for Review of Single Audit</i> 	<ul style="list-style-type: none"> c. Review summary d. FFCs, if applicable e. MFCs, if applicable f. DMFC, if applicable g. Firm’s representation letter <p>210.71 Within 30 days of the exit conference date or by the firm’s peer review due date, whichever date is earlier, the team captain should complete electronically and submit to the administering entity, as applicable, the following documents: (Ref: par. .A66)</p> <ul style="list-style-type: none"> a. Report and letter of response, if applicable b. Summary Review Memorandum c. FFCs, if applicable d. MFCs, if applicable e. DMFC, if applicable f. Firm’s representation letter g. Engagement profiles and supplemental checklists for reviews of engagements subject to the Single Audit Act and the Uniform Guidance, if applicable h. Explanation of “No” answers for quality control checklists 	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p><i>Act/A-133 Engagements, or Section 22100—Part A—UG, Supplemental Checklist for Review of Single Audit Engagements (Uniform Guidance), and engagement profile(s) for single audit engagements reviewed (if applicable) (for System Reviews)</i></p> <p><i>i. Appendix A “Explanation of No Answers” for the PRPM Section 4500 or 4600 “Guidelines for Review of Quality Control Policies and Procedures” and 4550 or 4650 “Guidelines for Testing Compliance with Quality Control Policies and Procedures”</i></p> <p><i>For all reviews administered by the National PRC, as applicable:</i></p> <p><i>a. All of the documents required to be submitted for System Reviews and Engagement Reviews</i></p> <p><i>b. Engagement questionnaires or checklists</i></p> <p><i>c. Quality control documents and related practice aids</i></p> <p><i>d. Staff and focus group interview forms</i></p>	<p>For all reviews administered by the National PRC, the team captain should submit the following additional documents, as applicable:</p> <p><i>i. All documents required to be submitted for system reviews</i></p> <p><i>j. Engagement questionnaires or checklists</i></p> <p><i>k. Quality control documents and related practice aids</i></p> <p><i>l. Staff and focus group interview forms</i></p> <p><i>m. Planning documents</i></p> <p><i>n. Any other documents considered relevant by the team captain</i></p> <p>210.A66 & 220.A28 All peer review working papers are subject to oversight procedures and may be requested later.</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p><i>e.</i> Planning documents</p> <p><i>f.</i> Any other relevant documents</p> <p>Note that all peer review working papers are subject to oversight procedures and may be requested at a later date.</p> <p>Peer review working papers may be submitted to the administering entity electronically.</p>		
<p>Reporting on System and Engagement Reviews When a Report With a Peer Review Rating of Pass With Deficiency or Fail Is Issued</p>		
<p>96n-1</p> <p><i>Question</i>—Paragraphs .96(n) and .122(n) of the standards instruct a team captain in a System Review (or review captain on an Engagement Review) to identify, for any deficiencies or significant deficiencies included in the report with a peer review rating of <i>pass with deficiencies</i> or <i>fail</i>, any that were also made in the report issued on the firm’s previous peer review. What further guidance is available in regards to this requirement?</p>	<p>100.11 Repeat finding, deficiency, or significant deficiency (system reviews). A finding, deficiency, or significant deficiency identified during the current review that has the same systemic cause identified in the prior review’s FFC or report. (Ref: par. 100.A27)</p> <p>100.A27 The words used to describe the systemic cause are not indicative of whether it is a repeat</p>	<ul style="list-style-type: none"> • Report requirements include the verbiage in this interpretation. • Added the plural reference in a footnote. • noncooperation covered in other paragraphs in PR-C section 300. • Covered the remainder in mapping of extant interp 83-2.

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p><i>Interpretation</i>—On System Reviews, a repeat is a deficiency or significant deficiency noted during the current review that was caused by the same system of quality control weakness noted in the prior review’s report. The review team should read the prior report and letter of response and evaluate whether corrective actions discussed have been implemented to determine whether the systemic cause is the same. The deficiency or significant deficiency should note that “This deficiency [or significant deficiency, as applicable] was noted in the firm’s previous peer review.”</p> <p>If the corrective actions have been implemented and the same deficiency or significant deficiency is occurring, the review team, in collaboration with the firm, should determine the weakness in the firm’s system of quality control that is causing the deficiency or significant deficiency to occur. In this case, if the prior corrective actions appear to be effective, the deficiency or significant deficiency may be caused by some other weakness in the firm’s system of quality control. If the systemic cause of the deficiency or significant deficiency is different from that reported in the prior review, it would not be a repeat.</p> <p>The preceding also applies when the deficiency or significant deficiency noted</p>	<p>finding, deficiency, or significant deficiency and professional judgement will be used to conclude whether the systemic cause is repeated.</p> <p>100.11 Repeat finding or deficiency (engagement reviews). An engagement finding or deficiency that is the same as noted in the prior review. (Ref: par .A26)</p> <p>100.A26 As an example, omitting the same exact disclosure in an engagement selected in the previous peer review and in an engagement selected in the current peer review would constitute a repeat finding or deficiency. Omitting one disclosure in an engagement selected in the previous peer review and omitting an entirely different disclosure in an engagement selected in the current peer review would not constitute a repeat finding or deficiency.</p>	<ul style="list-style-type: none"> • See further explanation in the exposure draft explanatory memo regarding “Removal of the term “Significant Deficiency” in Engagement reviews”

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>during the current review was caused by the same system of quality control weakness noted on a FFC form in the prior review. The team captain should consider if the firm’s planned actions to remediate the prior review findings were implemented, including implementation plans or those discussed in the firm’s response on the FFC form. If the prior remedial actions appear to be effective, the current deficiency may be caused by some other weakness in or compliance with the firm’s system of quality control. If the systemic cause of the deficiency is different from that noted in the prior review, it would not be a repeat. If the systemic cause is determined to be the same, under these circumstances, it would still be appropriate to use the same wording as previously described “This deficiency [or significant deficiency, as applicable] was noted in the firm’s previous peer review.” If the systemic cause is the same, the review team should also consider whether there are deficiencies in other elements of quality control.</p> <p>See section 3100, <i>Supplemental Guidance</i>, for an example of identifying repeat findings, deficiencies and significant deficiencies in a System Review.</p> <p>On Engagement Reviews, a repeat is one in which the identified engagement deficiency or</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>significant deficiency is substantially the same (that is, the same kind or very similar) as noted in the prior review’s report as it relates to reporting, presentation, disclosure or documentation. For example, if a reviewer notes an engagement that had a disclosure or a financial statement presentation deficiency in a prior review’s report, the disclosure or financial statement presentation deficiency noted in the current review would need to be substantially the same disclosure or financial statement presentation deficiency to qualify as a repeat.</p> <p>The preceding also applies when the deficiency or significant deficiency noted during the current review was substantially the same as was noted on a FFC form in the prior review. Under these circumstances, it would still be appropriate to use the same wording as previously described: “This deficiency [or significant deficiency, as applicable] was noted in the firm’s previous peer review.”</p> <p>For System Reviews and Engagement Reviews in which there are repeat deficiencies or significant deficiencies that have occurred on two or more prior reviews the reviewer should state in the current report that, “this</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>deficiency [or significant deficiency, as applicable] was noted on previous reviews.”</p> <p>A firm that repeatedly receives peer reviews with consistent deficiencies or significant deficiencies that are not corrected may be deemed as a firm refusing to cooperate. For such firms that fail to cooperate, the AICPA Peer Review Board may decide, pursuant to fair procedures that it has established, to appoint a hearing panel to consider whether the firm’s enrollment in the AICPA peer review program should be terminated or some other action taken. Therefore, it is critical that peer reviewers appropriately identify the systemic causes of deficiencies and significant deficiencies on System Reviews and that reporting on System and Engagement Reviews is appropriate.</p>		
<p>96p-1</p> <p><i>Question</i>—Paragraphs .96(p) and .122(n) of the standards instruct the peer reviewer to include, for reports with a peer review rating of <i>pass with deficiency(ies)</i> or <i>fail</i>, descriptions of the deficiencies or significant deficiencies. What is the treatment of FFCs, if any, when these reports are issued, and how</p>		Removed

