

UK Transparency Report 2024

In respect of the year ended **30 September 2024**



Introduction

This Transparency Report provides information about our firm's governance, culture, relentless focus on quality, and processes for risk management.

Whilst KPMG is a multi-disciplinary firm, the report is primarily focused on our Audit practice and the policies and programmes we have in place to support audit quality.

The information disclosed relates to KPMG in the UK's activities as at 30 September 2024, and demonstrates compliance with the following reporting requirements:

- Audit Firm Governance Code (Revised 2022).
- Article 13 (Transparency Report) of Regulation (EU) No 537/2014 of the European Parliament and of the Council – as amended by The Statutory Auditors and Third Country Auditors (Amendment) (EU Exit) Regulations 2019.
- The Local Auditors (Transparency) Regulations 2020.
- Consultative Committee of Accountancy Bodies Voluntary Code of Operative Practice on Disclosure of Audit Profitability (March 2009).
- The FRC's principles for operational separation of the audit practices of the Big Four firms.

The pages that follow provide an overview of where information in response to each requirement can be found.

Jon Holt

Jon Holt / Group Chief Executive & UK Senior Partner

For and on behalf of KPMG LLP

29 January 2025



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Our commitment to audit quality

Audit quality is fundamental to maintaining public trust and is the key measure on which our professional reputation stands.

We define “audit quality” as the outcome when audits are executed consistently, in line with the requirements and intent of applicable professional standards within a strong system of quality management.

All of our related activities are undertaken in an environment of the utmost level of objectivity, independence, ethics and integrity.

To that end, KPMG has a Global Quality Framework (GQF) for use across KPMG globally. This framework guides how we work and how we approach the audit. It helps ensure a consistent approach with quality at its heart.

To provide more transparency on what drives KPMG audit and assurance quality, this report is structured around the KPMG Global Quality Framework.

The drivers outlined in the Framework are the ten components of our KPMG system of quality management (SoQM). In line with the International Standard on Quality Management (ISQM) 1, our SoQM also aligns with the requirements of the International Code of Ethics for Professional Accountants (including International Independence Standards) issued by the International Ethics Standards Board for Accountants (IESBA), which apply to professional services firms that perform audits of financial statements.

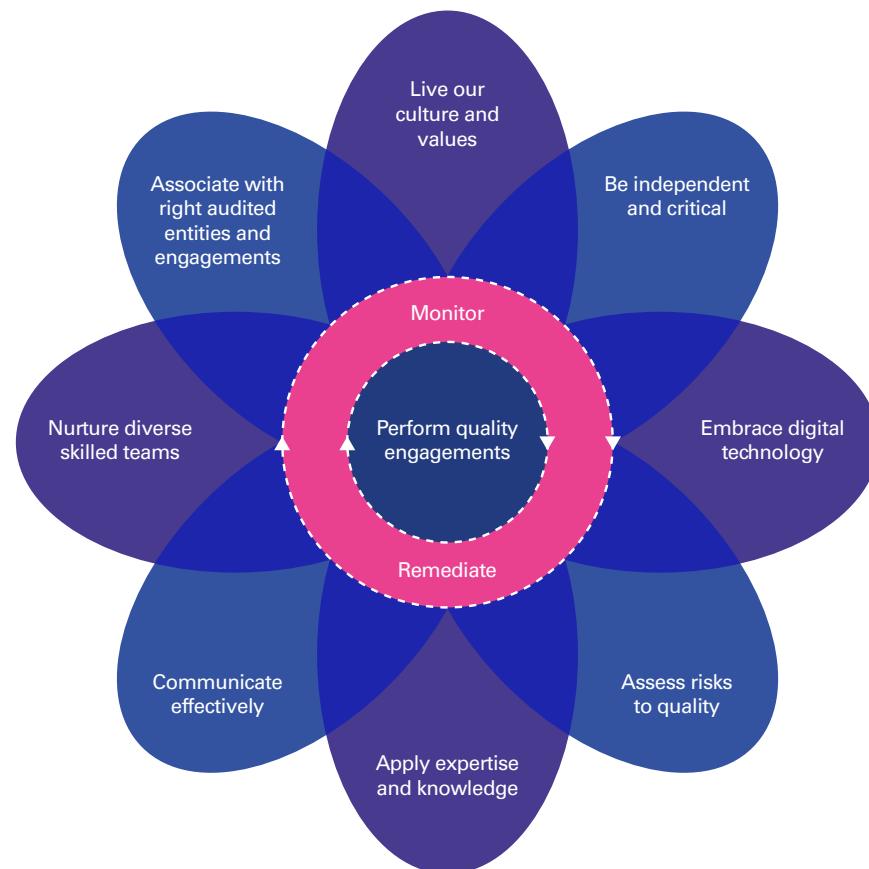
Visit the [Audit quality](#) section for more information on the components of this framework, and the activities we've delivered during the year against it.

Under ISQM1 we are required to evaluate the effectiveness of our system of quality management on an annual basis. Our first evaluation was performed as of 30 September 2023.

Based on the annual evaluation of the firm's System of Quality Management as of 30 September 2024, the System of Quality Management provides the firm with reasonable assurance that the objectives of the System of Quality Management are being achieved.

Our full Statement on the effectiveness of the System of Quality Management of KPMG UK LLP as at 30 September 2024 can be found [here](#).

Our Global Quality Framework



01

Leadership and governance

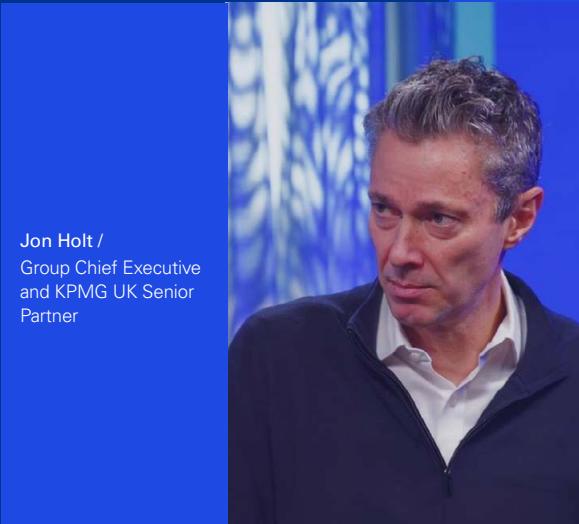


Messages from our leadership

In line with our purpose and values, our approach to leadership is focused on transparency, fairness, accountability, and responsibility.

Bina Mehta, our Chair, is responsible for leading the Board, ensuring it fulfils its responsibilities to set the tone from the top, oversee strategy and hold leadership to account. The Chair is accountable to the partners in fulfilling these responsibilities.

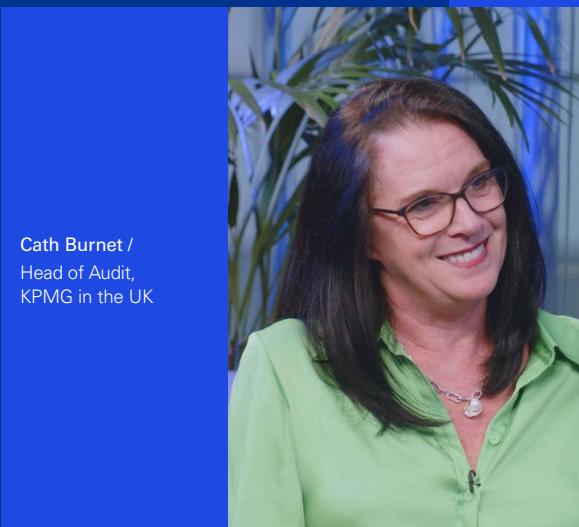
Jon Holt, our Chief Executive and Senior Partner, is responsible for leading the whole business of the multi-disciplinary firm and is accountable for the executive leadership's execution of the firm's Board-approved strategy. The Chief Executive is accountable to the Board and the partners in fulfilling these responsibilities.



Jon Holt /
Group Chief Executive
and KPMG UK Senior
Partner



Bina Mehta /
Chair, KPMG in the UK



Cath Burnet /
Head of Audit,
KPMG in the UK



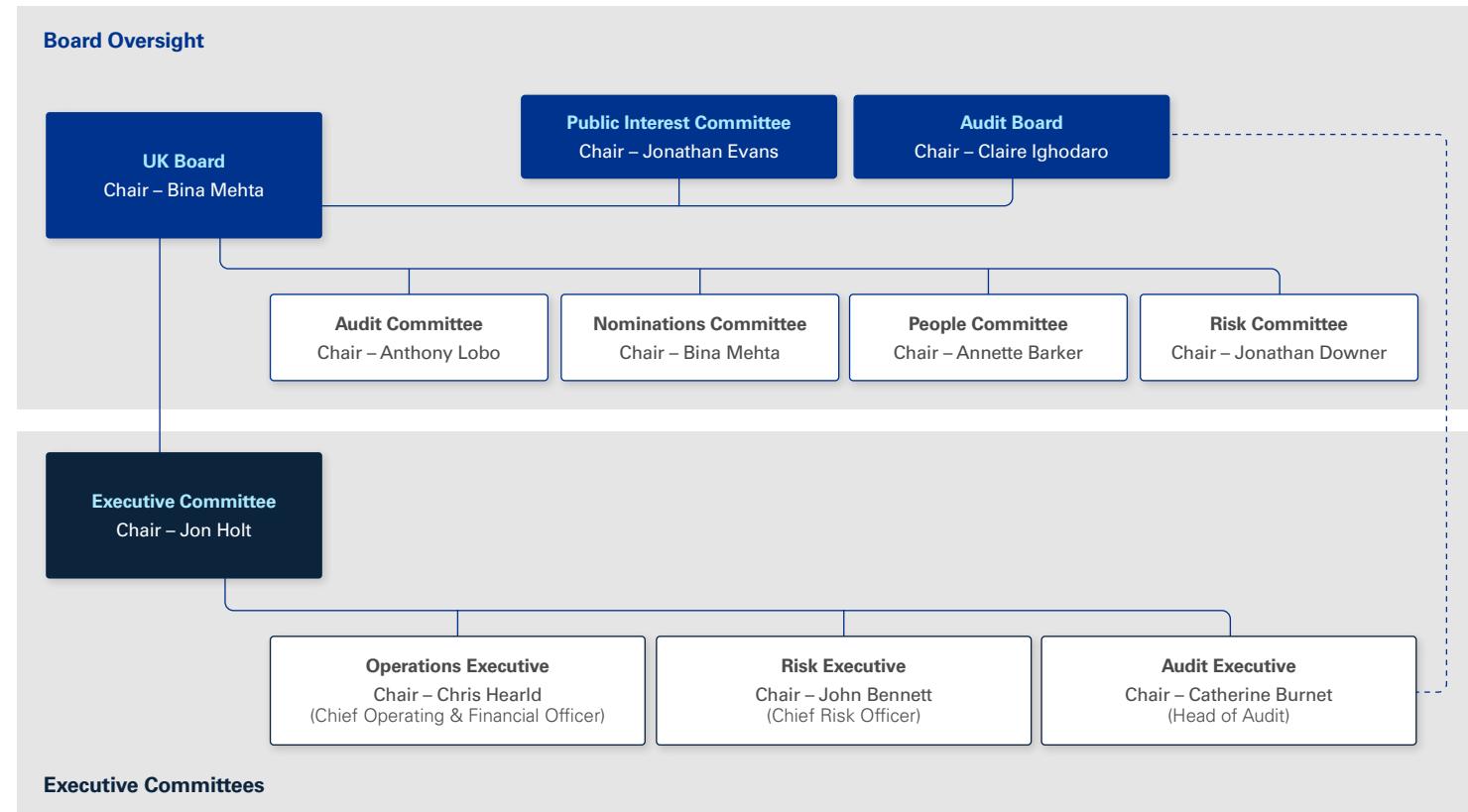
Jonathan Evans /
Chair of the Public
Interest Committee
Claire Ighodaro /
Chair of the Audit Board

UK governance structure

More information about the role, membership and activities delivered during FY24 for each of the governance forums above is provided in the Appendices.

As a result of the merger between KPMG Switzerland and KPMG UK, a new governance structure has been established which came into effect on 1 October 2024. For details regarding the new structure, including membership and roles and responsibilities, and the terms of reference, please visit our [website](#).

UK governance structure at 30 September 2024



02

People and culture



Our people in numbers

Number of people (onshore) in Audit / **5,367**



1 Oct 24
(1 Oct 23: 5,647)

Number of people (offshore) in Audit / **1,938**



1 Oct 24
(1 Oct 23: 2,060)

% of women in Audit / **48%**



1 Oct 24
(1 Oct 23: 47%)

% of women Partners¹ in Audit / **30%**



Average FY24
(Average FY23: 29%)

% of ethnic minority colleagues in Audit / **43%**



1 Oct 24
(1 Oct 23: 43%)

% of ethnic minority Partners¹ in Audit / **12%**



Average FY24
(Average FY23: 13%)

% of black heritage colleagues in Audit / **9%**



1 Oct 24
(1 Oct 23: 10%)

% of disabled colleagues in Audit / **6%**



1 Oct 24
(1 Oct 23: 6%)

% of lesbian, gay & bi colleagues in Audit / **4%**



1 Oct 24
(1 Oct 23: 5%)

% of lower socio-economic background colleagues in Audit / **17%**



1 Oct 24
(1 Oct 23: 17%)

Total number of promotions in Audit this year / **682**



1 Oct 24
(1 Oct 23: 771)

Number of Partner promotions in Audit this year / **14**



1 Oct 24
(1 Oct 23: 7)

Audit colleagues that feel proud to work for KPMG / **83%**



2024 Global People Survey²
(2023: 81%)

1 Based on all partners in the audit practice. If this was based on equity partners only the percentages would be women partners FY24 26% (FY23 26%), and on ethnic minority partners FY24 8% (FY23 10%).

