

Home > Submitting Firm Peer Review Information (PRI) in PRIMA

## Submitting Firm Peer Review Information (PRI) in PRIMA

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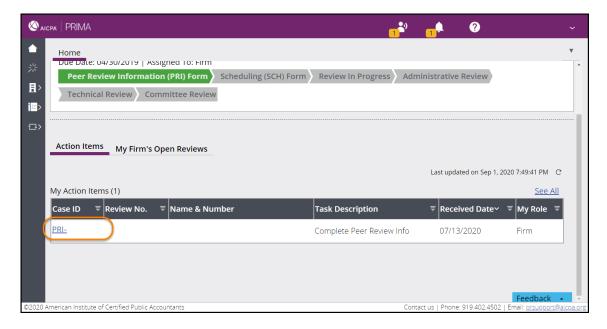
For video instructions, see Submitting Firm Peer Review Information (PRI) in PRIMA - Video.

**Note:** For each of the sections below, you will see a purple header accompanied with an up arrow. Clicking on the arrow will expand and collapse each region, displaying additional information.



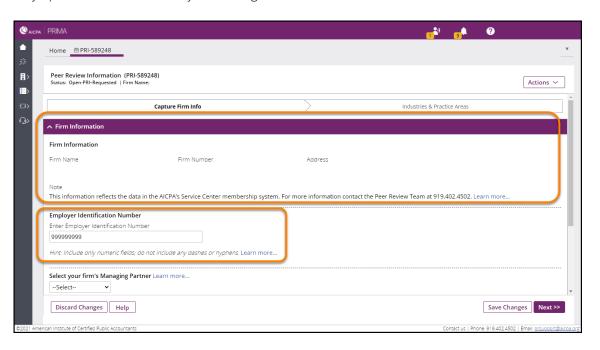
To complete the Peer Review Information form, perform the following steps:

1. Under Action Items, click the Peer Review Information (PRI) Case ID.



2. Review **Firm Information** by clicking on the arrow to expand the section. Clicking on the arrow again will collapse the section.

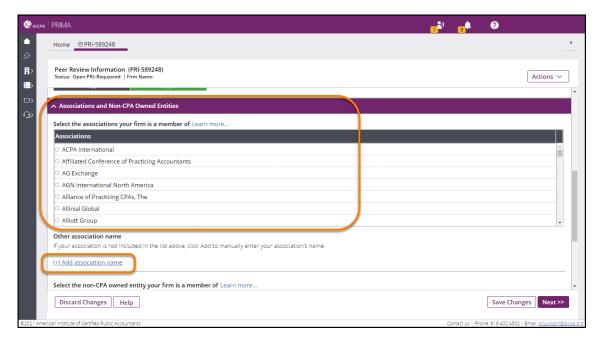
**Note:** This information reflects the data in the AICPA's Service Center membership system. You may update the information by contacting the Peer Review Team at 919.402.4502.



3. If applicable, select any **Associations** your firm is a member of by checking the box. If you need to remove an Association, uncheck the checkbox.

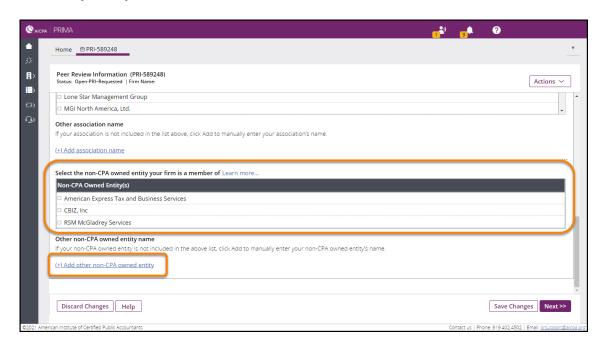
If your association is not included in the list, click **Add association name** to manually enter your association's name.

**Note:** If you clicked the **Add association name** button in error, you will need to click on the trash icon in order to move forward.