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>are deficiencies treated for reports with a peer review rating of fail?</p> <p><i>Interpretation</i>—Any findings that are only raised to the level of a FFC remain in a FFC and are not included in a report with a peer review rating of <i>pass with deficiency</i> or <i>fail</i>.</p> <p>A <i>significant deficiency</i> in a System Review is one or more <i>deficiencies</i> that the peer reviewer has concluded results from a condition in the reviewed firm’s system of quality control or compliance with it such that the reviewed firm’s system of quality control taken as a whole does not provide the reviewed firm with reasonable assurance of performing or reporting in conformity with applicable professional standards in all material respects. Such <i>deficiencies</i> are communicated in a report with a peer rating of <i>fail</i>. Therefore, this is a systemic approach to determining whether the <i>deficiencies</i> identified meet this <i>significant deficiency</i> threshold. If they do, then a report with a peer review rating of <i>fail</i> is issued and <i>all</i> of the <i>deficiencies</i> are considered <i>significant deficiencies</i> and are identified as such. Such a report would not have a section with “Significant Deficiencies Identified in the Firm’s System of Quality Control” and another section for “Deficiencies Identified in the Firm’s System of Quality Control,”</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>because they would all be categorized as <i>significant deficiencies</i>.</p> <p>A <i>significant deficiency</i> on an Engagement Review exists when the review captain concludes that <i>deficiencies</i> are evident on all of the engagements submitted for review. Such <i>deficiencies</i> are communicated in a report with a peer review rating of <i>fail</i>. Therefore, on an Engagement Review, all of the engagements reviewed are considered concerning whether <i>deficiencies</i> were noted when determining if the <i>significant deficiency</i> threshold is met. If they do, then a report with a peer review rating with <i>fail</i> is issued and <i>all</i> of the <i>deficiencies</i> are considered <i>significant deficiencies</i> and are identified as such. Such a report would not have a section with “Significant Deficiencies Identified on the Firm’s Conformity With Professional Standards on Engagements Reviewed” and another section for “Deficiencies Identified on the Firm’s Conformity With Professional Standards on Engagements Reviewed, if applicable,” because they would all be categorized as <i>significant deficiencies</i>.</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
Firm Responses in a System or Engagement Review		
<p>97-1</p> <p><i>Question</i>—Paragraphs .97 and .123 of the standards discuss the team captain or review captain’s responsibility to review, evaluate, and comment on the reviewed firm’s letter of response prior to its submission to the administering entity. What should be considered during that review?</p> <p><i>Interpretation</i>—The purpose of the letter of response is for a firm to stipulate, in writing, the specific action(s) that will be taken to correct deficiencies noted by the reviewer and, on a System Review, to enhance the current system of quality control. The description of the action(s) the firm has taken or will take should ensure prevention of recurrence of the deficiency or significant deficiency discussed in the report. The action(s) should be feasible, genuine, and comprehensive. The letter of response should not be vague or repetitive of the deficiency or significant deficiency in the report, because then it is difficult to determine if the planned action will be appropriately implemented to ensure prevention; or if the action is</p>		<p>Removed as is covered in requirements of applicable PR-C sections</p>

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>inappropriate for correcting the deficiency or significant deficiency. The letter of response should not be used as a place to indicate justification for the firm’s actions that related to the deficiency or significant deficiency.</p>		
<p>Firm Responses and Related Team or Review Captain Considerations</p>		
<p>99-1</p> <p><i>Question</i>—Paragraphs .99 and .125 state that it is the firm’s responsibility to identify the appropriate remediation of any findings, deficiencies and significant deficiencies and to appropriately respond. Should the team or review captain assist with this assessment?</p> <p><i>Interpretation</i>—Although it is ultimately the firm’s responsibility, the team or review captain and firm may collaborate to determine the response. In a System Review, the response will address the appropriate systemic cause and remedial actions. The team captain should provide information about risks in the firm’s system of quality control (as identified through the <i>Guidelines for Review and Testing</i></p>	<p>220.A8 & 320.A11 Although it is ultimately the firm’s responsibility, the review captain and firm may collaborate to determine what remediation is necessary in the circumstances. Review captains or administering entities should not require firms to perform omitted procedures, reissue accounting reports, or have previously issued financial statements revised and reissued because those are decisions for the firm and its client to make.</p> <p>210.A32 Although it is ultimately the firm’s responsibility, the team captain and firm may collaborate to determine the remediation.</p> <p>210.40 Team captains or administering entities should not require firms to perform omitted procedures, reissue accounting or auditing reports,</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p><i>of Quality Control Policies and Procedures in sections 4500 to 4650).</i></p>	<p>or have previously issued financial statements revised and reissued because those are decisions for the firm and its client to make. The team captain should provide information about risks in the firm’s system of quality control (as identified through the review and testing of quality control policies and procedures).</p>	
<p>99-2</p> <p><i>Question</i>—Paragraphs .99 states that the firm’s response should include remedial action and paragraph.98 states that the firm’s response should be provided to the team captain as soon as practicable to allow the team captain sufficient time to assess the firm’s response prior to the exit conference. How should the reviewed firm respond if it is unable to determine appropriate remedial actions prior to the exit conference?</p> <p><i>Interpretation</i>—If the reviewed firm is unable to determine appropriate remediation of weaknesses in its system of quality control and nonconforming engagements, if applicable, prior to the exit conference, the firm’s response should indicate interim steps that have been taken and confirm its intent to remediate when an appropriate response is</p>	<p>310.A20 If the firm is unable to determine appropriate remediation of weaknesses in its system of quality control and nonconforming engagements, if applicable, prior to the exit conference, the firm’s response may indicate interim steps that have been taken and confirm its intent to remediate when an appropriate response is determined. In these situations, the RAB considering the review will ordinarily assign an implementation plan or corrective action for the firm to provide its final remediation.</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>determined. In these situations, the RAB considering the review will ordinarily assign an implementation plan or corrective action for the firm to provide its final remediation.</p>		
<p>100-1</p> <p><i>Question</i>—Paragraphs .100 and .127 of the standards discuss the team captain or review captain’s responsibility to review and evaluate the reviewed firm’s responses on the FFC form and in the letter of response prior to submission to the administering entity with the peer review working papers. What should be considered during that review?</p> <p><i>Interpretation</i>—The purpose of the firm’s response on the FFC form and in the letter of response is for a firm to stipulate, in writing, the specific action(s) that will be taken to correct findings and deficiencies noted by the reviewer and, on a System Review, to enhance the current system of quality control. In a System Review, the description of the action(s) the firm has taken or will take should discuss remediation of findings and deficiencies in the system of quality control and nonconforming engagements, if applicable, to ensure prevention of recurrence of the finding, deficiency or significant deficiency. For System and Engagement</p>	<p>210.A54 & 220.14 & 320.A12 & 310.A14</p> <p>The purpose of the firm’s response on the FFC or in the letter of response is for a firm to document the specific actions that will be taken to correct findings, deficiencies, and significant deficiencies noted by the reviewer.</p>	<p>Removed the remainder b/c covered in the requirements or N/A.</p> <p>See further explanation in the exposure draft explanatory memo regarding “Removal of the term “Significant Deficiency” in Engagement reviews”</p>

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>Reviews, the action(s) should be feasible, genuine, and comprehensive, addressing each of the requirements in paragraphs .99 and .125. The FFC form and letter of response should not be used as a place to indicate justification for the firm’s actions that related to the deficiency or significant deficiency. If the firm’s response is not deemed to be comprehensive, genuine, and feasible, the technical reviewer or RAB will request a revised response.</p> <p>In a System Review, a firm’s failure to appropriately remediate findings, deficiencies, and nonconforming engagements is a strong indicator of a tone at the top weakness and the team captain should consider whether a related deficiency is appropriate. Reviewers are reminded that firms are only required to remediate as appropriate in accordance with professional standards and are not expected to recall reports or perform additional procedures in every scenario. In general, if firms can articulate their consideration of the professional standards and why the actions taken or planned are deemed appropriate by the team captain, it would not result in a tone at the top deficiency. Firms are discouraged from defaulting to a response of “we’ll fix it on the next engagement” without thought behind that response. It may be the appropriate response but firms should be able</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>to articulate why that is the appropriate response.</p> <p>If after consideration of the firm’s response, the team captain determines that there are other systemic issues such as tone at the top, he or she should not avoid addressing the issues, even if it puts the reviewer in an adversarial position. The team captain may consult with the administering entity or AICPA for support in how the issues should be addressed. Guidance on tone at the top and reporting examples within the Standards, Section 3100, <i>Supplemental Guidance</i>, and Section 4250, <i>Guidance for Writing Deficiencies and Significant Deficiencies Included in System Review Reports</i>, will assist the reviewer with supporting his or her conclusions. If a firm disagrees with the conclusions, the disagreement guidance in paragraph .93 and .116 of the Standards should be followed.</p>		
<p>Election to Have a System Review</p>		
<p>103-1 Question—Paragraph .103 of the standards notes that firms eligible to have an Engagement Review may elect to have a System Review. What</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>tailoring is required to the peer review report under these circumstances?</p> <p>Interpretation—Under these circumstances, any references in the peer review report to “the accounting and auditing practice” should be tailored to refer only to “the accounting practice.” In addition, the following sentence should be added: “Firm XYZ & Co. has represented to us that the firm did not perform engagements that would require a system review.”</p>	<p>210.69 If a firm that is not required to have a system review, elects to have one in accordance with paragraph .A1 of section 220, <i>General Principles and Responsibilities for Reviewers – Engagement Reviews</i>, the peer review report should be modified to include the following sentence:</p> <p>“<i>[Firm name]</i> has represented to us that the firm did not perform engagements that would require a system review.”</p>	
<p>Selecting a Preparation Engagement in an Engagement Review</p>		
<p>104-1</p> <p><i>Question</i>—Must a peer reviewer select a preparation engagement in an Engagement Review?</p> <p><i>Interpretation</i>—No. A reviewer is not necessarily required to select a preparation engagement in an Engagement Review. If a reviewer is able to meet the requirements of paragraph .104 of the standards without selecting a preparation engagement, then a preparation engagement is not selected.</p>		<p>Removed - Duplicate of 220.13</p>