2 2024 Global People Survey data is based on 3,882 Audit colleague responses (2023: 4,055 Audit colleague responses).

Firm-wide culture

At KPMG we are guided by our values and doing great work that matters.

Our values represent what we believe in and who we aspire to be: Integrity, Excellence, Courage, Together, For Better.

Our values bind us together, across our different backgrounds and cultures, and are common to each of us. They guide our behaviours day-to-day, informing how we act, the decisions we take, and how we work with each other.

We have set a bold ambition to become the most trusted and trustworthy professional services firm. To achieve that, we need to build our culture with trust at the core. Our values are key to this.

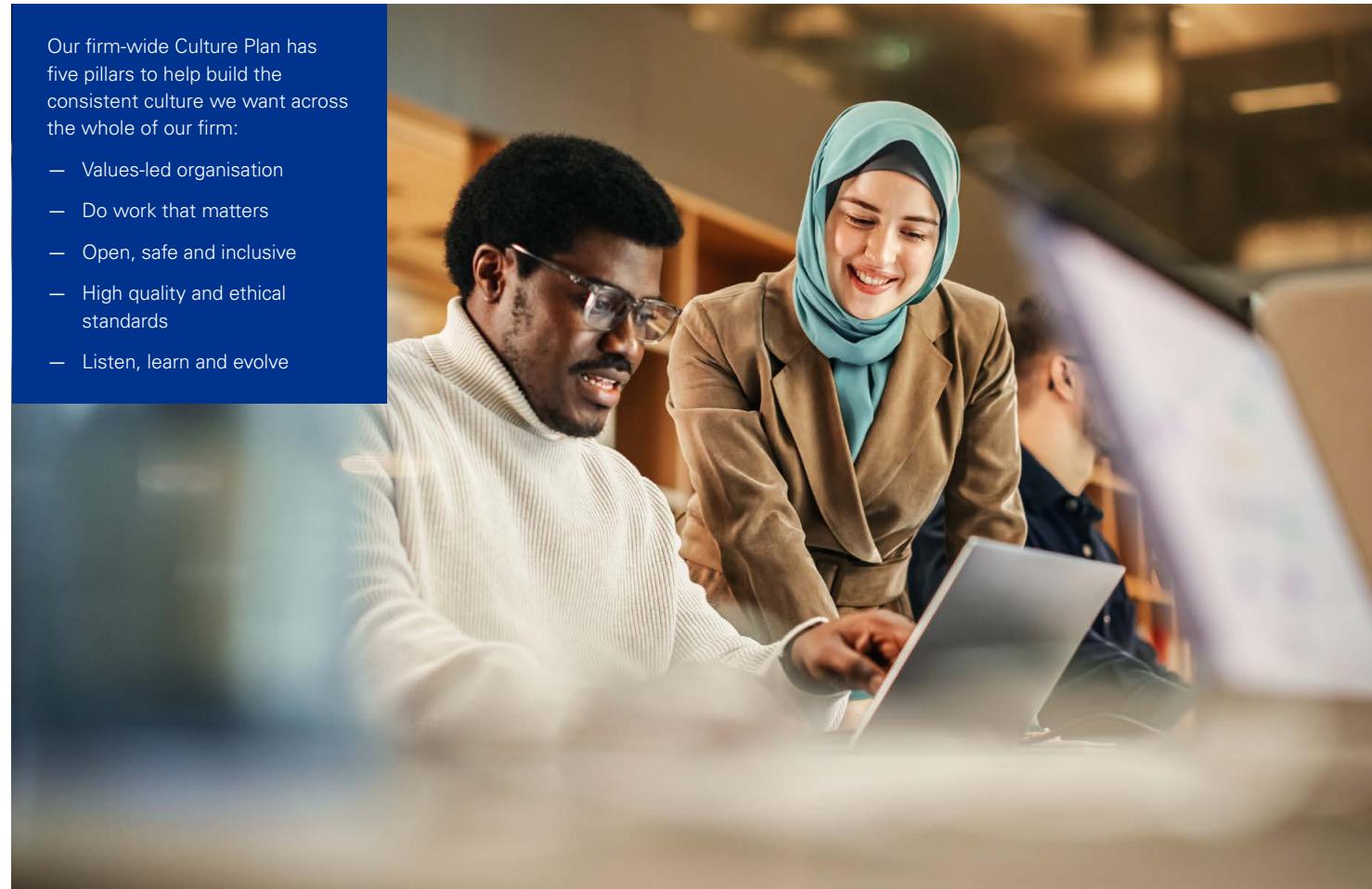
We're building a culture that is open, safe and inclusive, and that operates to the highest ethical and quality standards. A culture and environment that is continually listening, evolving and learning.

You can find out more about our firm's culture [here](#).

Our risk management principles (see [Quality Control and Risk Management](#) Section) help us to ensure we manage risks that we take across the firm and act responsibly in line with our values.

Our firm-wide Culture Plan has five pillars to help build the consistent culture we want across the whole of our firm:

- Values-led organisation
- Do work that matters
- Open, safe and inclusive
- High quality and ethical standards
- Listen, learn and evolve



Audit culture

In Audit, we have eight practical goals enabling us to embed a High Challenge, High Support culture.

These goals are aligned to the five firm-wide Culture Plan pillars:



Firm-wide Culture Plan pillar	Audit culture goal
Values-led organisation	1. We lead with integrity
Do work that matters	2. Do work that matters
Open, safe and inclusive	3. We foster an open, safe and inclusive environment
High quality and ethical standards	4. Uphold highest ethical and quality standards 5. Recognition, measurement and reporting 6. Culture of challenge 7. Quality coaching
Listen, learn and evolve	8. We listen, learn and evolve

We recognise that having the right culture drives a professional scepticism mindset and empowers our people to thrive with us and learn for a lifetime. Creating and nurturing the right culture improves audit quality and supports the effective delivery and growth of our business. We provide the right environment to support our people and give them opportunities to develop their skills and gain relevant experience.

Our culture programme activities are foundational to our strategy in Audit. This programme of work has matured, and we have built resources, local networks and mechanisms to constantly embed that culture, with leaders demonstrating the right behaviours.

We continue to be highly encouraged by the extent to which our High Challenge, High Support culture resonates with Audit colleagues. Our 2024 Global People Survey results show that 74% of our people see KPMG as taking the right steps to strengthen the culture, which indicates our continued focus on this is being recognised amongst colleagues.

Audit culture

The eight goals of our High Challenge, High Support culture in Audit.

Our eight Audit culture goals enable us to have alignment with the whole firm culture approach, while also accommodating the specific needs and dynamics of the Audit environment.

1. We lead with integrity

We continue to ensure that our values and cultural mindset are driven from the top, with leadership demonstrating and communicating a commitment to quality, ethics and integrity which can cascade down through the organisation.

Leaders are key in setting the tone and embodying the values we aspire to – and they also need to be accessible and available to colleagues. That is why we have continued to give colleagues the opportunity to share their views with leadership, through a variety of mechanisms such as open forums and informal events.

Following the success of KPMG UK's Values Week in November 2022, a Global Values Week took place in November 2023 to celebrate the importance of our values across our global firm. Each day of the week focused on a different value, with daily guest speaker events broadcast to colleagues across all member firms.

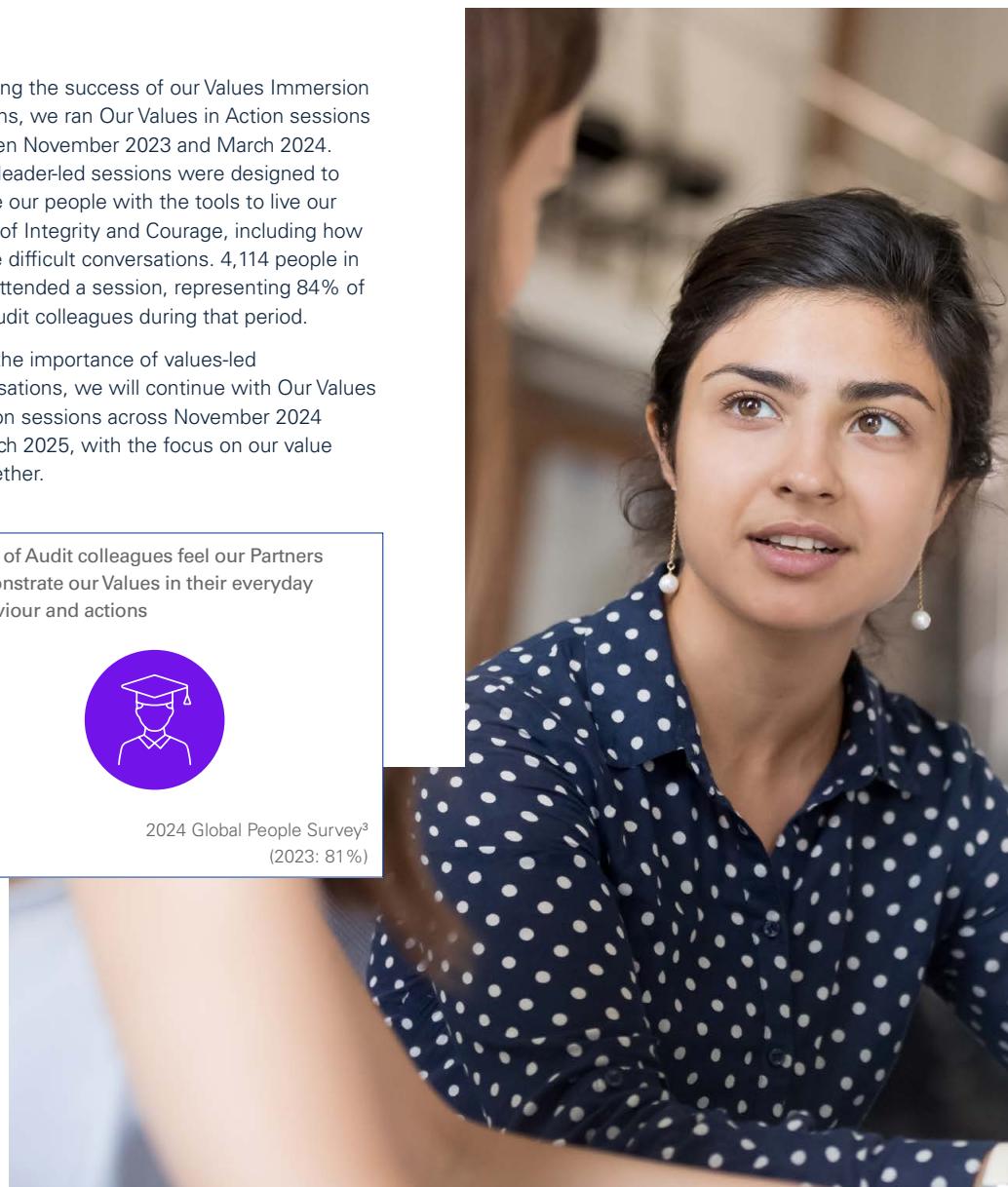
Following the success of our Values Immersion Sessions, we ran Our Values in Action sessions between November 2023 and March 2024. These leader-led sessions were designed to provide our people with the tools to live our values of Integrity and Courage, including how to have difficult conversations. 4,114 people in Audit attended a session, representing 84% of total Audit colleagues during that period.

Given the importance of values-led conversations, we will continue with Our Values in Action sessions across November 2024 to March 2025, with the focus on our value of Together.

76% of Audit colleagues feel our Partners demonstrate our Values in their everyday behaviour and actions



2024 Global People Survey³
(2023: 81%)



³ 2024 Global People Survey data is based on 3,882 Audit colleague responses (2023: 4,055 Audit colleague responses).

Audit culture

Continued

2. Do work that matters

Our purpose is to support sustainability and resilience in our society by building investor trust. It has never been more vital to ensure a properly functioning audit market, as audit plays a pivotal role in the economy.

We participate in a number of public interest initiatives such as the Spring Report on audit quality, as well as running our Audit Committee Institute (also known as our Board Leadership Centre) and a wider investor engagement programme – see the [Audit quality](#) (External communication and engagement section) of this report for more details.

Improving social mobility in our local communities is another aspect of doing work that matters and is at the heart of our communities strategy. Through our flagship social mobility programme, Opening Doors to Opportunities, we aim to give one million young people the opportunity to develop their skills by 2030. In the past year we have supported 332,357 young people to develop the essential skills and workplace insights they will need to thrive in their careers, hosting over 7,000 of them in our offices.

In terms of our Strategic Philanthropy work, this year marks the culmination of our three-year National Charity Partnership with Marie Curie, through which our colleagues have raised £1.868m in funds, providing more than 81,000 hours of nursing, while also bringing colleagues together, supporting wellbeing and connection across the Firm.