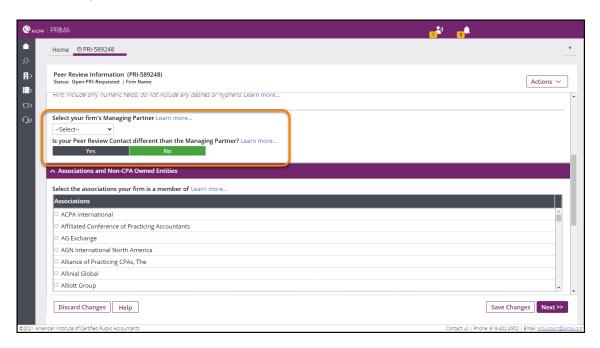
4. If applicable, select any **Non-CPA owned entities** your firm is a member of.

If your Non-CPA owned entity is not included in the list, click **Add other non-CPA owned entity** to manually enter your entities name.

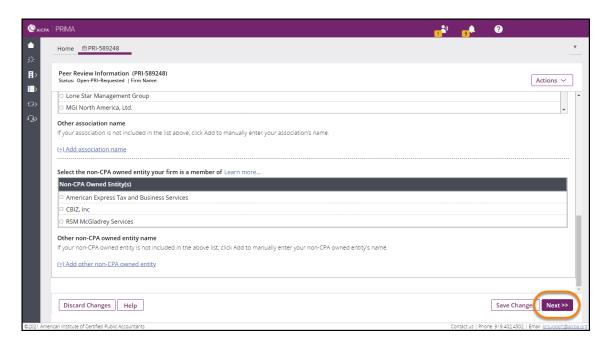


5. Review Managing Partner and Peer Review Contact information.

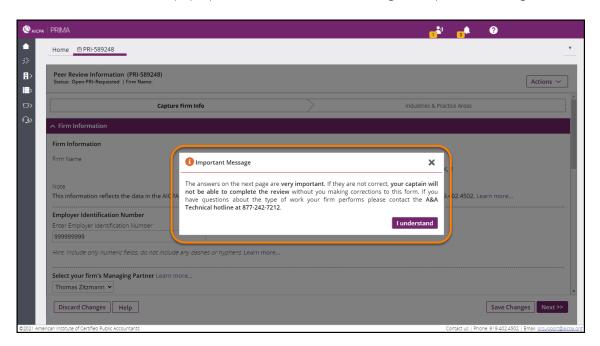
**Note:** If the Managing Partner or Peer Review Contact is not visible in the drop down and you are the managing partner, please send an email to <a href="mailto:prsupport@aicpa.org">prsupport@aicpa.org</a> with your name and email address to update the information in PRIMA.



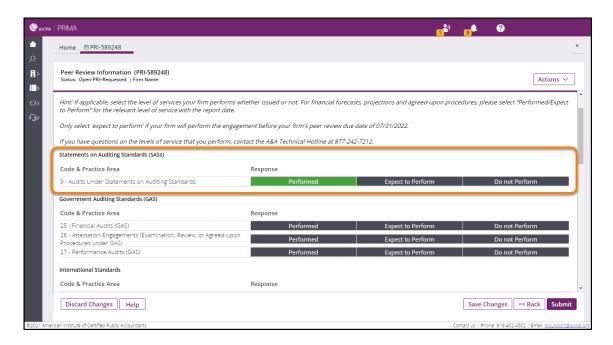
6. Click **Next** after reviewing your **Firm Personnel** information.



7. Click **I understand** on the pop-up to move forward after reading the important message.



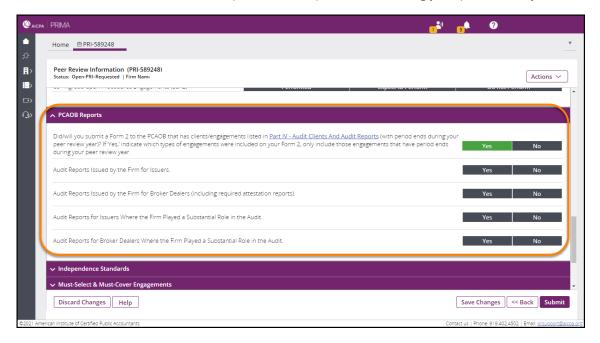
8. Review **Engagement Levels of Service To Determine Review Type**. Update your responses as necessary.