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>However, if selecting a preparation engagement is the only way a reviewer can meet any of the following requirements (as outlined in paragraph .104 of the standards), then a preparation engagement (either with or without a disclaimer report) should be selected. These requirements are as follows:</p> <ul style="list-style-type: none"> <i>a.</i> Ordinarily, at least two engagements should be selected for review. <i>b.</i> One engagement should be selected from each partner (or individual of the firm) responsible for the issuance of reports or performance of engagements. <i>c.</i> An engagement with disclosures (performed under SSARSs or SSAEs) should be selected. <i>d.</i> An engagement that omits substantially all disclosures (performed under SSARSs) should be selected. 		
104-2		Removed as is covered in the applicable checklists

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p data-bbox="296 267 882 373"><i>Question</i>—What should the peer reviewer be reviewing on a preparation engagement in an Engagement Review?</p> <p data-bbox="296 410 894 987"><i>Interpretation</i>—The reviewer would review the engagement letter as well as the legend on each page of the financial statements to determine that they comply with SSARs. If the firm issues a disclaimer report, the reviewer would also assess whether it complied with SSARs. In addition, the reviewer should also perform procedures to determine whether the presentation of the financial statements is appropriate and that the disclosures are adequate based on the applicable financial reporting framework. If substantially all disclosures are omitted, the reviewer would need to determine whether the appropriate label is present for any disclosures that are made.</p>		
<p data-bbox="205 1057 281 1089">104-3</p> <p data-bbox="296 1127 858 1268"><i>Question</i>—Should the standard language in the peer review report be tailored on an Engagement Review, if preparation engagement(s) are selected for review?</p> <p data-bbox="296 1305 558 1338"><i>Interpretation</i>—No.</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>104-4</p> <p><i>Question</i>—What are some examples of when a preparation engagement should be selected during an Engagement Review?</p> <p><i>Interpretation</i>—</p> <p>Example 1. If a sole practitioner performs compilation engagements with disclosures (or SSAEs, or reviews) and compilation engagements that omit substantially all disclosures, then one of each of these levels of service should be selected as part of the peer review. None of the firm’s preparation engagements should be selected.</p> <p>Example 2. If a sole practitioner only performs compilation engagements with disclosures and preparation engagements that omit substantially all disclosures (and no other engagements under SSAEs or SSARSs), then one of each type of engagement should be selected as part of the peer review because an engagement that omits substantially all disclosures should be selected.</p> <p>Example 3. If a sole practitioner only performs compilation engagements that omit substantially all disclosures and preparation engagements with disclosures (and no other</p>		<p>Does not establish requirements, however examples will be considered for potential development of a guide in the future.</p>

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>engagements under the SSAEs or SSARs), then one of each type of engagement should be selected as part of the peer review because a full disclosure engagement should be selected.</p> <p>Example 4. If a sole practitioner only performs compilation engagements with disclosures and preparation engagements with disclosures, then two compilation engagements should be selected as the selection of a preparation engagement is not required to be and should not be selected to meet any of the criteria outlined in paragraph .104 of the standards. However, if the firm only performs one compilation engagement with disclosures (as well as preparation engagements with disclosures and no other engagements under SSAEs or SSARs), the compilation engagement and a preparation engagement should be selected as part of the peer review. In this case, a preparation engagement is selected in order to meet the requirement of selecting a minimum of two engagements.</p> <p>Example 5. Firm ABCDE is a five-partner firm and partner A performs agreed-upon procedure engagements, partner B performs review engagements, partner C performs full disclosure compilation engagements, partner D performs compilation engagements that</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>omit substantially all disclosures and partner E performs preparation engagements. In this scenario one engagement is selected from each partner A, B, C and D which fulfills the requirement to select an engagement in each level of service outlined in paragraph .104a of the standards. However, because every person in the firm responsible for the issuance of financial statements must have an engagement selected, one of partner E's preparation engagements should be selected. Because the requirement to select an engagement with disclosures and an engagement that omits substantially all disclosures has been met (through the selection of engagements performed by the other partners) any preparation engagement performed by partner E may be selected.</p> <p>Example 6. Using the same facts described in example 5, if partner E also performed a review engagement and a compilation engagement that omits substantially all disclosures, either the review engagement or the compilation engagement should be selected. The reviewer should not select any of partner E's preparation engagements unless one of the requirements listed in paragraph .104 of the standards cannot otherwise be met.</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>104-5</p> <p><i>Question</i>—What if the accountant is engaged to perform an engagement in accordance with SSARSs on financial information other than historical financial statements (for example, the preparation or compilation of prospective financial information or the compilation of pro forma financial information)?</p> <p><i>Interpretation</i>—References to financial statements for engagements performed in accordance with SSARS are to be taken as a reference to such other financial information. In accordance with SSARS, reviews of subject matter other than historical financial information are to be performed in accordance with Statements on Standards for Attestation Engagements.</p>		<p>Removed – Does not establish peer review requirements or application material as it discusses applicability of other professional standards.</p>
<p>Impact of SQCS No. 8 on Engagement Reviews</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>109-1</p> <p><i>Question</i>—Paragraph .109 of the standards notes that an Engagement Review does not include a review of other documentation prepared on the engagements submitted for review (other than the documentation referred to in paragraphs .107–.108), tests of the firm’s administrative or personnel files, interviews of selected firm personnel, or other procedures performed in a System Review. Should or may the review captain obtain or make inquiries regarding a firm’s written quality control policies and procedures during an Engagement Review? Would a firm’s failure to have its quality control policies and procedures documented result in an individual engagement being deemed not performed or reported on in conformity with applicable professional standards, even if there are no other matters, findings, or deficiencies noted on the engagement?</p> <p><i>Interpretation</i>—SQCS No. 8 states that firms should document their quality control policies and procedures and that the size, structure, and nature of the practice of the firm are important considerations in determining the extent of the documentation of established quality control policies and procedures.</p>		<p>Relationship of Peer Review with QC Standards covered in PR-C section 100.05. Objectives for engagement reviews are established by applicable PR-C sections (220 and 320)</p>

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>However, the objective of an Engagement Review is to evaluate whether engagements submitted for review are <i>performed and reported on</i> in conformity with applicable professional standards in all material respects. An Engagement Review consists of reading the financial statements or information submitted by the reviewed firm and the accountant’s report thereon, together with certain background information and representations the applicable documentation required by professional standards. An Engagement Review does not provide the review captain with a basis for expressing any form of assurance on the firm’s system of quality control (which is what the documentation requirements are related to).</p> <p>Further, AR section 100 paragraph .72 states, “deficiencies in or instances of noncompliance with a firm’s quality control policies and procedures do not, in and of themselves, indicate that a particular review or compilation engagement was not performed in accordance with SSARS.” This is also consistent with the SSAEs (and SASs).</p> <p>Therefore, if reading the firm’s documented quality control policies and procedures or the inability for the review captain to do so has no impact on whether the actual engagements submitted for review are performed and</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>reported on in conformity with SSARS and the SSAEs in all material respects, reading the documented quality control policies and procedures would only appear to give a review captain the insight concerning the <i>systemic cause</i> concerning why a matter, finding, or deficiency occurred. Although this may be useful information in preparing MFCs or FFCs, the systemic reasons for these items are beyond the scope of an Engagement Review.</p> <p>Therefore, obtaining or reviewing a firm’s documented quality control policies and procedures would not be applicable to Engagement Reviews.</p> <p>Although the standards allow for “reading the applicable documentation required by professional standards,” and the SQCSs are a part of professional standards, it might appear that the standards do not prohibit the reviewer from obtaining and reading the firm’s documented quality control policies and procedures; however, it is deemed as beyond the scope of an Engagement Review.</p> <p>SQCS No. 8 also states that at least annually, the firm should obtain written confirmation of compliance with its policies and procedures on independence from all firm personnel required to be independent by the</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>requirements set forth in the Independence topic (AICPA, <i>Professional Standards</i>, ET sec. 1.200) which includes the "Independence Rule" (AICPA, <i>Professional Standards</i>, ET sec. 1.200.001) and its related interpretations and the rules of state boards of accountancy and applicable regulatory agencies. Written confirmation may be in paper or electronic form. Analogous to the preceding situation, obtaining or reviewing a firm's written independence confirmations would not be applicable to Engagement Reviews because the requirement is imbedded in the SQCSs and not a procedure required by SSARSs or the SSAEs.</p>		
<p>Qualifying for Service as a Peer Review Committee Member, Report Acceptance Body Member, or Technical Reviewer</p>		
<p>132-1</p> <p><i>Question</i>—Paragraphs .132 and .136 of the standards note that minimum requirements must be met to be a peer review committee member, a report acceptance body member, or a technical reviewer. What are those requirements?</p>	<p>400.17 [.3300.1.II.A] A majority of the committee members and the chairperson charged with the overall responsibility for administering the program should possess the qualifications required of a team captain in a system review addressed in paragraphs .05–.15 of section 200 and paragraph .32 of section 210. (Ref: par. .A19–.A20)</p>	<p>References in [brackets] indicate applicable guidance from extant PRP section 3300 was considered and included as appropriate.</p>