1,482 Audit colleagues (28% of audit) took part in KPMG Big Walks over the summer months to raise money for Marie Curie, contributing approximately £116,500 equating to 5065 hours of nursing care. This summer colleagues voted for FareShare to be our new National Charity Partner, with whom we are delighted to be working for the coming three years.

In our 2024 Global People Survey (GPS) survey, 70% of Audit colleagues responded that they are encouraged to contribute to their community and 74% feel that KPMG is socially responsible towards communities.



Audit culture

Continued

3. We foster an open, safe and inclusive environment

Inclusion, Diversity and Equity (IDE)

Our strategy to build trust and grow our firm is underpinned by an inclusive culture. Fostering an open, safe and speak-up culture is crucial to promoting diversity, equity, and a sense of belonging. Within Audit we use many culture interventions and activities that promote a psychologically safe environment where colleagues feel confident to speak up and challenge the day-to-day.

This is reflected in our GPS survey which saw a 4 percentage point increase in colleagues believing that they could report unethical practices without fear of negative impacts.

Our leaders are committed to driving change and are held accountable, with set targets and action plans to 2030 for IDE which they're measured against regularly. We also remain committed to being transparent about our remuneration and pay gaps. In 2021 we became one of the first UK businesses to publish our socio-economic background pay gaps, and we continue to report on our pay gaps against several under-represented characteristics (our current and historical Pay Gap Reports can be found [here](#)).

Examples of our commitment to date include:

Inclusive Leadership Board (ILB) – The ILB started in 2016 and is a collection of internal senior stakeholders and a number of external consultants who meet once a quarter to advise KPMG on our Talent strategy, specifically from an inclusion perspective. In 2024, topics discussed included considerations of international work opportunities for our colleagues, the merger of KPMG Switzerland and KPMG UK, and the use of AI.

IDE training – Our mandatory training 'Enhancing our Vision' was launched in 2022 to all KPMG UK partners and employees and was refreshed for 2024. It is designed to engage colleagues, encouraging them to reflect on how their identities influence their experiences and how other people may experience things differently. The module covers the legal and regulatory landscape with specific reference to the Equality Act 2010 and protected characteristics. It outlines colleagues' roles and responsibilities in helping the firm meet our obligations under the law and our own policies, including our firm-wide policy on Inclusion, Diversity and Equity. The training includes significant levels of user-generated content to drive engagement.

Ask Me Anything sessions – These have been rolled out across 23 engagements in Banking Audit to encourage a breaking down of silos and hierarchy as well as building psychological safety within teams. Many topics have been positively discussed, and our people have welcomed the opportunity to ask questions about any topics that are important to them. These sessions continue to be rolled out across the whole of Audit through our Culture Ambassador network.

Employee networks – In our bid to build an inclusive culture, we have 16 employee networks open to all, providing a sense of community and creating learning experiences for those who want to increase their own diversity awareness or become an ally. They deliver a calendar of events throughout the year to celebrate key moments, where people can voice their own lived experiences and provide vital feedback and insight to leadership.

We are proud to have been recognised externally as a Times Top 50 Employer for Gender Equality; as a Disability Confident Leader; as a top 30 employer in the 2024 Stonewall Workplace Equality Index; and to have ranked in the top five in the Social Mobility Employer Index every year since its inception in 2017.

When considering our talent, we strive to attract people from all backgrounds at every stage of their career and empower them to reach their full potential. To help us access diverse talent pools we have engaged with specialist recruitment agencies such as Auticon who improve the employment prospects of autistic people by helping find high-quality careers for skilled neurodiverse adults. We also work with Gap Talent who help us reach and place Black heritage hires. In addition, we continue to invest in programmes such as Access Accountancy where all our KPMG Discovery work experience places are for candidates from low socio-economic backgrounds. Additionally, we launched our Cross Company Allyship Programme (CCAP) in 2021 which opens up opportunities for KPMG and client mentors and mentees of Black and/or Minority Ethnic heritage to gain experience and access networks from outside of their own organisations (without the need to move on). Since its inception, 45% of our mentees were either promoted or moved laterally and we have grown the programme fivefold.

Audit culture

Continued



In addition to the above, a number of other Talent Programmes support colleagues from diverse backgrounds, including:

- **Inspire and Elevate** which seeks to support our IDE ambition of building an inclusive environment, accountable leaders and equitable experiences. The programme is available to all, with a focus on colleagues from historically under-represented groups.
- **The Black Heritage Allyship Programme (BHAP)** that has been running annually since July 2020 pairs mentees and mentors across KPMG for the purposes of reciprocal mentoring, coaching and sponsorship. Since 2020, we have successfully run four cohorts with over 1,000 people in KPMG signing up to BHAP and over 300 pairings. The survey feedback from the programme has been very positive, with 32% of Black heritage colleagues from Cohort 1 and 2 being promoted within 12 months of joining the programme.
- **IT's Her Future** is a dedicated company-wide initiative at KPMG designed to address and mitigate the various challenges and disparities women face in the technology sector. Driven by a collaborative group of committed people, we drive targeted strategies to attract, recruit, retain and advance women in tech careers.

Wellbeing

Our people are what make our firm a success. We recognise the importance of health and wellbeing in enabling our people to be at their best – so we make it a priority. We provide all our colleagues with extensive access to essential services, guidance and support networks, helping them thrive at work and at home. We have a network of wellbeing ambassadors who promote wellbeing at a local level, and we have successfully piloted Mental Health First Aiders in a Performance Group within Audit. We are providing training to HR Business Partners to expand the network.

We deliver an annual wellbeing week at the beginning of January to help our Audit teams prepare for busy season. This focuses on a number of key topics each year, including creating awareness and providing tips on how to manage burnout, imposter syndrome and stress, and build resilience. We previously launched the winning idea, 'Focus Time Working' from our wellbeing innovation challenge as part of our January 2022 wellbeing week which we have reinforced this year with the Viva Insights application from Microsoft which is automatically enabled for every colleague. This tool populates dedicated periods of time within a colleague's working day to disconnect from all distractions and complete their work. It silences pop ups, notifications and calls and is used at all grades. Positively, we have seen a 6 percentage point increase in our annual GPS survey for colleagues reporting that their workload allows them the time to deliver work of an appropriate quality, indicating that embedding these tools is having a positive impact.

We have also launched specific Leadership wellbeing initiatives to support our leaders, including partnering with an external consultancy to deliver a session on Belonging & Connectivity, which had a focus on loneliness. Key topics included normalising the experience of loneliness and why belonging is important, and then a more practical focus on how to connect in a hybrid working environment including top tips for our leaders and their teams. Feedback from the session was positive and the resources have been embedded into our Leadership Playbook for all leaders and colleagues to reference.

We are in the process of running upskilling sessions for our Performance Leaders and Performance Managers on mental health in the workplace to support them in having conversations with colleagues and enable them to signpost resources available.

We arranged for Bupa to run a session on financial wellbeing over the summer, sharing top tips for colleagues on how they can build and maintain their financial wellbeing, manage financial stress, and use budgeting tools to track their finances.

We are exploring ways in which we can better support our overseas new joiners from a wellbeing perspective. We are currently working with some overseas new joiners to share their experiences and to offer practical advice to other overseas colleagues.

Audit culture

Continued

Driving quality through fair opportunity

One of the key drivers of quality is making sure we assign people with the right level of skills and experience to the right engagements. Doing this requires a focus on the recruitment, development, promotion and retention of our people, and the development of robust capacity and resource management processes.

Key considerations include experience, accreditation, training and capacity in view of the size, complexity, industry and risk profile of the engagement and the type of support to be provided. This may include involving local specialists or those from other KPMG member firms.

We know that getting this right also has a huge impact on the opportunities and career development of our people from historically under-represented groups. We ensure that engagements and projects are allocated fairly.

Recruitment

To effectively attract talent and keep our business fit for the future, we ensure our KPMG brand and related external marketing content is relevant and impactful for a diverse, high calibre talent pool. This also helps us attract candidates globally to the UK practice.

To ensure we are identifying the best candidate, they follow a thorough selection process which, depending on the role, includes:

- Application screening.
- Competency & Technical interviews.
- Fit and proper checks.
- Independent Panel Process (Director & Partner).
- Psychometric and ability testing.
- Qualification and reference checks.

In FY24, we introduced a new Core Audit Technical interview guide with updated technical questions relating to audit quality and sector/industry relevant topics, alongside a refreshed competency interview guide.

A revised Audit interview training pathway has also been introduced for our Hiring Managers in Core Audit, available through our Learning platform, Degreed.

Upon joining the firm, qualified joiners take part in an induction programme which includes training in areas such as: ethics and independence, quality and risk management, engagement management and people management procedures, with a particular focus on KPMG's values and culture.

As part of our Audit people strategy, we have recently made a number of significant improvements to the way we onboard and welcome our qualified joiners, helping set them up for success in their new roles. Our induction programme now gives candidates a truly blended experience, learning new skills in a classroom environment and then immediately applying them through on-the-job experience from week one. New joiners receive dedicated support via an online portal and have access to an onboarding experience lead to help them with any early queries. We also recognise that joining from another country brings with it other challenges and have launched a new pre-boarding portal to support international joiners, with buddies assigned from the moment an offer is accepted to provide additional support.

Accelerated Programme

For student attraction specifically, we have continued to build on our flagship graduate programme by launching our front-loaded Accelerated programme for our Class of 2023, where students study towards the ACA qualification. The programme is structured to invest in and boost our graduates' technical abilities up front, making them 'work ready' more quickly. Those on the programme spend the first of three years learning and gaining the majority of their ACA qualification, with around 70% of this learning being delivered face-to-face. This gives our graduates more time and space to get up to speed before being allocated to an engagement, whilst also offering greater opportunity for them to build their professional networks and learn together.

Alongside the core curriculum covered as part of the ACA qualification, we also upskill on professional development and train new graduates in the big issues facing business, like ESG and technology. As part of the wider programme, graduates have the opportunity to participate in a Corporate Responsibility project as a way of helping KPMG give back to our local communities – three days, during their first year, are dedicated to this.

Audit culture

Continued

4. Uphold highest ethical and quality standards

Firm-wide Ethics Programme

To help achieve our culture ambition of ensuring that we consistently operate to the highest ethical standards, in 2022 we developed a formal ethics programme, with the assistance of the Institute of Business Ethics (IBE), which operates across the whole of the firm. The programme is framed around the eight elements in the IBE's Business Ethics Framework, with each element sponsored by a member of our Executive Committee. The programme, which is rolled forward on a semi-annual basis, is overseen by our firm's Ethics Partner who is a member of the Executive. The Executive and the Board are updated every six months on both the delivery of the programme and on what the key MI indicates about the firm's ethical health. In addition, all Capability leadership teams, including the Audit Executive, receive six-monthly ethical health reporting for their part of the business. In both 2023 and 2024, we invited the IBE back to provide an independent perspective on the execution and impact of the programme.

Ethics and reporting

Where colleagues have any concerns about any ethical or conduct issue, they are encouraged to speak to their manager in the first instance if they feel comfortable to do so – but a number of other routes are available. This includes our whistleblowing hotline which is overseen by an external ombudsman and is completely confidential. We also have a network of Ethics Champions – colleagues based at each of our UK offices who are available should colleagues wish to discuss any ethical concerns. In the year to 30 September 2024, there were over 100 Ethics Champions (2023: over 100) nationwide who helped colleagues with 194 concerns they wished to raise (2023: 202). We are pleased to see that our colleagues also continue to use the Speak Up hotline where 66 separate matters were reported (2023: 50). Members of the Audit Board also meet with people around the business several times a year as an important part of taking a temperature check on culture.



Audit culture

Continued

Putting quality at the core of performance evaluation and remuneration

To effectively manage our talent and support the development and progression of our colleagues, we embed a number of key approaches in performance evaluation, remuneration and personal development. These ensure that our business is fit for the future and that we are building our internal talent pool sustainably with a future-ready focus.

In FY24, we launched a firmwide Partner Balanced Scorecard for Equity and Salaried Partners where goals are set using the strategic pillars. There is more information set out below (see Basis of partner and director performance evaluation and remuneration).

For both Partners and colleagues, Audit quality is the primary factor for assessing performance of Audit partners and professionals which has a direct impact on reward. The Quality and Performance Matrix we use to assess an individual's performance looks at quality and how it interacts with other factors. An individual's overall rating depends on the interaction of both.

The quality monitoring report is used to collate objective evidence of an auditor's performance in relation to quality. We have reviewed and simplified the approach this year, streamlining the quality rating and improving the colleague's role in summarising any additional contributions and impact on Audit Quality via a new dashboard. A quality monitoring report is delivered digitally and includes evidence, such as indicators from reviews and inspections, and feedback on the auditor's engagement with the quality process.

The Chief Auditor and Audit Risk Management Partner contribute to the assessment of performance in respect of risk and quality matters and this assessment is factored into the remuneration discussions for Audit partners. The governance of this process is overseen by the Audit Board.

Auditors must be independent to do their jobs effectively. As such, no one in the Audit practice, nor staff from other areas of the firm that contribute to audits, is evaluated, promoted or remunerated for the selling of non-audit services to entities we audit. There are no incentives for auditors to do this.