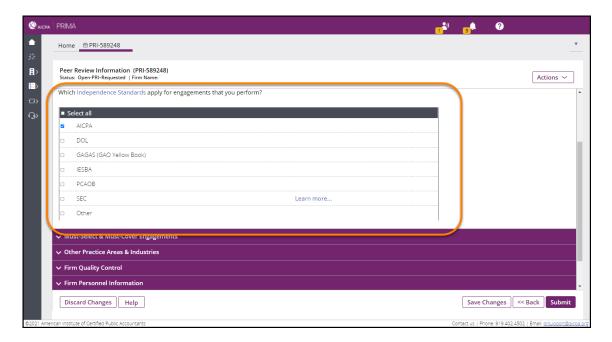
9. Review **PCAOB Reports** selections. Update your responses as necessary.

If your firm is not registered with the PCAOB, answer **No** to the first question. Selecting **Yes** will populate four **Audit Report** questions, and selecting yes to any of these four questions will generate the final PCAOB report question.

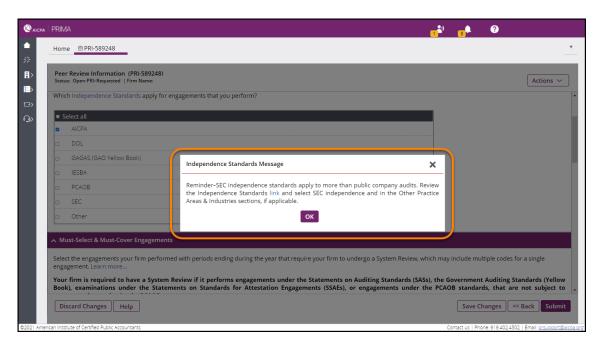
If your firm is registered with the PCAOB, using the categories on the Form 2 submitted to the PCAOB, indicate which services were provided with period ends during your peer review year.



10. Under **Independence Standards**, click the **Independence Standards** link to review the list. Click the checkbox next to the appropriate Standards.

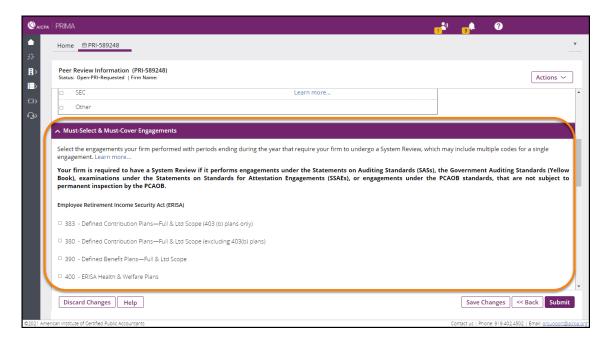


11. Click **OK** after reviewing the **Independence Standards Message**.



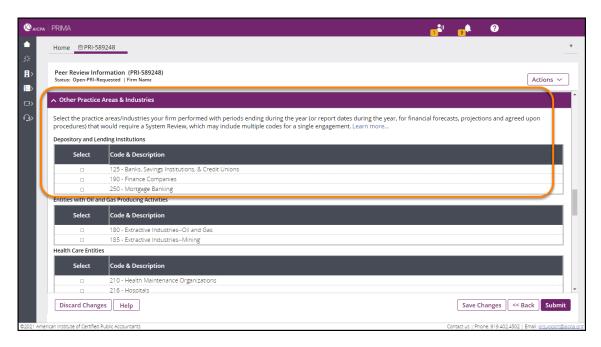
12. For System Reviews only, update the **Must-Select & Must-Cover Engagements** responses as necessary.