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p><i>Interpretation—</i></p> <p><i>Peer Review Committee Member</i></p> <p>A majority of the peer review committee members and the chairperson charged with the overall responsibility for administering the program at the administering entity should possess the qualifications required of a team captain in a System Review. All committee members must be AICPA members in good standing, whether conducting committee member duties for firms with or without AICPA members. A committee member who is suspended or restricted from scheduling or performing peer reviews no longer meets the qualifications until such suspension or restriction is removed. Reinstatement as a committee member would be at the discretion of the administering entity or committee.</p> <p><i>Report Acceptance Body Member</i></p> <p>Each member of an administering entity’s report acceptance body charged with the responsibility for acceptance of peer reviews must</p> <p><i>a.</i> be currently active in public practice at a supervisory level in the accounting or auditing function of a firm enrolled in the program, as a partner of the</p>	<p>400.18 Committee members should be members of the AICPA in good standing.</p> <p>400.19 & .22 [3300.1.II.A] A committee/RAB member does not meet the required qualifications of a committee member if the member’s ability to practice public accounting or perform peer reviews has been restricted by a regulatory, monitoring, or enforcement body beginning on the date the member is notified of the restriction and ending on the date that the restriction has been removed. (Ref: par. .A21)</p> <p>400.21 A RAB member should:</p> <p><i>a.</i> be a member of the AICPA in good standing, licensed to practice as a CPA.</p> <p><i>b.</i> be presently involved in public practice at 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)</p> <p><i>c.</i> have spent the last five years in the practice of public accounting in the accounting or auditing function.</p> <p><i>d.</i> be employed by or be an owner of a firm that has received a report with a peer review rating of <i>pass</i> or <i>pass with scope</i></p>	<ul style="list-style-type: none"> • National RAB consultant section mapped at the RAB Handbook as it contains additional information about SOC experience.

PRP Section 2000	PR-C Reference	Explanation
<p>firm, or as a manager or person with equivalent supervisory responsibilities. To be considered currently active in the accounting or auditing function, a report acceptance body member should be presently involved in the accounting or auditing practice of a firm supervising one or more of the firm's accounting or auditing engagements or carrying out a quality control function on the firm's accounting or auditing engagements.</p> <p>b. be associated with a firm (or all firms if associated with more than one firm) that has received a report with a peer review rating of <i>pass</i> on its most recently accepted System or Engagement Review that was accepted timely, ordinarily within the last 3 years and 6 months (see Interpretation No. 31b-1).</p> <p>c. demonstrate proficiency in the standards, interpretations, and guidance of the program (see Interpretation No. 33-1).</p> <p>d. be an AICPA member in good standing, whether conducting report acceptance body member duties for</p>	<p><i>limitations</i> for its most recent peer review. The report should have been accepted timely. (Ref: par. .A24)</p> <p>e. complete RAB member training that meets the requirements established by the board.</p> <p>f. agree to confidentiality and conflict-of-interest requirements of the program.</p> <p>400.24 For the acceptance of system reviews (including corrective actions or implementation plans related to a system review)</p> <p>a. the chairperson of the RAB should possess the qualifications required of a system review team captain.</p> <p>b. a majority of the RAB members should possess the qualifications required of a system review team captain.</p> <p>c. at least one RAB member should have current experience in the types of must-select engagements included in the review. (Ref: par. .A26-.A27)</p> <p>400.45 A technical reviewer should (Ref: par. .A38)</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>firms with or without AICPA members.</p> <p>A majority of the report acceptance body members and the chairperson charged with the responsibility for acceptance of System Reviews should possess the qualifications required of a System Review team captain.</p> <p>A national list of consultants will be maintained by the AICPA, so that the administering entity has an available pool of consultants with GAS, ERISA, FDICIA, and service organization experience to call upon in the instance when it does not have an experienced RAB member to consider the review of a firm when circumstances warrant. The national RAB consultant would not necessarily have to participate physically in the RAB meeting (teleconference option). The national RAB consultant will not be eligible to vote on the acceptance of a review. Determination that a review requires a national RAB consultant should be made prior to assigning the review to a RAB. The national RAB consultant would have to meet the following qualifications for RAB participation:</p> <p><i>a.</i> Currently active in public practice at a supervisory level in the accounting or auditing function of a firm enrolled in</p>	<p><i>a.</i> be a member of the AICPA in good standing, licensed to practice as a CPA.</p> <p><i>b.</i> complete initial and on-going 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)</p> <p><i>c.</i> have an appropriate level of accounting and auditing knowledge and experience suitable for the work performed. (Ref: par. .A39)</p> <p><i>d.</i> 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.</p> <p><i>e.</i> 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)</p> <p><i>f.</i> annually participate in a peer review that is equivalent to the highest level of technical</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>the program, as a partner of the firm, or as a manager or person with equivalent supervisory responsibilities. To be considered currently active, a consultant should be presently involved in the supervision of one or more of his or her firm's accounting or auditing engagements or carrying out a quality control function on the firm's accounting or auditing engagements. To be considered a consultant on GAS, ERISA, FDICIA, or service organization engagements, the current activity must include the respective industry asked to consult upon.</p> <p>b. Associated with a firm (or all firms, if associated with more than one firm) that has received a report with a peer review rating of <i>pass</i> on its most recently accepted System Review that was accepted timely, ordinarily within the last three years and six months.</p> <p>c. Not associated with an engagement that was deemed not performed in accordance with professional standards on the consultant's firm's most recently accepted System Review.</p>	<p>review performed. Participation includes the following:</p> <ol style="list-style-type: none"> 1. Reviewing and discussing the planning and scope of the peer review with the captain 2. Reviewing the engagement checklists completed by the review team 3. Attending meetings or participating in conference calls between the reviewer and reviewed firm to discuss issues encountered during the peer review 4. Attending the closing meeting and the exit conference. <p>400.A39 An appropriate level of accounting and auditing knowledge and experience may be obtained from on the job training, training courses, or a combination of both.</p> <p>400.A40 Technical reviewer training for single audits may be completed by taking the on-demand course developed by the AICPA, or an alternative course approved by the board.</p> <p>400.A41 Examples of limitations or restrictions are included in paragraph .A14 of section 200, <i>General Principles and Responsibilities for Reviewers</i>. Although that paragraph refers specifically to peer reviewers, it is also</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p data-bbox="346 267 829 406"><i>d.</i> Be an AICPA member in good standing, whether conducting consultant duties for firms with or without AICPA members.</p> <p data-bbox="298 446 871 730">A report acceptance body member who is suspended or restricted from scheduling or performing peer reviews no longer meets the qualifications until such suspension or restriction is removed. Reinstatement as a report acceptance body member would be at the discretion of the administering entity or committee.</p> <p data-bbox="298 771 567 803"><i>Technical Reviewers</i></p> <p data-bbox="298 836 829 941">Each technical reviewer charged with the responsibility for performing technical reviews should</p> <p data-bbox="346 982 882 1307"><i>a.</i> demonstrate proficiency in the standards, interpretations, and guidance of the program applicable to the type of peer reviews being evaluated and that meet the requirements of the team captain or review captain training requirements established by the board (see Interpretation No. 33-1).</p> <p data-bbox="346 1339 871 1404"><i>b.</i> participate in at least one peer review each year, which may include</p>	<p data-bbox="966 267 1543 332">applicable to technical reviewers that are not peer reviewers.</p> <p data-bbox="919 373 1554 771">400.A3 The CPA on staff is responsible for evaluating whether technical reviewers are in compliance with the requirements outlined in paragraph .44, determining whether a technical reviewer’s knowledge and experience are sufficient to perform technical reviews or oversight, and managing the performance of administrators and technical reviewers, including having the appropriate authority to manage and address any performance concerns of those individuals.</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>participation in an on-site oversight of a System Review.</p> <p><i>c.</i> be an AICPA member in good standing, whether conducting technical reviewer duties for firms with or without AICPA members.</p> <p><i>d.</i> have an appropriate level of accounting and auditing knowledge and experience suitable for the work performed. Such knowledge may be obtained from on-the-job training, training courses, or a combination of both. Technical reviewers are to obtain a minimum amount of CPE to maintain the appropriate level of accounting and auditing knowledge.</p> <p>If a technical reviewer does not have such knowledge and experience, the technical reviewer may be called upon to justify why he or she should be permitted to perform technical reviews or oversights. The administering entity has the authority to decide whether a technical reviewer's knowledge and experience is sufficient and whether he or she has the capability to perform a particular technical review or</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>oversight whether there are high-risk engagements involved or other factors.</p> <p>The fundamental purpose of CPE is to maintain or increase, or both, professional competence. AICPA members are required to participate in 120 hours of CPE every 3 years. In order to maintain current knowledge of accounting, auditing, and quality control standards, technical reviewers should obtain at least 40 percent of the AICPA-required CPE in subjects relating to accounting, auditing, and quality control. Technical reviewers should obtain at least 8 hours in any 1 year and 48 hours every 3 years in subjects relating to accounting, auditing, and quality control. The terms <i>accounting</i>, <i>auditing</i>, and <i>quality control</i> should be interpreted as CPE that would maintain current knowledge of accounting, auditing, and quality control standards for engagements that fall within the scope of peer review as described in paragraphs .06–.07 of the standards.</p> <p>Technical reviewers have the responsibility of documenting their compliance with the CPE requirement. They should maintain detailed records</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>of CPE completed in the event they are requested to verify their compliance. The reporting period will be the same as that maintained for the AICPA.</p> <p>A technical reviewer who is also a peer reviewer and is suspended or restricted from scheduling or performing peer reviews no longer meets the qualifications until such suspension or restriction is removed. Reinstatement as a technical reviewer would be at the discretion of the administering entity or committee.</p>		
<p>Fulfilling Peer Review Committee and Report Acceptance Body Responsibilities</p>		
<p>133a-1</p> <p><i>Question</i>—Paragraph .133 of the standards indicates that the committee is responsible for ensuring that peer reviews are presented to a</p>	<p>400.A8 Circumstances in which it may be acceptable that a review is not presented or accepted in a timely manner include, but are not limited to, the following:</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>RAB in a timely manner, ordinarily within 120 days of the receipt of the working papers, peer review report, and letter of response, if applicable, from the team captain or review captain. What is meant by “ordinarily within 120 days”?</p> <p><i>Interpretation</i>—Timely acceptance of peer reviews is important because delays may affect both the firm and peer reviewers within the firm. However, there are circumstances in which delays are unavoidable, including the following:</p> <ul style="list-style-type: none"> a. Determination during technical review or presentation that an oversight should be performed b. Submitted peer review documentation requires significant revisions c. Additional inquiries of the firm or peer review team as a result of the technical review or presentation d. Enhanced oversight procedures e. Disagreements between reviewer, reviewed firm and RAB 	<ul style="list-style-type: none"> a. Determination during technical review that oversight should be performed b. Submitted peer review documentation requires significant revisions or there are significant delays in receiving revised documents or responses to technical reviewer questions c. Enhanced oversight procedures d. Disagreements among the reviewer, reviewed firm, technical reviewer, or the AE 	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>Accepting Engagement Reviews by the Technical Reviewer</p>		
<p>137-1</p> <p><i>Question</i>—The standards and interpretations indicate that the technical reviewer should be delegated the authority from the committee to accept Engagement Reviews in certain circumstances. What are those circumstances?</p> <p><i>Interpretation</i>—The technical reviewer should be delegated the authority from the committee to accept Engagement Reviews on the committee’s behalf when the technical reviewer determines that any MFC forms prepared only relate to compilations or preparations under SSARs, that no MFC forms should have been prepared except as related to compilations or preparations under SSARs, and there are no other issues associated with the peer review warranting committee consideration or action that could potentially affect the results of the peer review.</p> <p>The technical reviewer may identify reviewer performance feedback that should be considered and approved by the peer review committee prior to issuance. The technical</p>	<p>400.49 When engagement reviews meet the criteria to be accepted by the technical reviewer and such authority has been granted by the committee or RAB, the technical reviewer should accept the review on behalf of the RAB within 60 days of receipt of the working papers from the review captain. The technical reviewer should accept engagement reviews on the RAB’s behalf only if such authority has been granted and the review meets the following minimum criteria:</p> <ul style="list-style-type: none"> a. The only matters noted and matters for further consideration (MFCs) prepared relate to compilation or preparation engagements performed in accordance with the Statements on Standards for Accounting and Review Services. b. The review was not subjected to oversight. c. The technical reviewer did not identify any reviewer performance feedback. d. There are no other issues associated with the peer review warranting committee 	<p>The stipulations were aggregated with guidance from the RAB Handbook, Chapter 2, Section V, Sub Section B.</p>