In 2024, 99% of people between Partner and Manager level were awarded a quality rating consistent with no, or only limited, performance improvements necessary. The remaining 1% of individuals, where more significant performance improvements were identified, were provided with targeted improvement plans and goals.

85% / of Audit colleagues feel the review of their performance places a significant emphasis on their contribution to audit quality.



2024 Global People Survey⁴
(2023: 73%)



⁴ 2024 Global People Survey data is based on 3,882 Audit colleague responses (2023: 4,055 Audit colleague responses).

Audit culture

Continued

Personal development and performance evaluation

We continue to place a strong emphasis on the personal development, performance management and fair reward of all people within the Audit practice with audit quality being a fundamental element of these processes.

We have reward and promotion policies that are clear, simple and linked to performance evaluation processes so that our people know what is expected of them and what they can expect to receive in return. There is a clear focus on setting stretching goals. Encouragingly, our annual GPS shows an increase of 4 percentage points for colleagues understanding how their performance, goals and objectives are linked to KPMG's strategy. Furthermore, our Open Performance Development framework ensures we invest in annual performance reviews that help identify high performers with the potential to take on more senior or complex roles to support colleague career aspiration and personal development. This is reflected in our GPS survey which saw a 5 percentage point increase in colleagues' understanding of the internal opportunities that they have in order to take on new roles and grow in their careers.

Colleagues can now identify such opportunities for themselves in our Audit Career Journeys tool. High performers are further developed through rotation opportunities, internal and global secondments and talent programmes.

Partner admissions

Our process for admission to the partnership is rigorous and thorough for both internal promotes and external hires. This includes a business and personal case for the individual candidate as well as an independent psychometric assessment. Our key criteria for admission to partner (both Equity and Salaried) reflect our commitment to professionalism and integrity, delivering high-quality audits and being the best choice for the entities we audit and our people.

Basis of partner and director performance and remuneration

Our remuneration model drives and rewards behaviour consistent with our strategy and values, reflecting an individual's performance over time as well as current in-year performance against their goals. For FY24, we have introduced a new Partner Balanced Scorecard which cascades partner goals based on Leadership priorities against the four pillars of the firm's strategy: Building Trust, Driving Sustainable Growth, Developing our People and Operating our Business. This is used for all Equity and Salaried Partners, with performance against these pillars determined based on metrics, feedback and other relevant inputs.

In Audit for all partners, Audit Quality is the primary indicator of performance and underpins the Partner Balanced Scorecard. Caps are applied to performance ratings where quality issues are identified. For FY24, bonuses for all staff are based on firm-wide, Capability and individual performance ratings.

The Salaried Partner Pathway profit share bonus is calculated using a percentage of salary, a unit value performance modifier and an individual performance zone modifier.

For our Equity Partners, there are four Partner Bands and a Unit Based remuneration model that has been in place since FY21. The four bands outline the expected impact and scale of sustainable contribution to the firm at different levels of partner, with expectations and complexity increasing with seniority.

Each Equity Partner's Unit allocation, including those who are on the Executive Committee, is determined with reference to the descriptors which set out the expectations at each Partner Band:

- Sustained performance.
- Market value of skillset.
- Individual capability.
- Leadership qualities and overall contribution to the group.

The LLP Partnership Agreement requires that a minimum of 75% of group profits, excluding the results of certain overseas subsidiaries (adjusted group), must be allocated to Equity Partners. The Board's discretion in respect of amounts not allocated is subject to a maximum retention of 25% of the accounting profits of the group for the period. Any proposal of the Board to retain more than 25% of the accounting profits of the group for the period is subject to a member vote.

During the year Equity Partners receive monthly drawings and further profit distributions.

The level and timing of the additional profit distributions are decided by the Executive Committee, considering the partnership's cash requirements for operating and investing activities. Both the monthly drawings and profit distributions are reclaimable from Equity Partners until the date on which profits are allocated.

As at 1 October 2024, there were 371 Salaried Partners and 466 Equity Partners in the UK firm. There were 113 Equity Partners in Audit.

Audit culture

Continued

5. Recognition, measurement and reporting

Recognising our success

We continue to see many excellent examples of individuals and teams living our values and reaching the highest standards of professionalism and quality through our Audit Quality and Culture Awards.

The Audit Quality and Culture Awards, which run twice a year, recognise and celebrate those individuals and teams who champion audit quality and demonstrate our expected behaviours. The winning nominations are judged by an expert panel, and gold and silver medalists are chosen for each category, with medalists winning a significant financial reward. In FY24, we had over 2,000 nominations and good news stories linked to our culture goals. These stories continue to be used across Audit to further embed our culture ambition and drive good practices.

Spring 2024 Audit Quality Culture Awards – Delivering Quality winner

Kiera, Audit Senior Associate, was an integral member of the audit team. Her work on the audit file was of the highest quality. Her work was clear and concise, giving the reviewer all the information required to easily follow the work performed. Kiera's attention to detail was evident, she made sure to appropriately document her judgements and conclusions, with her testing or sampling considerations thoroughly explained and backed up with relevant accounting standard references or approved, technical guidance quotes. It was apparent that Kiera champions the 'Culture of Challenge'. Not only did she challenge the prior year approach, but she was confident challenging entity management on responses or evidence received, ensuring sufficient, appropriate audit evidence was obtained and documented within her workpapers before concluding.



Audit culture

Continued

6. Culture of challenge

Our culture of challenge narrative is shared and reinforced with Audit colleagues through our mandatory audit training. For 2024 we have focused content on the theme of accountability and how that supports our culture ambition of High Challenge, High Support:

- Exploring what accountability means and why it is important.
- Awareness of expected behaviours and how we can encourage them, with specific attention to biases, achievability and transparency.

Accountability was also the golden thread through our KPMG Audit University (KAU), and annual residential programme for both auditors and IT auditors that takes place each summer.

Our 207 Culture Ambassadors continue to drive positive messaging around demonstrating a culture of challenge and share our Challenge and Support videos at a local level. These videos reinforce the High Challenge, High Support culture for audit teams, what we expect of colleagues, and what they should expect of each other.

Spring 2024 Audit Quality Culture Awards – Empowering People winner

Olivia, Senior Manager, is absolutely focused on bringing out the best in people. She spends a tremendous amount of time with each team member, coaching them in detail and taking the time to make sure the team truly understands not only what they are doing, but most importantly, why they are doing it. Every day she is sitting with team members in person in hot reviews, going through their testing in detail, getting them to explain what they have done, what evidence they received and why they concluded the way they did. Olivia has also been incredibly focused on getting the team more involved in project management and meeting our deadlines all throughout the audit cycle, so that we can deliver an overall great audit experience for all team members. Olivia has demonstrated outstanding mentoring skills to individuals on the team and the growth in these individuals through the audit period is a testament to her. She truly cares about the individuals on our team, both personally and professionally.

81% / of Audit colleagues feel they receive sufficient training and development to enable them to deliver high quality audits.



2024 Global People Survey⁵
(2023: 82%)

85% / of Audit colleagues feel they are encouraged and supported by audit engagement partners to deliver high quality audits.



2024 Global People Survey⁵
(2023: n/a⁶)

83% / of Audit colleagues feel they have sufficient time and resources to deliver high quality audits.⁷



2024 Global People Survey⁵
(2023: n/a⁸)

⁵ 2024 Global People Survey data is based on 3,882 Audit colleague responses (2023: 4,055 Audit colleague responses).

⁶ No comparative data is presented as this data was collected for the first time in FY24.

⁷ Response includes both favourable (59%) and neutral (24%) responses.

Audit culture

Continued

7. Quality coaching

To invest in building the skills and capabilities of our professionals, we continue to adopt a continuous learning environment. We support a coaching culture throughout KPMG as part of enabling colleagues to achieve their full potential.

Our Coaching for Quality programme, which was developed with the support of external behavioural psychologists, gives colleagues the tools they need for productive coaching conversations.

New engagement leaders are also provided with an experienced mentor to support their transition into this critical role.

Across the FY24 Audit Quality Culture Awards, we had 304 winners who demonstrated quality coaching. These stories feature individuals who exemplified our culture by investing heavily in coaching their teams and developing junior team members.

Spring 2024 Audit Quality Culture Awards – Expected Behaviours winner

Elise, Assistant Manager, has shown exemplary behaviours since taking on the in-charge role. She has taken on a first-year audit with great professionalism and demonstrated our firm values. Elise has got up to speed very quickly on the audit, which has shone through in her interactions with the wider audit team and with the audited entity, and has effectively built rapport with the key stakeholders, putting in regular contact points, and confidently leading them. Elise has the confidence to get on the phone, set up Teams calls or be present at the audited entity site, which makes a significant difference, consistently demonstrating our High Challenge, High Support culture both with the audited entity management but also in coaching the wider team. Her communication is excellent, she leads by example, and overall she is a clear role model to her peers.



Audit culture

Continued

8. We listen, learn and evolve

Practical tools and resources continue to create culture change on the ground

We continue to embed our Culture Ambition by developing practical tools, resources and events that help our colleagues understand and apply it in practice.



Our progress in FY24 has included:

Audit-led activities and resources:

- 9 culture assessments, including 38 culture focus groups and 95 interviews, to understand cultural and behavioural drivers and identify areas that may require improvement.
- Quarterly meetings with our Culture Ambassadors to share best practice and seek input into, and feedback on, culture activities and collateral.
- Regular speaker events to explore our culture theme of accountability. Our KPMG Audit University was centred on Empowering Through Accountability.

Driving cultural change locally:

- Our Culture Ambassador network helps to embed our Culture Ambition. Their passion in delivering tangible culture change has resulted in over 230 activities, aligned to our culture plan, being carried out locally.
- Our coaching materials continue to be used locally and reinforced in quarterly mandatory training. Coaching training is also delivered to newly promoted Managers and experienced hires, and our Partners, Directors and Senior Managers are also encouraged to attend this training.

Management information and how we use it

Continuing to measure our progress is key to success. We baseline and measure our culture on a holistic basis, using a variety of sources of management information including our firm-wide Culture Dashboard, our culture assessments, and through consultation with our Audit Evolution Board.

The sources of management information we use include:

- Our Global People Survey which gives colleagues from KPMG member firms an opportunity to express their views on a range of topics about life at KPMG. We use the responses to gather insight and identify issues that affect colleagues both locally and globally. We regularly update Audit colleagues on the progress we are making against the focus areas in a newsletter called 'You Said, We Did'.
- Our mid-year Pulse survey which is a temperature check to measure progress against our firm-wide priority areas.
- Our Audit Listening Programme which gathers views from the entities we audit.
- Culture assessments where we provide opportunities to effectively listen to and support audit teams, departments and offices in understanding the level of embeddedness of our values and Culture Ambition.

- Reports to our Speak Up hotline.
- Coaching surveys.
- Audit leaver feedback.
- Root Cause Analysis Outcomes
- We continue to use Culture Amp, an employee experience platform, which provides detailed, real-time analysis of colleague sentiment, enabling us to identify areas of focus and take action sooner than we've previously been able to. We have been able to give partners and local leaders direct access to the analysis for their teams so they can make meaningful impact, quickly.

Working with the Root Cause Analysis team, we also continue to measure our culture through focus groups where we deep dive into the behaviours we need to focus on, to understand how well embedded our High Challenge, High Support culture is, and what we need to do to strengthen it. We held over 36 focus groups and 90 interviews in 2024 which were attended by over 200 Audit colleagues. These inputs are helping us target our actions where they will have the greatest impact.

Audit culture

Continued

Learning

In our Audit practice, a comprehensive range of technical and non-technical learning opportunities is available in a variety of formats, such as face-to-face, live virtual and informal learning. Graduates gain formative skills via the Audit Foundations programme over two years, covering all elements of a KPMG audit, including our methodology, workflow and technology, as well as business skills to perform effectively. Following this, graduates attend our flagship programme, KPMG Audit University (KAU), alongside more experienced auditors. More information on the KAU is included in the Audit Quality section of this report. For Qualified New Joiners, we ensure that a significant part of their learning is carried out face-to-face. This learning is also complemented by an on-the-job experience passport, worked through whilst being mentored on their initial engagements, to enable them to apply their learning more effectively and be set up for success in their new roles.

For experienced colleagues, our This is Leadership blended programme is designed to augment leadership skills that are critical in leading effective audit teams. In addition, all colleagues are supported for lifelong careers within Audit through our new Audit Career Journeys interactive tool, created to map potential paths, required skills and learning solutions to get there. Further, as part of our commitment to inclusion and diversity, a range of highly interactive English Language Resources are in place to support non-native speaker colleagues.

Across the firm, our Milestone programmes support newly promoted Assistant Managers, Managers, Senior Managers and Directors to transition effectively and step up into their new roles. The Milestones are supported by a comprehensive follow-on leadership development curriculum focusing on future-ready leadership skills. We also offer targeted programmes for our Partner promotes and a follow-on curriculum for Established Partners. Alongside our pioneering strategy, we are offering additional development opportunities on ESG, artificial intelligence and more.

Audit Career Journeys

KPMG Audit Career Journeys is a strategic initiative designed to empower individuals to take control of their career development and explore exciting new opportunities within the firm.