**Note:** If none are applicable to your firm, select **None of the Must-Select or Must-Cover Practice Areas/Industries Apply**.

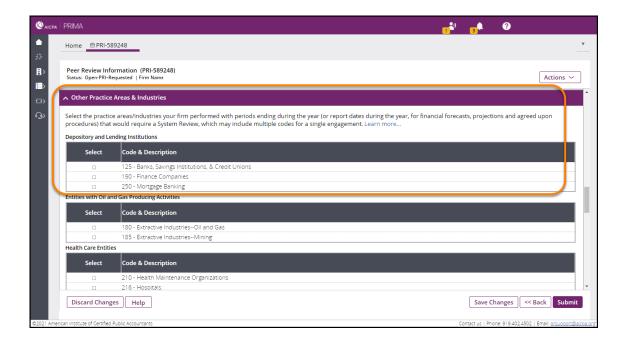


13. For System Reviews only, review the **Other Practice Areas & Industries** and select those applicable to the engagements that require your firm to have a System Review.

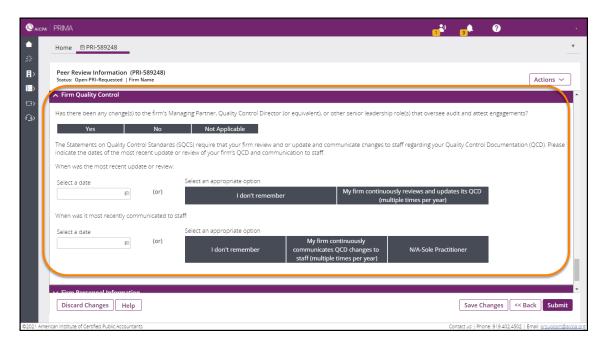
**Note**: If none are applicable to your firm, select **None of the other Practice Areas/Industries apply**.



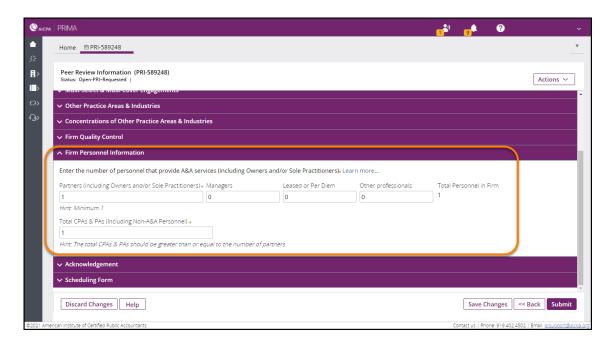
14. For System Reviews only, selections from the previous step are listed under **Concentrations of Other Practice Areas & Industries**.



15. Answer the following questions based upon your firms system of **quality control** regarding if there have been any changes in leadership of the quality control system, when the most recent review/update occurred, and when the most communication to staff was performed.