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>reviewer should still be delegated the authority from the committee to accept Engagement Reviews on the committee’s behalf when such feedback may be provided to the review captain unless the circumstances leading up to the feedback may have affected the results of the review. Accordingly, if the feedback being provided to the review captain involves issues which could potentially affect the results of the peer review, the technical reviewer should not accept the Engagement Review but present it to the committee for consideration.</p>	<p>consideration or action that could affect the results of the peer review.</p>	
<p>Cooperating in a Peer Review— Implementation Plans and Correction Action Plans</p>		
<p>143-1</p> <p><i>Question</i>—Paragraph .143 of the standards notes that an implementation plan in addition to the plan described by the firm in its responses on the FFC forms may be requested by the administering entity’s peer review committee. Can this plan only be requested when a report with a rating of <i>pass</i> has been issued?</p>		<ul style="list-style-type: none"> Removed – RABs only consider an implementation plan for repeat findings, a non-conforming engagement in a system review or firm licensure in an engagement review, this interpretation is not needed.

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p><i>Interpretation</i>—No, an implementation plan may be requested whether a report with a rating of <i>pass</i>, <i>pass with deficiency</i>, or <i>fail</i> is issued for any findings that were only raised to the level of a FFC and did not get elevated further. Thus, it is possible to have a required corrective action as a condition of acceptance of the peer review stemming from a report with a rating of <i>pass with deficiencies</i> or <i>fail</i> and a required implementation plan as a condition of cooperation (unrelated to the acceptance of the review) for the findings included in the FFCs.</p>		
<p>Publicizing Peer Review Information</p>		
<p>146-1</p> <p><i>Question</i>—Paragraph .146 of the standards discusses that neither the administering entity nor the AICPA shall make the results of the review available to the public, except as authorized or permitted by the firm under certain circumstances. What are examples of those circumstances?</p> <p><i>Interpretation</i>—A firm may be a voluntary member of one of the AICPA’s audit quality centers or sections that has a membership requirement such that certain peer review</p>	<p>400.A11 A firm may be a voluntary member of one of the AICPA’s audit quality centers or sections that requires, as a condition of membership, that certain peer review documents be open to public inspection. Other firms may voluntarily instruct their administering entities to make the peer review results available to certain other state boards of accountancy. In these cases, the firm permits the administering entities to make its peer review results available to the public or to</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>documents be open to public inspection. Other firms may elect not to opt out of the program's process for voluntary disclosure of peer review results to state boards of accountancy where the firm's main office is located. Also, firms may voluntarily instruct their administering entity to make the peer review results available to certain other state boards of accountancy. In these cases, the firm permits the AICPA or administering entities to make their peer review results available to the public or to state boards of accountancy, respectively.</p> <p>Peer review results include, as applicable, the</p> <ul style="list-style-type: none"> a. peer review report; b. letter of response; c. acceptance letter; d. letter(s) signed by the reviewed firm indicating that the peer review documents have been accepted with the understanding that the reviewed firm agrees to take certain actions; and e. letter notifying the reviewed firm that certain required actions have been completed. 	<p>state boards of accountancy. Peer review results include, as applicable, the following:</p> <ul style="list-style-type: none"> a. Peer review report b. Letter of response c. Acceptance letter d. Letters acknowledged by the reviewed firm indicating that the peer review documents have been accepted with the understanding that the reviewed firm agrees to take certain actions e. Letters notifying the reviewed firm that certain required actions have been completed 	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>146-2</p> <p><i>Question</i>—Paragraph .146 of the standards discusses that neither the administering entity nor the AICPA shall make the results of the review available to the public except as authorized or permitted by the firm, which is addressed in Interpretation No. 146-1. When a firm with AICPA members is enrolled in the program, what information, in addition to results, may be provided to the AICPA Professional Ethics Division with the firm’s explicit permission?</p> <p><i>Interpretation</i>—When there is evidence of an open ethics investigation and the respondent makes a knowingly, intelligent, voluntary waiver of the right to confidentiality in writing, in those circumstances, AICPA Peer Review may provide information to the AICPA Professional Ethics Division. Information available for disclosure about the firm includes, but is not limited to, the following:</p> <ul style="list-style-type: none"> a. Fieldwork commencement date b. Exit conference date c. Review acceptance date(s) 	<p>400.A12 When there is evidence of an open ethics investigation and the firm makes an informed and voluntary waiver of confidentiality in writing, AICPA Peer Review Program staff may provide information to the AICPA Professional Ethics Division. Information available for disclosure about the firm includes, but is not limited to, the following:</p> <ul style="list-style-type: none"> a. Fieldwork commencement date b. Exit conference date c. Review acceptance dates d. Levels of service and industries included in the firm’s peer review information for prior or current peer reviews e. Levels of service and industries included in prior or current peer reviews and those determined not to be in conformity with professional standards in all material respects f. Signed confirmations by a firm representative that the enrolled firm did not perform any services or issue reports which would require the firm to undergo a peer review g. Other similar information related to a prior or current peer review 	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p><i>d.</i> Industries included on the firm’s background form for prior or current peer reviews</p> <p><i>e.</i> Level of service and industry of engagements included in prior or current peer reviews and those determined not to be in conformity with professional standards in all material respects</p> <p><i>f.</i> Signed confirmations by a firm representative that the enrolled firm did not perform any services or issue reports which would require the firm to undergo a peer review</p> <p><i>g.</i> Other similar information related to a prior or current peer review</p>		
<p>146-3</p> <p><i>Question</i>—Paragraph .146 states that neither the administering entity nor the AICPA shall make the results of the review, or other information related to the acceptance or completion of the review, available to the public, except as authorized or permitted by the firm under certain circumstances. There are situations in which third parties, ordinarily licensing bodies, request information related</p>	<p>400.A13 If a firm has authorized the AE in writing to provide specific information (in addition to the information in paragraph .08) to third parties, the following (or similar) types of objective information about the review may be provided, if known:</p> <p><i>a.</i> The date the review is or was scheduled to take place</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>to an ongoing peer review from an administering entity or the AICPA. What information may an administering entity or the AICPA provide when such requests are made?</p> <p><i>Interpretation</i>—When a firm has authorized the administering entity or the AICPA in writing to provide specific information (in addition to the information in paragraph .146) to third parties, the following (or similar) types of objective information about the review may be provided, if known:</p> <ul style="list-style-type: none"> a. The date the review is or was scheduled to take place b. The name of the reviewing firm, team captain or review captain c. If the fieldwork on the peer review has commenced d. The date the exit conference was expected to or did occur e. A copy of any extension approval letters f. Whether the peer review working papers have been received by the administering entity g. Whether a must select engagement was included in the scope as required by the standards h. If a technical review is in process 	<ul style="list-style-type: none"> b. The name of the reviewing firm, team captain, or review captain c. If the fieldwork on the peer review has commenced d. The date the exit conference was expected to or did occur e. A copy of any extension approval letters f. Whether the peer review working papers have been received by the AE g. Whether a must select engagement was included in the scope as required by the standards h. If a technical review is in process i. Whether the review has been presented to a RAB j. The date the review is expected to be presented to a RAB k. The specific overdue letters (such as, but not limited to, scheduling the peer review, or completion of remedial actions) requested by third parties <p>400.09 Individuals involved in the administration of the program should not provide subjective information about a firm’s peer review, even with