Through Audit Career Journeys, individuals can:

- **Explore diverse career paths:** Discover and explore potential career paths that align with their interests and aspirations.
- **Understand skill requirements:** Gain insights into the specific skills and qualifications needed for each role, enabling them to identify areas of focus and development.
- **Access tailored learning resources:** Leverage bespoke learning resources designed to support their development in their current or desired role.
- **Take charge of their career:** Empower themselves to take ownership of their career journey, explore new opportunities, and reach their full potential at KPMG.

Fostering a culture of continuous learning, Audit Career Journeys is part of KPMG's commitment to employee development and personal growth. It empowers colleagues to shape their own career paths and contribute to the firm's overall success.

70% / of Audit colleagues feel their leaders take an active role in their learning and development.



2024 Global People Survey⁸
(2023: 70%)

⁸ 2024 Global People Survey data is based on 3,882 Audit colleague responses (2023: 4,055 Audit colleague responses).

Audit culture

Continued

Our Audit Evolution Board

As our audit landscape changes and the role of the auditor transforms, it becomes increasingly important for leadership to listen to the views from those closer to audit delivery and impacted by key decisions made across the UK Audit practice. For this reason, the Audit Evolution Board ('AEB') was formed in 2020.

The AEB's role is to provide challenge, diversity of thought, new insight and recommendations to matters discussed across our strategic pillars by the Audit Executive and Audit Board, and to play a part in improving the culture of trust and quality within the Audit business. There are 12 members, from trainees to Senior Managers from across the performance groups within our UK Audit practice. By connecting with engagement teams across the Audit business, the AEB brings a wide range of opinions, experience and perspectives to help shape the key decisions made by the Audit Executive and the Audit Board. Monthly meetings are attended by AEB members, the Chair (who is a member of our Audit Executive), and presenters to focus the AEB on key matters aligned to the Audit Executive agenda.

The AEB has impacted multiple pillar initiatives throughout 2024, through attendance and contribution at steering committees including the Audit Quality Council, participation in judging panels including the Spring Audit Quality and Culture Awards, and more specific actions targeted to support the delivery of our audit strategy. This includes recently producing guidance, created from feedback the AEB collated from across the UK Audit practice, on the habits leading to the successful recovery of overruns and scope changes, which is now available on the Pricing Portal.

People and culture priorities for FY25

People

We will:

- Progress our focus on leadership skills and RI wellbeing and broaden this to Future Leaders to include more learning investment at middle management levels.
- Roll out the This is Leadership programme across all Audit Directors following a successful pilot in FY24.
- Further develop the RI succession planning to broaden our talent pipelining activities to spot and proactively develop high potential, diverse leaders for the Future of our Audit business.
- Embed the Balanced Scorecard approach across our Partner group, expanding to include Audit Associate Partners.
- Nurture junior talent with enhancements to student programmes and the realisation of our Career Pathways and Space to Learn initiatives to develop highly skilled, agile colleagues who are able to drive a varied and engaging career in our firm.

Culture

We will continue to:

- Drive engagement locally through our Culture Ambassador network, further embedding our High Challenge, High Support culture.
- Source culture and behavioural success stories through our Audit Quality Culture Awards which have been structured to recognise the behaviours that underpin our Audit Quality and Culture strategy and goals.
- Listen to our colleagues through our culture assessments – celebrating our cultural successes and identifying areas for further focus.
- Measure culture success and deliver insights through existing management information and the use of Culture Amp.
- Embed culture learning into the 2025 KPMG Audit University syllabus and our Auditor Update training programme.
- Keep strengthening our diversity, and bring different perspectives to broaden horizons and stimulate innovation through our internal and external speaker series.

03

Audit quality



Delivering sustainable quality

Audit quality is fundamental to the effective functioning of the capital markets and is key to investor and public trust. That is why sustainable, high-quality audits sit at the heart of our strategy as we strive to serve the public interest.

We define 'audit quality' as the outcome when audits are executed consistently, in line with the requirements and intent of applicable professional standards within a strong system of quality management.

Quality is at the heart of our Audit Strategy, which is why we have developed an [Audit Quality Report](#). All of our related activities are undertaken in an environment of the utmost level of objectivity, independence, ethics and integrity.

To that end, KPMG has a Global Quality Framework (GQF) which guides how we work and how we approach the audit. It helps ensure a consistent approach with quality at its heart. In this section, we show how the GQF is helping us do this with reference to each individual component of the framework. For three of the components – Live our culture and values; Be independent and ethical; and Nurture diverse skilled teams – we have redirected to other parts of the report.

In the UK, we support our GQF with our Single Quality Plan (SQP); a dynamic and responsive plan that monitors our response to quality-related issues which is reviewed and refreshed throughout the year. This helps us focus on the key areas we have identified that will enable us to continue to deliver sustainable quality.

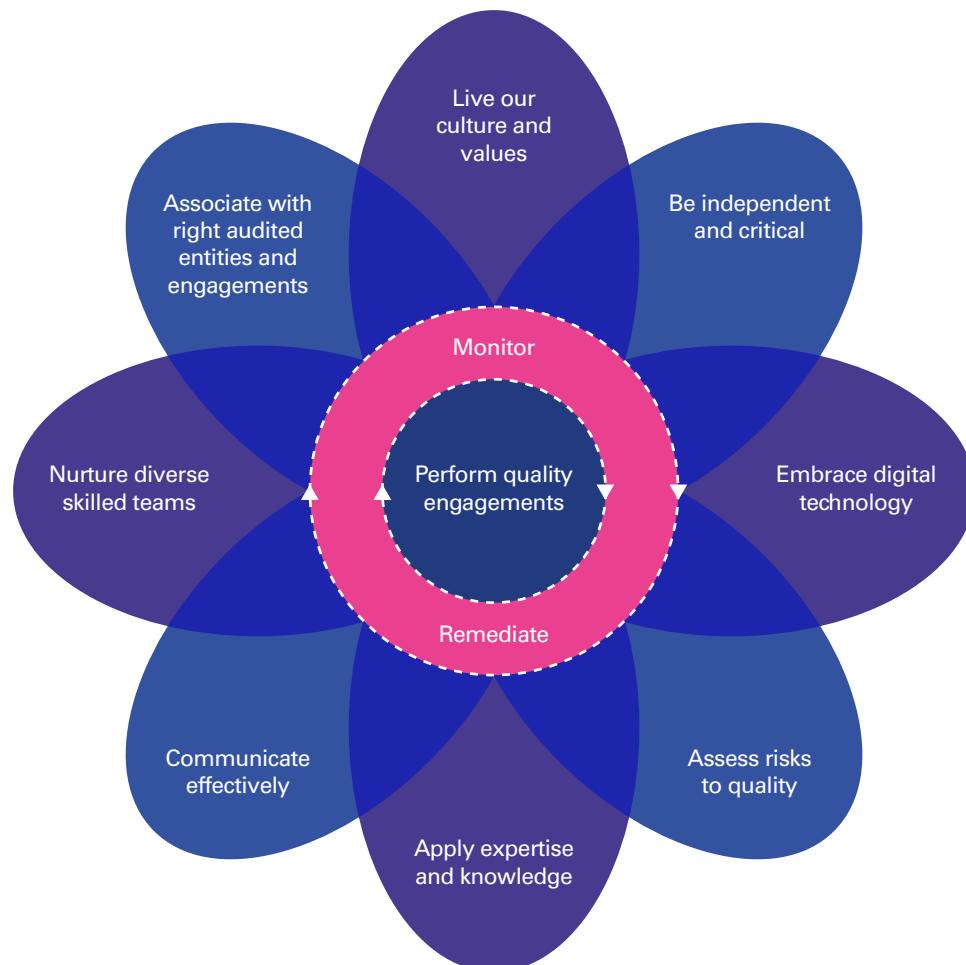
Alongside this, we recognise that harnessing new technology, including AI and machine learning, is key to the future of audit, especially as audited entities themselves integrate these technologies into their businesses. We have therefore continued to invest heavily, in the UK and across our global network, in building new technologies into how we work (embedded into our smart audit platform, KPMG Clara) and strengthening our significant partnerships with major technology providers such as Microsoft.

Our focus on delivering sustainable audit quality is at the heart of our strategy, supported by our other strategic priorities: empowering our people, supporting seamless delivery, and maintaining robust growth. Our risk management principles (see the Quality Control and Risk Management section) ensure we appropriately manage risk across the firm and help to support audit quality.

We are seeing the fruits of our strategy in our audit quality journey with sustained improvement in our AQR inspection results and an improved three-year average across both FTSE 350 and other audits.



Our Global Quality Framework



1. Perform quality engagements

Framework description

- Critically assess audit evidence, using professional judgement and scepticism.
- Direct, coach, supervise and review, including Second Line of Defence and Defence and Engagement Quality Control Reviewer (EQCR).
- Appropriately support and document conclusions.
- Consult when appropriate.

How an audit is conducted is as important as the result. Everyone at KPMG is expected to demonstrate behaviours consistent with our values and follow policies and procedures in the performance of effective and efficient audits.

How we apply this in the UK

Critical assessment of audit evidence, exercise of professional judgement and professional scepticism

We consider all audit evidence obtained during the course of the audit, including consideration of anything that is contradictory or inconsistent. This analysis requires each of our team members to exercise professional judgement, maintain professional scepticism and demonstrate appropriate challenge to obtain sufficient and appropriate audit evidence.

Professional judgement and scepticism training is embedded in our core audit technical training programme for junior staff and ongoing training and workshops for more experienced staff.

Timely senior involvement and monitoring of milestones

The engagement leader is responsible for the overall quality of the audit engagement and therefore for its direction, supervision and performance. Involvement and leadership from the engagement leader early in the process helps set the appropriate scope and tone for the audit. To reinforce this, we mandate the completion and review of audit planning activities within specified timeframes to evidence completion of the relevant planning activities.

The engagement leader reviews key audit documentation – in particular, documentation relating to significant matters arising during the audit and conclusions reached. The engagement manager assists the engagement leader in meeting these responsibilities as well as in the day-to-day liaison with the audited entity and monitoring of engagement milestones.

Our Global Quality Framework

Continued

Involvement of our Second Line of Defence

Our Second Line of Defence team is a group made up of senior auditors which supports our higher risk engagements with a focus on public interest and listed entities. The team performs in-flight reviews of audits to improve the quality of audit execution and documentation, including effective challenge of management in judgemental areas. These senior auditors also help throughout the audit cycle, to identify issues before they impact audit quality. This has a dual purpose: firstly, to enable coaching of teams and, secondly, to act as another level of review and challenge to help engagement teams in the delivery of high-quality audits. In addition, it informs our ongoing horizon scanning for emerging issues that may require broader responses.

Appropriate and timely involvement of specialists

Our engagement teams have access to a network of specialists, which may include involving UK specialists or those from other KPMG member firms. Our audit methodology requires the involvement of relevant specialists in the core audit engagement team when certain criteria are met or where the audit team considers it appropriate or necessary.

Appropriate involvement of the Engagement Quality Control Reviewer

Our Engagement Quality Control Reviewers (EQCRs) are independent of the engagement team and have appropriate experience and knowledge to perform an objective review and challenge of the more critical and judgemental elements of the audit. The audit report can only be released when the EQCR is satisfied that all significant questions raised have been resolved.

An EQCR is appointed for the audits, including any related review(s) of interim financial information, of all listed entities, non-listed entities with a high public profile, engagements that require an EQCR under applicable laws or regulations, and other engagements as designated by the Audit Risk Management Partner or the Chief Auditor.

Ongoing mentoring and on-the-job coaching, supervision and review

To invest in building the skills and capabilities of our professionals, we adopt a continuous learning environment. We support a coaching culture throughout KPMG as part of enabling colleagues to achieve their full potential.

Our Coaching for Quality programme, which was developed with the support of external behavioural psychologists, gives colleagues the tools they need for productive coaching conversations.

New engagement leaders are also provided with an experienced mentor to support their transition into this critical role.

Appropriately supported and documented conclusions

Audit documentation records the audit procedures performed, evidence obtained, and conclusions reached on significant matters on each audit engagement. Our policies require review of documentation by more experienced engagement team members.

Standardised approaches and workpapers assist our audit teams with appropriately supported and documented conclusions.

Monitoring our progress

The results of our external and internal monitoring processes can be found in the 'Activities during the year' tab above.

Activities during the year

External monitoring by our regulators

KPMG has a number of regulators due to the types of services we provide. This includes the Financial Reporting Council (FRC), the Institute of Chartered Accountants in England and Wales (ICAEW), the Financial Conduct Authority (FCA), the Solicitors Regulation Authority (SRA), audit third country regulators, and other regulatory and oversight bodies (including HM Government). We're committed to meeting the expectations of our regulators and ensuring our regulatory engagement is based on the principles of openness, transparency, integrity and accountability.

The regulatory environment continues to evolve. Accordingly, we continually scan the horizon and prepare the firm for incoming regulatory changes. In particular, we continue to engage and work with the FRC to help shape the future for a profession that is attractive and retains skilled professionals who produce high-quality audits, acting in the public interest.

The results from the FRC's Audit Quality Review (AQR) inspection, as well as the ICAEW's annual inspection, together with the results of our own internal monitoring programme, and those of any other regulator including the Public Company Accounting Oversight Board (PCAOB) in the US, provide an overview of our performance of quality engagements.