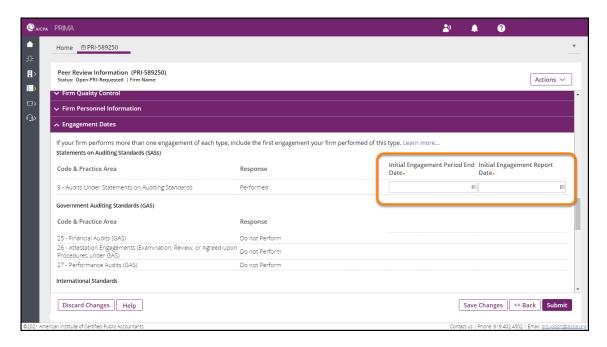


16. Complete your **Firm Personnel** information.

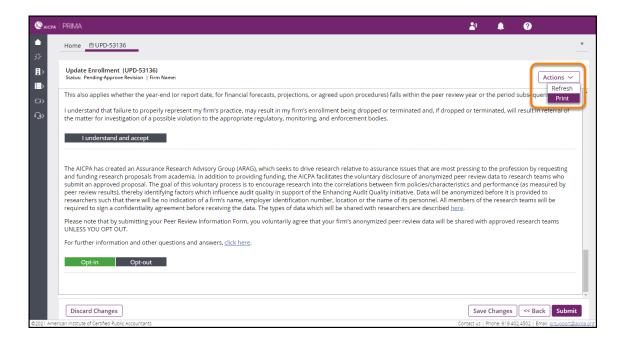


17. For new engagements, enter in the appropriate **Period End** and **Report** date.

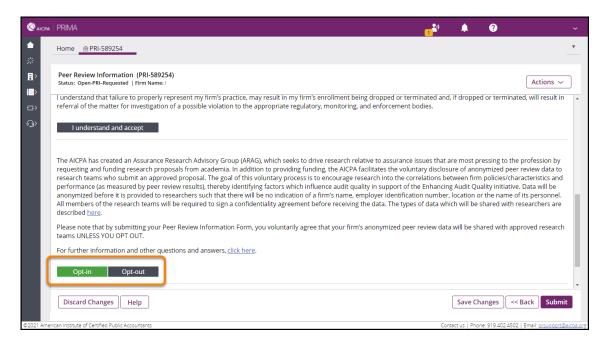
**Note:** This step will not show if you did not select any new engagements that were selected in your **Industries & Practice Areas** section.



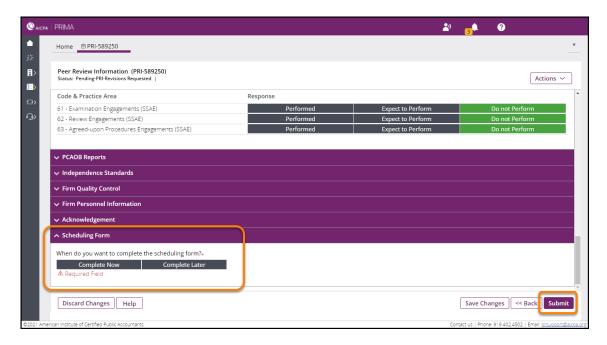
18. To print the summary before submitting, click **Print** 



19. Select **Acknowledgements.** The box refers to participation in a voluntary, anonymous research program. Selection is an OPT OUT and is optional.



20. To submit the form and open the scheduling case so that you can select a reviewer, click **Complete Now** to continue with completing the Scheduling Form. To submit the PRI and complete the Scheduling Form later, click **Complete Later** and click **Submit** to complete the PRI. A scheduling case will be added to the **Action Items** list on the **Home** tab.

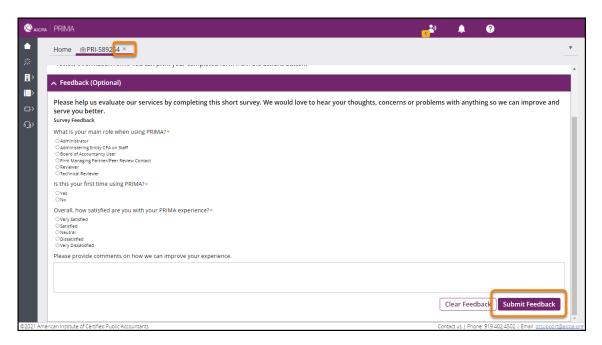


21. The **Feedback** section is optional. Your feedback is encouraged as it helps us to improve the PRIMA systems for future improvements.

To provide feedback, click the radio buttons next to your response and click **Submit Feedback.** 

If you do not want to provide feedback, you can close the tab by selecting the **"X"** at the top of the tab.

**Note:** You will need to hover your mouse over the tab to reveal the "X".



For instructions on completing the scheduling form, see Entering Review Scheduling Information in PRIMA (Firm).

## **Related Article:**

Industry Codes and Practice Areas in PRIMA

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