firm authorization. (Ref: par. .A14)</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<ul style="list-style-type: none"> i. Whether the review has been presented to a RAB j. The date the review is expected to be presented to a RAB k. If an overdue letter has been issued and the reason for the letter has not been addressed. Third parties should be specific regarding the reason for the overdue letter that they are inquiring about such as overdue letters for failure to submit scheduling information. <p>Other written requests by the firm for the administering entity or AICPA to provide information or documents to a third party will be considered on a case by case basis by the administering entity or AICPA. However, neither the administering entity nor the AICPA will provide information that is subjective (due to different definitions or interpretations by third parties), even with firm authorization, such as the following:</p> <ul style="list-style-type: none"> l. Stating solely that the review is “in process” or responding to an inquiry solely regarding what the “general status” of a peer review is m. The peer review report rating prior to the peer review’s acceptance n. Whether there are indications that the firm, reviewing firm, team captain, or 	<p>400.A14 Subjective information includes, but is not limited to, the following:</p> <ul style="list-style-type: none"> a. A statement indicating only that the review is “in process,” or a response to an inquiry regarding the “general status” of a peer review b. The peer review report rating prior to the peer review’s acceptance c. Whether there are indications that the firm, reviewing firm, team captain, or review captain are cooperating (or not cooperating) with the AICPA or AE d. An indication of the quality or completeness of peer review working papers received by the AE e. Reasons why peer review working papers, implementation plans, or corrective actions are late f. Whether a firm is close to submitting documents or completing implementation plans or corrective actions g. Reasons for, or the likely outcome of, fair procedures to determine whether the firm is cooperating with the AICPA or the AE 	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>review captain are cooperating (or not cooperating) with the AICPA or administering entity</p> <ul style="list-style-type: none"> o. An indication of the quality or completeness of peer review working papers received by the administering entity <ol style="list-style-type: none"> 1. Reasons why peer review working papers, implementation plans, or corrective actions are late 2. Whether a firm is close to submitting documents or completing implementation plans or corrective actions 3. Reasons for, or the likely outcome if the firm is going through fair procedures to determine whether it is cooperating with the AICPA or administering entity <p>Paragraph .146 states that the firm should not publicize the results of the review or distribute copies of the peer review reports to its personnel, clients, or others until it has been advised that the report has been accepted (see interpretations) by the administering entity as meeting the requirements of the program. Where appropriate, the firm may discuss information in this interpretation with third parties at its discretion as long as paragraph .146 is complied with such as not disclosing the report rating until the review has been accepted.</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>Peer Reviewers’ Performance and Cooperation</p>		
<p>147-1</p> <p><i>Question</i>—A team captain, review captain, or reviewer (hereinafter, reviewer) has a responsibility to perform a review in a timely, professional manner. What happens when a reviewer fails to perform the review in a timely and professional manner?</p> <p><i>Interpretation</i>—When a reviewer fails to perform the review in a timely and professional manner, the reviewer may be deemed as not cooperating. Such situations might include, but are not limited to, the following:</p> <ul style="list-style-type: none"> a. Failure to submit the report; FFC forms, if applicable; and required peer review documents to the administering entity within the required specified time b. Failure to respond or resolve questions from the technical reviewer or 	<p>200.A39 A reviewer may be suspended in the jurisdiction of the reviewer’s local administering entity for failing to do, but not limited to, any of the following:</p> <ul style="list-style-type: none"> a. Submit required peer review documents to the administering entity within the required specified time b. Respond to or resolve issues identified by the technical reviewer, committee, or RAB within the specified time, including failure to respond to requests for additional procedures such as the expansion of scope on the review c. Revise the report and FFC forms, if applicable, as requested by the committee or RAB 	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>committee or RAB within the specified time including requests for additional procedures such as the expansion of scope on the review</p> <p><i>c.</i> Failure to revise the report and FFC forms, if applicable, as requested by the committee or RAB</p> <p><i>d.</i> Failure to respond to requests for documents (in addition to those originally required to be submitted) or requests to complete documents</p> <p><i>e.</i> Failure to submit peer review documents and other information for oversight</p> <p><i>f.</i> Failure to update or verify reviewer resume on a periodic basis</p> <p>Situations such as those previously indicated, arise when the reviewer fails to cooperate with the administering entity. This development warrants communication to the reviewer and may result in his or her potential suspension from scheduling peer reviews.</p>	<p><i>d.</i> Respond to requests for documents (in addition to those originally required to be submitted) or requests to complete documents</p> <p><i>e.</i> Submit peer review documents and other information for oversight</p> <p><i>f.</i> Update or verify a reviewer resume, as required</p> <p>200.A40 Failure to update or verify a reviewer resume may result in a national suspension. The reviewer may also be referred to the board for removal if the reviewer fails to submit documentation to support the experience reflected on the reviewer’s resume.</p> <p>200.30 If a reviewer does not cooperate by performing the review in a timely and professional manner in accordance with the requirements of the standards, the administering entity or AICPA staff should communicate the failure to the reviewer, and it may result in a suspension or removal from the list of qualified peer reviewers. The reviewer should respond to the communication within the specified time. (Ref: par. .A39 and .A40)</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>148-1</p> <p><i>Question</i>—The board or committee may consider the need to impose corrective actions on the service of the reviewer. What are examples of corrective actions?</p> <p><i>Interpretation</i>—The board or committee may require the reviewer to comply with certain prescribed actions in order for the reviewer to continue performing peer reviews, such as (but not limited to) the following:</p> <ul style="list-style-type: none"> a. Oversight at the discretion of an administering entity until evidence of attendance at a future reviewer’s training or accounting or auditing course(s) is received or performance improves. b. Having committee oversight on the next review(s) performed by the reviewer at the expense of the reviewer’s firm (including out-of-pocket expenses, such as cost of travel). c. Completing all reviews to the satisfaction of the committee including submitting all reports and appropriate documentation on all outstanding peer 	<p>200.A42 Corrective actions may include, but are not limited to, the following:</p> <ul style="list-style-type: none"> a. Oversight (at the reviewer’s expense) until evidence of performance improves b. Consulting with the administering entity to discuss the planning and performance of the next review c. Submitting all reports and appropriate documentation on all outstanding peer reviews before scheduling or performing another review d. Having pre-issuance reviews of the report and peer review documentation on future peer reviews by an individual acceptable to the committee e. Taking specified types of and amounts of CPE, training, or pass the related AICPA Advanced Certificate Exam, f. Removing or revising one or more resume codes until appropriate proof of experience and knowledge have been provided to the satisfaction of the committee 	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>reviews before scheduling or performing another review, thus limiting the number of reviews that the reviewer may schedule or have open at one time.</p> <p><i>d.</i> Having pre-issuance review(s) of the report and peer review documentation on future peer reviews by an individual acceptable to the committee chair or designee who has experience in performing peer reviews.</p> <p><i>e.</i> Consultations with the administering entity to discuss the planning and performance of the next review.</p> <p><i>f.</i> Remove or revise résumé code until appropriate proof of experience and knowledge have been provided to the satisfaction of the committee.</p>		
<p>Definition of Commencement</p>		
<p>206-1</p> <p><i>Question</i>—There are a number of instances in which the standards and interpretations refer to the “commencement” date of a review to determine whether a situation applies. Some</p>	<p>100.11 Commencement date. The earlier date of when the reviewer begins their review of engagements or when the reviewer learns</p>	<p>See further detailed explanation in the explanatory memo regarding “Removal of the Requirement for Surprise Engagements in System Reviews”</p>