In addition, the FRC's Audit Market Supervision (AMS) team assesses the firm's ongoing design and operation of our Systems of Quality Management (SoQM). The FRC's Audit Firm Supervision (AFS) team is responsible for the overall supervision of Public Interest Entity (PIE) audit firms, drawing together the results of work undertaken by the AMS and AQR as well as other areas of the FRC.

Audit quality is our number one priority, and we value the constructive input and challenge from the FRC through their inspection and supervision process. We continue to work closely with the FRC to understand their identified areas of good practice, and importantly where we need to continue to focus to ensure that we build trust and confidence in our profession and the markets.

Our Global Quality Framework

Continued

89% of FRC inspections required no more than limited improvements

2023/24
(2022/23: 74%)
(2021/22: 84%)

88% of FTSE 350 inspections required no more than limited improvements

2023/24
(2022/23: 78%)
(2021/22: 91%)

No audits inspected required significant improvement

2023/24
(2022/23: One)
(2021/22: None)

[FRC's Audit Quality Inspection and Supervision Report for KPMG LLP \(2024\)](#)

FRC – Audit Quality Inspection and Supervision Report findings

The FRC's Audit Quality Inspection and Supervision report listed areas of good practice and aspects where improvement was required.

In individual audits, good practice included examples relating to risk assessment and planning, execution, and completion and reporting. Areas for improvement included instances relating to estimates, risk assessment and response to internal control deficiencies.

2023/24 was a transitional inspection cycle covering both the International Standard on Quality Management (UK) 1 (ISQM1) and the International Standard on Quality Control (UK) 1 (ISQC1). The report included a section for the first time on our firm-wide SoQM, with examples of good practice and areas for improvement.

Section 4 of the report focused on the FRC's forward-looking supervisory approach – identifying and prioritising what firms must do to improve audit quality and enhance resilience. There, we saw recognition of how our SQP is embedded in the business and supporting our strategy:



The firm's SQP is at the forefront of the firm's regulatory strategy, integral to the business and a driver to sustained audit quality."

FRC's Audit Quality Inspection and Supervision Report for KPMG LLP (2024)

The report also called out the significant progress we have made in the last year with our Root Cause Analysis (RCA).



The firm has responded positively to feedback on its RCA process – investing significantly in the RCA team, redesigning the approach and refreshing the categories of causes. The benefits have been visible through the FRC's engagement in 2023, including in the RCAs performed by the firm on six of the 2023/24 AQR inspections. The changes helped to ensure a clear thought process with multiple data sources when identifying the root cause."

FRC's Audit Quality Inspection and Supervision Report for KPMG LLP (2024)

We will continue to evolve our root cause and remediation processes, focusing on evaluating the effectiveness of actions.

The FRC's report is available to read [here](#).

Our Global Quality Framework

Continued

10 reviews were performed by the Quality Assurance Department of the ICAEW

2023
(2022: 11)
(2021: 12)

70% of the ICAEW reviews were assessed as "Good/generally acceptable"

2023
(2022: 91%)
(2021: 75%)

One audit reviewed required significant improvement

2023
(2022: None)
(2021: One)

[FRC's Audit Quality Inspection and Supervision Report for KPMG LLP \(2024\)](#)

ICAEW – Monitoring review by the Quality Assurance Department

The ICAEW identified good practice across the files reviewed which included:

- Clear evidence of challenge to management in areas including impairment testing, property valuations, revenue and going concern.
- Well-organised work on contract and non-contract revenue.
- Comprehensive documentation including group audit considerations, borrowings and going concern.

Our ICAEW results saw a slight decline this year. Our continuing commitment to enhancing audit quality saw two teams challenging prior period accounting in the year following the reviews. They identified an arising difference in the subsequent period's financial statements which the firm reported to the ICAEW, prior to the finalisation of their review. We consider it good practice for teams to continuously improve audit quality and realise the benefit from the independent challenge of reviews.

For a summary of the QAD's review findings, refer to the [FRC's Audit Quality Inspection and Supervision Report for KPMG LLP \(2024\)](#).

PCAOB

KPMG in the UK is subject to inspection every three years by the US PCAOB. In accordance with this cycle, the PCAOB was due to inspect during 2021. However, as a result of the COVID-19 pandemic, the PCAOB deferred its inspection to 2022. The firm received the final inspection report in 2024 with no Part I Inspection Observations and is required to respond to the findings by the deadline of March 2025. The PCAOB's final report is available to read [here](#).

Regulatory investigations and sanctions⁹

Ongoing FRC matters

At the end of the financial year, there was one ongoing FRC investigation into matters announced in previous years, in respect of the audit of Carr's Group plc for the period ended 28 August 2021.

New FRC matters or developments on ongoing matters during the year

No new FRC investigations were opened during the year.

FRC matters closed during the year

One matter, which related to an audit in 2018, was closed during the year:

- In March 2024, the FRC announced sanctions against KPMG LLP and a partner of KPMG LLP relating to the audit of the financial statements of M&C Saatchi plc for the financial year ended 31 December 2018. KPMG LLP was fined £1,462,500 and severely reprimanded. The partner was fined £48,750 and severely reprimanded.

ICAEW matters

One ICAEW investigation outcome was announced during the year. This related to the audit of the financial statements of two entities by KPMG LLP.

⁹ Where the FRC or other regulatory body has exercised discretion not to publicise a particular inquiry or investigation, the details of such matters are not disclosed in this report.

Our Global Quality Framework

Continued

Internal monitoring

KPMG firms have agreed to use quality monitoring and compliance programmes developed by KPMG International and are used by KPMG firms to identify quality issues, perform root cause analysis and develop remedial action plans, both for individual audits and for their overall SoQM. The programmes evaluate:

- Engagement performance in compliance with the applicable professional standards, applicable laws and regulations, and key KPMG International policies and procedures.
- Our firm's compliance with KPMG International policies and procedures and the relevance, adequacy and effective operation of key quality control policies and procedures.

The internal monitoring and compliance programmes also contribute to the evaluation of our SoQM operating effectiveness. These programmes include:

- Audit Quality Performance Review (QPR).
- KPMG Quality and Compliance Evaluation (KQCE) – formerly known as the Risk Compliance Programme (RCP).
- Global Quality and Compliance Review (GQCR)

The results of the integrated monitoring and compliance programmes are communicated at local, regional and global levels (as relevant) and we establish action plans to make improvements where needed. Results are also considered by KPMG International.

Audit Quality Performance Review (QPR) programme

The Audit QPR programme is the cornerstone of our efforts to monitor engagement quality. It assesses engagement level performance and identifies opportunities to improve engagement quality.

Risk-based approach

All engagement leaders of statutory and non-statutory audits and other assurance engagements are generally subject to selection for review at least once in a three-year cycle. A risk-based approach is used to select engagements.

The Audit QPR programme is designed by Global Quality & Risk Management. We conduct the annual QPR programme in accordance with KPMG International QPR instructions, which promote consistency across the KPMG organisation. Responsibility for the QPR programme lies with our firm's Risk Management Partner. Reviews are overseen by an independent experienced lead reviewer from another KPMG firm. QPR results are reported to KPMG International.

Evaluations from Audit QPR programme

Across the global organisation, consistent criteria are used to determine engagement ratings and KPMG firm Audit practice evaluations. Definitions of engagement ratings are explained below:

Compliant

When the audit work performed, the evidence obtained and the documentation compiled comply with internal policies, auditing standards and legal and regulatory requirements in all significant respects with no or only minor instance(s) of non-compliance; and key judgements concerning significant matters in the audit and audit opinion are appropriate.

Compliant – improvements needed ('CIN')

When the auditor's report is supported by evidence and is not incorrect in any material respects, but the independent reviewer required additional information to reach the same conclusion as the auditor; or where supplementary information obtained as part of the audit was not sufficiently documented in the audit; or where specific requirements of our audit methodology were not embedded; or where improvements to audit procedures were identified as needed in one or more areas and such improvements were judged to be more than minor but not significant. A 'CIN'-rated engagement is not considered an adverse quality outcome.

Not Compliant

When the auditor did not perform the engagement in line with KPMG's professional standards and policies in a more significant area, or where there are deficiencies in the related financial statements. Where appropriate, in a limited number of cases we remediate engagement files to ensure the audit evidence obtained is adequately documented and engagement teams undertake specific incremental or remedial training. In addition, engagement leaders receiving a Not Compliant rating are subject to at least one follow-up review.

Our Global Quality Framework

Continued

Reporting

Prior to the finalisation of the review, there is a rigorous moderation process to ensure consistency of grading. A remedial action plan is created for quality audit and assurance areas in which deficiencies were identified which are considered to be significant, applicable at an engagement and a firm level. We share our findings from the Audit QPR programme through internal training tools and in periodic partner, manager and team meetings. Any issues are also emphasised in subsequent monitoring and compliance programmes to gauge the extent of continuous improvement and the effectiveness of the implementation of remedial actions. Lead engagement partners are notified when an assurance engagement on a cross-border subsidiary or affiliate of their audited entity receives a Not Compliant rating.

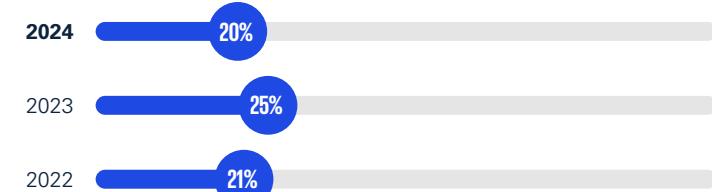
Our Audit QPR programme is designed to hold audit teams to quality levels that assess not only compliance with auditing standards but also adherence to internal requirements such as the performance of specified procedures or completion of specific mandated consultations. As such, teams that perform audits that are very substantially compliant with auditing standards may receive a rating other than Compliant in our internal reviews. Accordingly, it is difficult to make direct comparisons between the results of our internal and external inspection processes.

- Percentage of gradings at Compliant / Compliant – Improvements Needed / Not Compliant: (FY24 results 73% Compliant, 20% Compliant – Improvements Needed, 7% Not Compliant)
- Percentage of engagement leaders reviewed: 36%
- Number of audit and assurance engagements reviewed: 136

Rating / Compliant



Rating / Compliant – improvements needed



Rating / Not Compliant



Number of engagements reviewed



Our Global Quality Framework

Continued

KPMG Quality and Compliance Evaluation (KQCE) programme

The KQCE programme encompasses the testing and evaluation requirements of a KPMG firm's SoQM which are necessary to support both their compliance with ISQM1, and compliance with the firm's quality and risk management policies. KQCE programme requirements are mandated for all KPMG firms. The 2024 KQCE programme covers the period from 1 October 2023 to 30 September 2024.

Monitoring, remediation and evaluation of the SoQM

Monitoring activities include:

- Testing of UK Member Firm SoQM controls performed in the UK and overseas, and at a Network level (including general IT controls).
- Review of 'other sources' e.g. QPR and GQCR findings, root cause analysis, regulatory developments etc. Please see [ISQM1 section](#) in Quality Control & Risk Management, for more information.

The evaluation of the SoQM involves the identification and assessment of findings from our monitoring activities, including any deficiencies. Judgement is required to assess whether findings result in a deficiency, and the severity and pervasiveness of any deficiencies, individually and in aggregate. Those judgements include considering both the significance of findings to the achievement of quality objectives and the extent to which actions taken up to the evaluation date mitigate the effects on the SoQM.

Such judgements are made by the monitoring team, overseen by the Chief Risk Officer, and the final evaluation is scrutinised and independently challenged by the Audit Committee. Our evaluation of the effectiveness of our SoQM is set out [here](#).

Compliance testing

During the year, member firms were required to self-assess their overall levels of compliance with quality and risk management policies not in scope of the SoQM as either compliant, substantially compliant or non-compliant.

For the year ended 30 September 2024, our approach to quality and risk management policies was rated substantially compliant (defined as where significant compliance findings are not pervasive in nature and action plans to address their identified causes have either already been implemented or substantially implemented or are planned to be implemented within a timeline which will allow for compliance testing in the succeeding period).

Action plans to address the identified root causes of SoQM Deficiencies and Compliance Findings have been developed and are in the process of being delivered. The status of remediation is monitored by the Risk, Operations and Audit Executives and is overseen by the Audit Committee.

Global Quality and Compliance Review (GQCR) programme

The GQCR programme is a KPMG International monitoring programme. The objective of the GQCR programme is to assess a firm's compliance with selected KPMG International policies, including those related to governance and SoQM.

Firms are selected for review using a risk-based approach, which considers a number of factors, including financial conditions, country risks, results of monitoring programmes and people surveys, with each firm subject to a GQCR at least once in a four-year cycle.

The GQCR team performing the review comprises partners and managers who are independent of the firm subject to review.

The UK firm was subject to a GQCR review during 2024 when a number of opportunities for improvement were identified, including areas which were also generally identified by the UK firm's KPMG Quality and Compliance Evaluation and other compliance and quality control processes. Many of the improvements have been completed with action plans in place for the rest.

Our Global Quality Framework

Continued

2. Live our culture and values

Framework description

- Foster the right culture, starting with tone at the top.
- Define accountabilities, roles and responsibilities related to quality and risk management.
- Robust governance structures.

It's not just what we do at KPMG that matters – we also pay attention to how we do it. The KPMG values are our core beliefs, guiding and unifying our actions and behaviours. Shared across all colleagues and in every country, jurisdiction and territory in which we operate, they are the foundation of KPMG's unique culture.

How we apply this in the UK

The [People and culture](#) section sets out in detail how we are embedding these factors to help drive audit quality and create an environment of continuous improvement.

Activities during the year

This is at the heart of how we drive a mindset focused on quality and continuous improvement.

The [People and culture](#) section sets out in detail how we are placing a culture of "High Challenge, High Support" at the centre of our values-based approach, to help drive audit quality and create an environment of continuous improvement.



Our Global Quality Framework

Continued

3. Be independent and ethical

Framework description

- Act with integrity and live our values.
- Maintain an objective, independent and ethical mindset, in line with our code of conduct and policies.
- Have zero tolerance of bribery and corruption.

Auditor independence is a cornerstone of international professional standards and regulatory requirements.

How we apply this in the UK

As described in the [Quality control and risk management](#) section, we have adopted the KPMG Global Independence Policies which are derived from the IESBA Code, and, in the UK, supplement them with other policies to ensure compliance with the FRC's 2019 Ethical Standard.

These policies and processes cover areas such as firm independence, personal independence, firm financial relationships, employment relationships, partner rotation, and approval of audit and non-audit services.

Compliance with laws, regulations and standards is a key aspect for everyone at KPMG. In particular, we have zero tolerance of bribery and corruption.

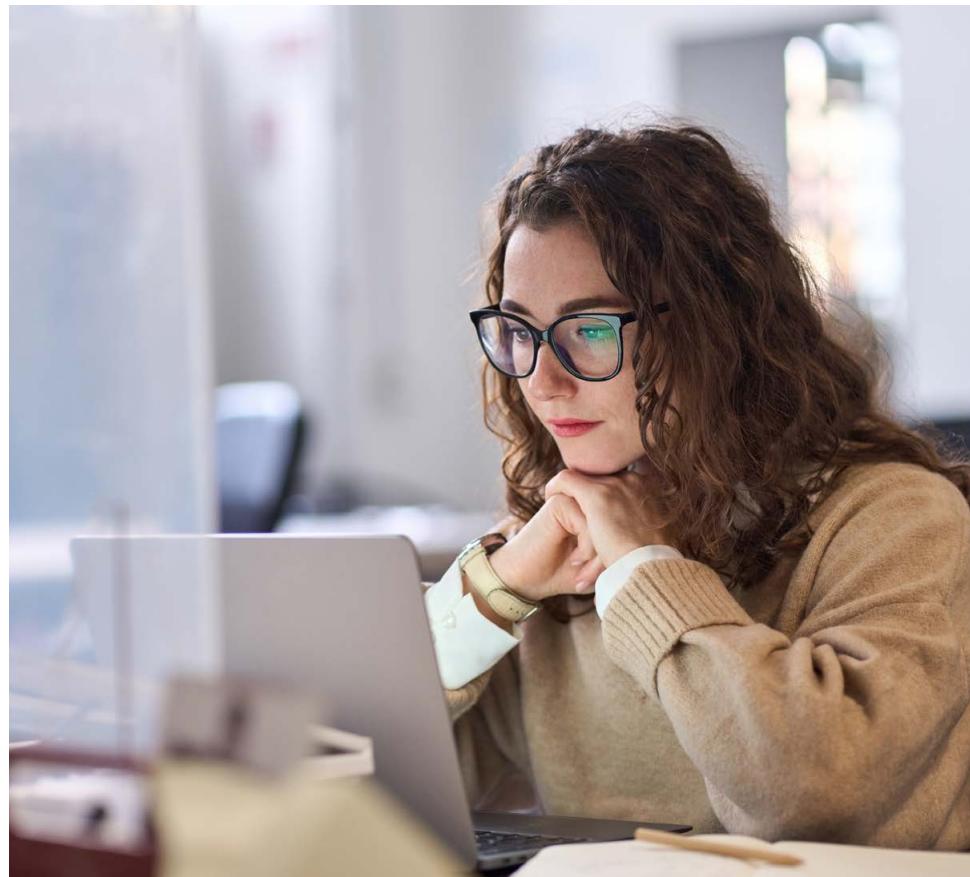
We prohibit involvement in any type of bribery – even if such conduct is legal or permitted under applicable law or local practice. We also do not tolerate bribery by third parties, including by the entities we audit, our suppliers or public officials.

More about KPMG International's position and policies on anti-bribery and corruption can be found on the [anti-bribery and corruption](#) site.

Activities during the year

These are crucial attributes for anyone connected to Audit.

The [Quality control and risk management](#) section explains the processes and controls we have in place to ensure we meet the standards required.



Our Global Quality Framework

Continued

4. Embrace digital technology

Framework description

- KPMG Clara.
- Intelligent, standards-driven audit and assurance workflows.
- Digital data and emerging technologies.

At KPMG, we are anticipating the technologies that can shape our near future and are driving an ambitious innovation agenda. KPMG has transformed the audit experience for KPMG professionals and clients. The alliances and leading technologies used across the global organisation are enhancing audit quality by increasing our ability to focus on the issues that matter.

How we apply this in the UK

Technology is at the heart of our efforts to enhance audit quality, create greater consistency and drive efficiencies in how we deliver our audits. It's why we are making smart technology our business-as-usual mode of audit delivery – it's simply the way a modern audit is carried out.

Matching the power of smart technology with curious and inquisitive minds and professional scepticism will enhance audit quality. We are now using our smart audit platform, KPMG Clara, on all of our audits and this is having a positive impact.

We continue to use data analytics to identify and respond to risks, ensuring our work is data-driven.

We're also investing in a range of emerging technologies including ensuring we have solutions in place to audit the use of artificial intelligence by the companies we audit as they start to invest in new technology.

Activities during the year

Embrace digital technology

KPMG Clara, our global smart audit platform, puts collaboration, workflow, analytics and automation capabilities into the hands of more than 90,000 audit professionals across the world.

In 2024 we launched KPMG Clara AI chat, our proprietary generative AI tool built on Microsoft Azure's OpenAI service, to all UK auditors.

Following the announcement of our strategic alliance with MindBridge in May 2023, we have embedded its AI and machine learning capabilities into KPMG Clara, called KPMG Clara Transaction scoring. This capability allows us to analyse 100% of the transactions in a general ledger, enabling rapid conclusions over accounts and the identification of outliers to focus efforts on the higher risk transactions.

Internationally, KPMG is investing \$2bn to embed AI and cloud technology throughout our Audit, Tax & Advisory businesses.

KPMG Clara

Our steps to progressively embed AI in the audit are geared around enhancing KPMG Clara, our global smart audit platform, which is now fully deployed across the world. KPMG Clara facilitates collaboration through a standardised use of workflow, automation and analytics to drive a consistent, data-driven digital audit across the globe. Our auditors in the UK are getting the most out of these capabilities:

Collaboration – Through real-time, secure interaction between our teams and the businesses we audit, we have more than 1,600 audit engagements using this capability to manage secure information exchange.

Automation – We are using automation to support data extraction, risk assessment, controls, and substantive testing. We have also deployed a proprietary cryptocurrency audit tool to help verify cryptocurrency holdings and transactions where these are used by the companies we audit.

Analytics – Analytics are at the heart of our work, driving a truly risk-based audit. The new transaction scoring capability builds on long-standing capabilities to analyse journal entries and other sub-ledger information.



Artificial Intelligence (AI)

AI will transform the future of audit – so we are continuing to make significant investments in both AI technology and training. Our Microsoft Alliance is key to this.

Emerging technology like generative AI will have a significant impact on all professional services, including audit. Our current deployment of KPMG Clara AI chat is just the first step in our generative AI journey. Over time, this capability will be integrated into KPMG Clara, along with Microsoft Copilot, creating a new, highly effective team member. It will help engagement teams effectively track and report audit progress, navigate the KPMG Clara workflow, improve documentation and deliver deeper audit insights.

AI, coupled with advanced analytics routines, will drive a more robust analysis of accounting records. This effort will deliver enhanced risk assessment and ensure our efforts are focused on the transactions that matter. We have already seen this through our deployment of KPMG Clara Transaction scoring which has been deployed to nearly 900 audits in the UK.

While we continue to invest in more seamless data extraction capabilities of our own to enable our digital audits, we are also investing in a future where AI and analytics capabilities run on our audited entities' data environments. This means that analytics will be able to run automatically without time and effort being spent – including by the businesses we audit – on extracting data.

Our vision is that AI will not only support enhanced audit quality, but will also improve the audit experience, for the companies we audit and our own people.

Technology skills

We continue to invest in our central audit technology team, increasing headcount from 258 at the end of FY23 to 273 at the end of FY24. The team works closely with auditors across the business to develop and deploy the latest technology into our digital audits.

Alongside this, we have a comprehensive training and upskilling programme for all our audit professionals in new technology. For example, at our 2024 KPMG Audit University we trained all of our auditors in prompt engineering to ensure they are equipped to engage with, challenge and get the most out of KPMG Clara AI chat in a responsible way.

Our Global Quality Framework

Continued

5. Assess risks to quality

Framework description

- Identify and understand risks to delivering quality and implement effective responses.

The quality of a KPMG audit rests on our SoQM and KPMG's global approach to ISQM 1 emphasises consistency and robustness of controls within KPMG firms' processes.

How we apply this in the UK

Our key quality control processes include:

- Audit Quality Council
- Audit Risk & Quality sub-committee
- Annual review of engagement leader portfolios
- Accreditation
- Audit risk panels
- Second Line of Defence "hot reviews"
- Pre-issuance review by the Department of Professional Practice of annual reports
- Emerging Issues process.

Iterative risk assessment process (iRAP)

In line with the KPMG Global SoQM Methodology, KPMG in the UK conducts an iterative risk assessment process (iRAP). This continuous process, overseen by those with operational responsibility for the SoQM and the Audit Committee, looks at a range of internal and external sources to assess whether there are any additional risks relevant to the SoQM that may require the implementation of additional controls or formal inclusion of existing controls within the SoQM. Once identified, controls are subject to monitoring and evaluation activities.

Under ISQM1, we are required to evaluate the effectiveness of our SoQM on an annual basis.

Activities during the year

We continue to refine our processes and controls to ensure we can mitigate and respond to risks which could affect audit quality. Our key quality control processes include:

Audit Quality Council

The Audit Quality Council is a forum for the leaders of our Audit Quality central teams and those with a role in driving audit quality activity in our Audit Performance Groups to discuss and agree on actions to implement our audit quality strategy. The Council meets monthly and receives updates from our Audit Quality central teams on their observations and activity for the month together with consideration of actions to address any emerging issues. Progress on both internal and external inspections are discussed and also the monitoring of remedial actions from prior reviews and inspections. Our audit learning plan is also approved at the Quality Council on an annual basis. The meeting is chaired by the Head of Audit Quality with members of the Quality Council including the heads of the Audit Quality teams e.g., Departments of Professional Practice, Second Line of Defence, Chief Auditor, Chief Accountant, and heads of internal and external inspections. The meeting is also attended by the Chief Risk Officer (CRO) for Audit, Audit Learning Director, Head of Culture for Audit and the partners who lead on Quality in the Audit Performance Groups including our offshore Quality Team.

Audit Risk & Quality sub-committee

The Audit Risk & Quality sub-committee meets monthly to assess and proactively address the risks that threaten audit quality. This could be across our Public Interest Entity, Other Entities of Public Interest or wider audited entity portfolios. The main areas considered by the sub-committee include the assessment and challenge of the safeguards and mitigations in place in response to the movement in internally calculated risk scores associated with individual audited entities and sectors; the response to the Second Line of Defence team's assessment of individual audit engagements; updates on regulatory developments and the status of associated regulatory commitments; and the identified actions in response to entities, engagements and themes included on the capability risk watchlist. Membership of the sub-committee includes the Audit Chief Risk Officer as Chair, Head of Audit Quality, Chief Auditor, Chief Accountant, Head of Audit Regulatory Compliance, risk partners and Performance Group Leaders from the key Performance Groups across the Audit capability.

Our Global Quality Framework

Continued

Annual review of engagement leader portfolios

The Chief Risk Officer for Audit assesses Responsible Individuals (RI) workload by considering a multitude of factors including but not limited to size of portfolio, pinch points, quality metrics, significant internal roles, hours worked and sickness. These factors are weighted and red, amber or green (RAG) score ratings are then attributed to in-scope RIs. Each RI completes a questionnaire and is then interviewed by a former partner or partner outside of their Performance Group where they can discuss their RAG score, portfolio, personal wellbeing, level of support across their portfolio of engagements, and any other concerns they may have. Ratings may then be adjusted based on the outcomes from the questionnaire and the interview process. Findings are reported to Audit Risk Management and Audit Leadership, who take action as required.

Accreditation

To drive continuous improvement of audit quality, we need to have the right people with the right skills, doing the right work at the right time.

Our audit portfolio has been divided into segments based on the risk and nature of the entities subject to audit. This has resulted in three defined main accreditation segments for managers and above – Listed and Regulated, Private Capital and Public Sector.

Each main accreditation segment is in turn made up of a number of sub-segments, enabling targeted competence and capability requirements within the overall accreditation segment.