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>examples are cooperating in a peer review (Interpretation No. 5h-1), approval of the review team by the administering entity (Interpretation No. 30-1), provision of the surprise engagement to the firm (Interpretation No. 61-1) and when the standards are effective for a firm’s peer review (paragraph .206 of the standards). What is meant by “commencement”?</p> <p><i>Interpretation</i>—Interpretation No. 5g-1 notes that “A peer review commences when the review team begins field work, ordinarily at the reviewed firm’s office in a System Review, or begins the review of engagements in an Engagement Review.” The easiest measure is “when fieldwork begins.” However, there are times when this may not apply. Therefore, Interpretation No. 32-1 further notes that “team members may review their engagements prior to the team captain or review captain beginning their field work. In these situations, a review is considered to have commenced when the team member begins the review of engagements (if this is prior to the team captain or review captain beginning their fieldwork).” In certain circumstances, fieldwork may commence before the review of engagements, such as during planning.</p>	<p>information that affects the results of the current review. (Ref: par. .A16)</p> <p>100.A16 Indications of when a reviewer has learned information that affects the results of the review include, but are not limited to, the following examples:</p> <ol style="list-style-type: none"> a. A reviewer identifies a design deficiency in the firm’s system of quality control b. A reviewer learns about the firm’s noncompliance with state board of accountancy licensing requirements 	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>The significance of this enhanced definition of “commencement” is emphasized by how it affects a firm’s ability to resign from the program once a review commences. Once a team captain, review captain or team member learns information that affects the results of the review, the review is deemed to have commenced. Some examples are if the team captain identifies a design deficiency, or learns about the firm’s noncompliance with state board of accountancy licensing requirements, during planning. Another example is the identification of a finding during a team member’s review of a specialized industry at a location other than the reviewed firm’s offices, prior to the team captain beginning fieldwork at the reviewed firm’s offices.</p> <p>As indicated in Interpretation No. 5g-1, a firm whose peer review has commenced may not resign from the program unless certain steps are followed which include the firm evidencing their noncooperation with the program and for firms with AICPA members, the AICPA may publish notice of the action so that the public interest is served.</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
Firm Representations		
<p>208-8-1</p> <p><i>Question</i>—Paragraph .208(8) (appendix B) of the standards advises that the firm is required to make specific representations but is not prohibited from making additional representations beyond the required representations, in its representation letter to the team captain or review captain. What parameters should be used in tailoring the representation letter?</p> <p><i>Interpretation</i>—The representation letter is not intended to be onerous for the reviewed firm. Allowing reviewers to add or delete whatever they want to the representation letter would make it very difficult to maintain consistency in the program. In addition, this becomes a very important issue because a firm’s failure to sign the representation letter may be considered noncooperation.</p> <p>However, at a minimum the representation letter should comply with the spirit of the guidance, there is value to the reviewer of obtaining certain representations in writing. Thus, if during the review, something comes to the reviewer’s attention whereby the</p>		<p>Removed – Substance is reflected in requirements related to “Written Representations” in applicable PR-C sections.</p>

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>reviewer believes the reviewed firm is providing contradicting or questionable information, the reviewer should investigate the matter further and may consider having the firm include the matter in the representation letter.</p> <p>Reviewed firms and reviewers are not permitted to tailor the required representations unless otherwise stated in paragraph .208(8) because these are considered the minimum applicable representations for both System and Engagement Reviews.</p>		
<p>Firm and Individual Licenses</p>		
<p>208-1a-1</p> <p><i>Question</i>—Paragraph .208(1)(a) (appendix B) of the standards advises that firms include representations to the team captain or review captain concerning when management is aware that the firm or its personnel has not complied with the rules and regulations of state board(s) of accountancy or other regulatory bodies (including applicable firm and individual licensing requirements in each state in which it practices for the year under review). What further guidance should be</p>	<p>210.32 / 220.08 The reviewer should determine if the firm and its personnel are in compliance with licensure requirements of the state boards of accountancy in the states in which the firm and its personnel practice for the peer review year through the date of the peer review report by verifying the following: (Ref: par. 210.A29 / 220.A2)</p> <ul style="list-style-type: none"> a. The <i>practice unit</i> license (firm license) in the state in which the practice unit is domiciled (that is, where the main office is located) b. A sample of individual (personnel) licenses in the state in which the 	<p>Requirements in PR-C sections also considered applicable guidance in extant PRP section 3100.</p>

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>followed in regards to firm and individual licenses?</p> <p><i>Interpretation</i>—SQCS No. 8 requires firms to comply with “applicable legal and regulatory requirements”, which includes firm and individual licensing requirements. Firms are required to comply with the rules and regulations of state boards of accountancy and other regulatory bodies in the states where they practice.</p> <p>For System Reviews, the team captain should also obtain an understanding of the firm’s system of quality control with respect to firm and individual licensing.</p> <p>As a part of a System or Engagement review, reviewers should make inquiries of the firm to determine if the firm and its personnel are appropriately licensed as required by the state boards of accountancy in the state(s) in which the firm and its personnel practice. In addition, firms should submit written representations from the firm’s management indicating compliance with such required rules and regulations. If the reviewed firm is aware of any situation whereby it is not in compliance with the rules and regulations of the state boards of accountancy or other regulatory bodies, it should tailor the</p>	<p>individual primarily practices public accounting</p> <p>210.A29 / 220.A2 Acceptable documentation includes an original or copy of the license, print-out from an online license verification system, correspondence from the licensing authority, or other reasonable alternative documentation. The review captain’s judgment may be needed to determine what alternative documentation is reasonable.</p> <p>210.A30 A reviewer may verify an out-of-state practice unit license or an out-of-state individual license on an individual engagement basis, when that engagement is selected for review and was performed by the reviewed firm in another state requiring a firm or individual license. The decision to perform further testing is based on the reviewer’s understanding of the firm’s quality control procedures related to licensing and the related risk of noncompliance.</p> <p>220.A3 The reviewer / review captain may verify an out-of-state practice unit license or an out-of-state individual license, on an individual engagement basis when that engagement is selected for review and was performed by the reviewed firm in another state requiring a firm or individual license. The decision to perform further</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>representation letter to provide information on the areas of noncompliance.</p> <p>To support the firm’s responses and representations, a reviewer is required to verify the following:</p> <ul style="list-style-type: none"> a. The <i>practice unit</i> license (firm license) in the state in which the practice unit is domiciled (main office is located). b. Individual (personnel) licenses in the state in which the individual primarily practices public accounting <ul style="list-style-type: none"> — For System Reviews, for a sample of appropriate personnel — For Engagement Reviews, for appropriate personnel on engagements selected <p>The reviewer should verify the license by requiring the firm to provide documentation from the licensing authority that the license is appropriate and active during the peer review year, and through the earlier of reviewed engagements’ issuance dates or the date of peer review fieldwork. Acceptable documentation includes an original or copy of the license, print-out from an online license</p>	<p>testing is based on the reviewer’s evaluation of the firm’s responses to inquiries.</p> <p>300.09 It is the reviewed firm’s responsibility to understand and comply with its licensing requirements. Therefore, it should be prepared to respond to the reviewer’s inquiries and requests for documentation. This is also important for out-of-state firm and individual licenses when licensing requirements may be more difficult to identify and understand.</p> <p>210.33 & 220.09 If the reviewer deems it appropriate to test out-of-state licenses, the reviewer should expect the firm to provide documentation supporting its compliance with, or approach to, out-of-state licensing requirements. AICPA online CPA mobility provisions may be used to assist the reviewer in evaluating the firm’s approach to firm and individual out-of-state licensing. (Ref: par. 210.A30 / 220.A3)</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>verification system, correspondence from the licensing authority, or other reasonable alternative documentation. The reviewer's judgment may be needed to determine what alternative documentation is reasonable.</p> <p>A reviewer is not required to verify an out-of-state practice unit license or an out-of-state individual license, on an individual engagement basis when that engagement is selected for review and was performed by the reviewed firm in another state requiring a firm or individual license. However, in a System Review, the reviewer's understanding of the firm's quality control procedures related to licensing, and the related risk of noncompliance, are considerations in determining whether any further testing is appropriate. In an Engagement Review, the reviewer should consider the firm's responses to inquiries in determining whether any further procedures are appropriate.</p> <p>It is the reviewed firm's responsibility to have understood and complied with its licensing requirements. Therefore it should be prepared to respond to the reviewer's inquiries and requests for documentation. This is also important for out-of-state firm and individual licenses when licensing requirements may be more difficult to identify and understand. When the reviewer deems it appropriate to</p>		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>test out-of-state licenses, the reviewer should expect the firm to provide documentation supporting its compliance with, or approach to, out-of-state licensing requirements. AICPA online CPA mobility provisions may be used to assist the reviewer in evaluating the firm’s approach to firm and individual out-of-state licensing.</p> <p>The reviewer should analyze the information obtained through inquiry and in the written representation letter to determine the impact on the peer review.</p>		
<p>Communication of Report Acceptances</p>		
<p>208-1a-2</p> <p><i>Question</i>—In furtherance to Interpretation No. 208-1a-1, what additional guidance should be followed in regards to firm and individual licenses?</p> <p><i>Interpretation</i>—Firms are required to comply with the rules and regulations of state boards of accountancy and other regulatory bodies in the state where they practice. Therefore, a state board of accountancy may be sent a list of firms with <i>accepted</i> peer reviews (“accepted” as defined in the Interpretations to</p>		<ul style="list-style-type: none"> • Removed as process of providing such information to state boards is automated through FSBA. • Removed second paragraph b/c it is outside of the peer review process.

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>the standards) in a given period which would allow the state board of accountancy to verify that firms undergoing peer review are licensed in that state.</p> <p>Entities administering the AICPA Peer Review Program are not prohibited outside of the peer review process from gathering information from firms and communicating to the state boards of accountancy on licensure compliance matters.</p>		
<p>Communications Received by the Reviewed Firm Relating to Allegations or Investigations in the Conduct of Accounting, Auditing, or Attestation Engagements From Regulatory, Monitoring, or Enforcement Bodies</p>		
<p>208-8d-1</p> <p><i>Question</i>—Paragraph .208 (paragraph 1(b) and (e) of appendix B) of the standards discusses the reviewed firm’s requirement to inform the reviewer of communications or summaries of communications from regulatory, monitoring, or enforcement bodies relating to allegations or investigations of deficiencies in the conduct of an accounting,</p>	<p>100.A15 Regulatory bodies may include, but are not limited to, the following:</p> <ul style="list-style-type: none"> a. The AICPA or state CPA society ethics committees b. The AICPA Joint Trial Board c. State boards of accountancy 	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>auditing, or attestation engagement performed and reported on by the firm. What are the objectives of this requirement and what are some examples, although not an all-inclusive list, of such communications?</p> <p><i>Interpretation</i>—The objective of the firm informing its reviewer of such communications or summaries of communications is to enhance the risk-based approach to peer review by allowing the reviewer to better plan and perform the review, including engagement, industry, office, and owner selection that should be given greater emphasis in the review. It is expected that the reviewer and the firm will discuss these communications and that the firm will be able to submit the actual documentation to the reviewer in those circumstances that the reviewer deems appropriate. The reviewed firm is not required to submit confidential documents to the reviewer but should be able to discuss the relevant matters and answer the reviewer’s questions. The information should be provided in sufficient detail for the reviewer to consider its effect on the scope of the peer review.</p> <p>It is also expected that the reviewer and firm will discuss notifications of limitations or restrictions on the reviewed firm’s ability to</p>	<ul style="list-style-type: none"> d. The SEC e. The PCAOB f. The Department of Labor g. The Department of Health and Human Services h. Other governmental agencies or other organizations that have the authority to regulate accountants (in connection with engagements within the firm’s accounting and auditing practice) 	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>practice public accounting by regulatory, monitoring or enforcement bodies.</p> <p>There are many types of communications that are appropriately related to meeting the objectives described in this interpretation. The following list, which is not intended to be all inclusive, represents examples of the types of organizations where communications would be relevant to meeting the objectives of the requirement:</p> <ul style="list-style-type: none"> <i>a.</i> AICPA or State CPA Society Ethics Committees <i>b.</i> AICPA Joint Trial Board <i>c.</i> State boards of accountancy <i>d.</i> SEC <i>e.</i> PCAOB <i>f.</i> State auditor <i>g.</i> Department of Labor <i>h.</i> Employee Benefits Security Administration <i>i.</i> Government Accountability Office 		

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<ul style="list-style-type: none"> <i>j.</i> Office of Management and Budget <i>k.</i> Department of Housing and Urban Development <i>l.</i> FDIC <i>m.</i> Office of Thrift and Supervision <i>n.</i> Federal or State Inspector General's Offices <i>o.</i> Rural Utility Service <i>p.</i> Other governmental agencies or other organizations that have the authority to regulate accountants (in connection with the firm's accounting, auditing, or attestation engagements) 		
<p>208-8d-2</p> <p><i>Question</i>—What if a reviewed firm chooses not to discuss or make such communications or notifications available to the reviewer during the review?</p> <p><i>Interpretation</i>—If a firm fails to discuss such communications with the reviewer, the reviewer should immediately consult with the relevant administering entity because this constitutes a failure to cooperate, and the firm</p>	<p>210.65 If a firm fails to discuss significant issues from reports and communications from regulatory, monitoring and enforcement bodies with the team captain, the team captain should immediately consult with the administering entity because this constitutes a failure to cooperate, and the firm would be subject to fair procedures that could result in the firm's enrollment in the program being terminated. (Ref: par. .A58)</p> <p>210.A58 Examples of how a team captain may discover significant issues are:</p>	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
<p>would be subject to fair procedures that could result in the firm’s enrollment in the program being terminated (see interpretations).</p>	<ul style="list-style-type: none"> a. The team captain reviews the referral database and identifies a referral specific to the firm or a professional within the firm. b. The administering entity provides the team captain with a referral. c. The team captain identifies information about significant issues within a firm from a news outlet or publicly available website (for example, the PCAOB, State Board of Accountancy, and so on). <p>220.30 If a firm fails to discuss significant issues from reports and communications from regulatory, monitoring and enforcement bodies with the review captain, the review captain should immediately consult with the relevant administering entity because this constitutes a failure to cooperate, and the firm would be subject to fair procedures that could result in the firm’s enrollment in the program being terminated. (Ref: par. .A18)</p> <p>220.A18 Examples of how a review captain may discover significant issues include:</p> <ul style="list-style-type: none"> a. The review captain reviews the referral database and identifies a referral 	

<i>PRP Section 2000</i>	<i>PR-C Reference</i>	<i>Explanation</i>
	<p>specific to the firm or a professional within the firm.</p> <ul style="list-style-type: none"> <li data-bbox="1016 337 1545 407">b. The administering entity provides the review captain with a referral. <li data-bbox="1016 412 1545 591">c. The review captain identifies information about significant issues within a firm from a news outlet or publicly available website (i.e. PCAOB). 	