Additional technical audit requirements apply to individual audits of certain entities. Each technical overlay has additional technical capabilities and some involve specific training over and above those of the three accreditation segments. Those technical overlays without specific training requirements are awarded at the discretion of the Audit CRO or Chief Auditor.

Accreditation requirements are determined at the engagement level and are driven by the sub-segment of the audited entity.

On an annual basis, all auditors from Manager to Partner are awarded a Certificate of Accreditation on the basis of their experience and training.

eQualify software tracks whether individuals hold the accreditations needed to work on an audit in a more robust fashion. eQualify is a one-stop solution to people's accreditations. Phase one deals with technical overlays, which are requirements specific to individual audited entities as discussed above. Each individual in KPMG in the UK and KGS in India has a profile in eQualify and can see at a glance what Audit Technical overlays they hold. They can also see if they need any further technical overlays which are linked to the jobs in their portfolio. If they do, the detail in the technical overlay links directly to our Learning Management system



and each person can assign themselves the relevant training without the need to consult. Once they have completed the relevant training, the technical overlay is automatically marked 'green' in the audited entity on which they are working. Phase two, which is now live, includes audit accreditations and allows engagement leaders and engagement managers to ensure that everyone requiring an accreditation on their engagement has one on a timely basis.

With effect from 5 December 2022, new regulations introduced by the FRC require all audit engagement leaders who sign UK Public Interest Entity (PIE) audits to be registered on the PIE Auditor Register (PAR). Our accreditation process supports our assessment of those engagement leaders registered to audit UK PIEs. As at 30 September 2024, the firm had 101 RIs included on the PAR.

Audit risk panels

Audit risk panels are held at planning and completion stage on high-risk engagements to challenge the audit team on their key judgements and planned audit approach. These panels are held prior to key communications with audit committees and include a review of the planned communications and financial statements (including the audit report). Each panel is chaired by an audit quality partner and supported by an experienced field partner and includes key members from the engagement team as well as the Second Line of Defence reviewer. Actions coming from the panel are monitored by the panel chair and in previous years have included to delay signing, to consult further with a technical expert, to adjust the audit approach, or to challenge further the clarity of disclosures in the annual report. In a survey of engagement teams, an overwhelming majority found them a useful process for challenging and refining their approach.

Our Global Quality Framework

Continued

Second Line of Defence 'hot reviews'

Our Second Line of Defence team is a coaching function that provides challenge and support to selected audit teams to enhance audit quality. It seeks to mitigate execution risk in the most significant areas of the audit for relevant engagements by evaluating and providing feedback on both the audit approach and the clarity of audit documentation. We have continued to grow our Second Line of Defence team in the current year and to enhance the approach that is followed. Notable developments this year included:

Expanding the team to include colleagues in our offshore delivery centre and developing plans to introduce specific review processes to support audit staff who work in those teams in the coming year;

Embedding into our methodology a more structured 'close the loop' approach regarding the re-review of audit work by Second Line of Defence reviewers following the consideration of audit teams' responses to their original observations, and a variation of the role where Second Line of Defence reviewers act as Engagement Quality Reviewer Assistants on selected audit engagements; and

Piloting enhancements to the reporting functionality within our Second Line of Defence IT tool that will allow deeper analysis of the quality themes identified by Second Line of Defence reviewers, which will contribute to our Emerging Issues process and inform ongoing investment in quality improvements.

Our Second Line of Defence reviewers provide monthly reporting to Performance Group Leaders with an assessment of the engagements they are supporting and a RAG rating of the risks facing the engagement team from a resourcing or quality point of view. The RAG rating will alert the Performance Group Leader to the need to take remedial action to mitigate any delivery risks.

Pre-issuance review by the Department of Professional Practice of annual reports

For listed or high-risk entities, an independent review of their annual reports is carried out by the Department of Professional Practice prior to the audit report being signed. This review seeks to identify, and as a result resolve, instances of material non-compliance with reporting requirements and areas where disclosures are unclear or could be improved.

The final element of the pre-issuance review is, of necessity, conducted when a final draft of the annual report is available, which tends to be in the final section of the audit process. This year we have continued to develop our pre-issuance review guidance and process to further support audit teams and enhance the quality of the audit through acceleration of discussion of issues and transactions that could affect the review. We encourage audit teams to hold upfront planning discussions with their pre-issuance reviewer and encourage ongoing dialogue between the audit team and the reviewer.

For identified highest-risk engagements, pre-issuance review teams are allocated early in the audit cycle to encourage discussion of accounting and reporting matters with the reviewer throughout the course of the audit. This aims to reduce the number of issues identified late in the audit process.

In addition, we continue to encourage entities to progress their annual reports earlier to facilitate pre-issuance reviews on an earlier draft of the document. Where this is not possible, the pre-issuance reviewer can review individual disclosure notes where these are new or considered by the audit team to be higher risk.

Emerging Issues process

The Emerging Issues (EI) process is a standard reporting framework which captures emerging audit quality issues, to determine and evaluate common issues identified across our technical teams, findings from internal and external quality reviews, and other external sources. The purpose of the EI process is to stay abreast of issues arising and take necessary action. Actual or potential emerging issues are identified from a number of sources including audit leadership, field auditors, the Audit Centre of Excellence (ACE) and audit quality monitoring activities (on both live and completed engagements). In addition, other potential emerging issues are identified from third party sources such as FRC announcements, press comments and other regulatory announcements. This allows us to capture an inventory of possible emerging issues, based on the activities of ACE and more widely across the audit practice.

The EI process aggregates themes, prioritises them and provides mitigating responses to the audit practice in a timely manner.

The Chief Auditor presents a monthly summary discussion paper at the Audit Quality Council (AQC) for approval of the proposed actions. Root Cause Analysis (RCA) will be used to investigate selected issues where more detailed insight is needed before a response can be developed and deployed. This complements the existing RCA process focused on quality review findings.

The EI framework is designed to capture emerging issues and deliver timely responses to them. However, we recognise that, from time to time, a faster reaction may be needed. For example, issues may arise that are considered by the AQC to be of sufficient significance (i.e., they relate to a matter that audit teams more generally need to be aware of in short order to ensure audit quality) as to require a more immediate response, or an interim response while a longer-term solution is developed. These urgent escalations will either be in the form of communication in the DPP Bulletin or via an immediate communication from relevant audit leadership if an even swifter response is required.

We monitor the effectiveness of actions taken through existing monitoring processes in liaison with the action owners.

Our Global Quality Framework

Continued

6. Apply expertise and knowledge

Framework description

- Methodology aligned with professional standards, laws and regulations.
- Standardised methodology and guidance.
- Deep technical expertise and knowledge.
- Quality and risk management policies.

Across the global organisation, KPMG is committed to continuing to build on our professionals' technical expertise and knowledge recognising its fundamental role in delivering quality audits.

How we apply this in the UK

Consistent audit and assurance methodology and tools

- The KPMG Clara workflow (KCw) makes it easier for our people to execute high-quality audits and respond consistently to identified risks.
- The KPMG Audit Execution Guide (KAEG) sets out our methodology requirements, based on the requirements of the International Standards on Auditing (ISAs), and additional requirements that go beyond the ISAs and which KPMG believes enhance the quality and value of our audits. At KPMG in the UK, we add local requirements and guidance to comply with additional professional, legal or regulatory requirements specific to the UK and our own internal policies.
- Standardised workpapers and guidance assist our audit teams in consistent delivery.

Deep technical expertise and knowledge

We are committed to ensuring that audit professionals have appropriate audit, accounting and industry knowledge, experience and training. Our accreditation process enables us to ensure the right partners and employees are assigned to engagements and are licensed where necessary.

Quality and risk management policies

KPMG International ("KPMGI") has established a quality framework across its network of member firms based on the International Standard on Quality Management (ISQM1) issued by the International Auditing and Assurance Standards Board (IAASB) and the Code of Ethics for Professional Accountants issued by the International Ethics Standards Board for Accountants (IESBA), which apply to professional services firms that perform statutory audits and other assurance and related services engagements.

The policies and associated procedures within this framework enable member firms to comply with relevant professional standards, and with regulatory and legal requirements, and help our partners and employees act with integrity and objectivity, performing their work with diligence.

KPMG in the UK supplements KPMGI's quality framework with additional policies and procedures that address its specific business risks as well as rules and standards issued by the FRC, the ICAEW and other relevant regulators, such as the US Public Company Accounting Oversight Board (PCAOB).

Refer to: [Quality control and risk management](#) ([Our quality control and risk management systems](#)).

Activities during the year

We continue to benefit from investments in Audit Quality. Our KPMG Clara workflow (KCw) platform continues to be the foundational tool for delivering our audits and supports our people in executing high-quality audits and responding consistently to identified risks.

KCw is accompanied by the KPMG Audit Execution Guide (KAEG) which sets out our methodology requirements. The methodology is based on the requirements of the International Standards on Auditing (ISAs) and all member firms are required to follow it. KAEG also includes additional requirements that go beyond the ISAs and which KPMG believes enhance the quality and value of our audits.

At KPMG in the UK, we add local requirements and guidance to comply with additional professional, legal or regulatory requirements specific to the UK, our own internal policies, and to proactively respond to economic or industry events. KCw provides our audit teams with access to such requirements and industry knowledge with smart libraries embedded within the tool. This allows for a consistent approach, tailored by industry, and focused on key audit risks. To further support our teams, standardised workpapers and guidance assist our audit teams in consistent delivery. Last year we introduced our UK Audit Requirements Tool to support the scalable delivery of such standardised workpapers to our people in a manner that is consistent with, and complementary to, KCw.

Our Global Quality Framework

Continued

Deep technical expertise and knowledge

Code of Conduct

We are committed to ensuring that audit professionals have appropriate audit, accounting and industry knowledge, experience and training. Our accreditation process enables us to ensure the right partners and employees are assigned to engagements and are licensed where necessary.

Our formal audit training programme supports the development of technical expertise and knowledge within our audit practice. It includes mandatory audit and accounting technical training, industry-specific training and risk courses. This is supported by centrally run fortnightly technical briefings, lunch and learns (including a new programme on core audit skills and fundamental knowledge), drop-in clinics and locally run sessions using centrally developed content.

This year, our flagship training programme, KPMG Audit University (KAU), ran over three days and was attended by 3,058 (FY23: 3,062) Audit and IT Audit colleagues. The theme for our 2024 KAU was Empowering through Accountability and had a particular focus on building rapport in a digital world, the revised ISA 600, and putting AI in the hands of every auditor for use on every KPMG audit over the next 12 months. Consistent with previous years, the content also covered a broader range of areas from across the audit lifecycle. This year that included risk assessment, sustainability, and journals testing, delivered in a mix of plenary and breakout sessions.

As well as linking multiple UK locations for the event kick-offs, we also ran some sessions directly with our offshore KPMG Global Services (KGS) colleagues, who completed the same content at their events.

Beyond KAU, the mandatory learning curriculum includes biannual updates focusing on performing an effective quality audit with different topic areas included as relevant. An Audit Quality and Risk Workshop is delivered twice a year for engagement leaders and focuses on key messages driven by internal and external monitoring findings. This content is also extended to audit managers and senior managers through live and recorded workshops.

In addition, partners and audit professionals must complete training relevant to their grade and role. This includes sector-specific training as well as training to support staff in their roles, such as working on US engagements, and has included a new global banking curriculum this year. Completion of such training is built into accreditation requirements to work on specified engagements, which we manage through our eQualify system. Our curriculum extends beyond audit technical learning. For example, our 'Building Trust' risk training has this year focused on conflicts of interest, client acceptance, our [Code of Conduct](#), protecting information, and firm and personal independence.

As well as the technical curriculum, auditors spend time on skills programmes to support their career and professional development.

In a change from previous transparency reports, the table below shows the actual average learning hours and the planned minimum mandatory learning hours for all grades in audit. The 2023 comparatives have also been represented in this format.

FY24

	Partner/ Director	Senior Manager/ Manager	Other qualified staff	Non- qualified staff	Total	
The average learning hours completed by all audit partners and staff as recorded in the learning management system during the financial year, including mandatory and elective training ¹⁰	FY24	90	84	90	77	83
	FY23	72	76	114	94	94
Planned minimum mandatory learning hours	FY24	49	50	45	67	55
	FY23	52	47	48	67	50

¹⁰ Actual average learning hours include all learning completed and recorded in our learning management system by all audit grades. This includes mandatory audit, accounting and compliance training and any other learning required for specific engagement accreditation, such as auditing and reporting under US standards. It also includes other business and skills related learning.

Our Global Quality Framework

Continued



There have been increases in actual learning hours for Partners and Directors due to an increase in assurance and technical Environmental, Social and Governance (ESG) learning, including Corporate Sustainability Reporting Directive (CSRD), and an increased focus on leadership skills. For Senior Managers and Managers, the increase is due to the requirement to complete bi-annual Audit Quality Workshops already required for Partners and Directors, and an increase in assurance and ESG learning. For other qualified staff there has been a reduction in the average hours recorded in the period, due to fewer qualified joiners and a change in timing of delivery for some core courses. For non-qualified staff the reduction is due to the timing of their initial graduate audit training. The hours presented do not include time spent on professional exams for non-qualified staff.

Technical support for our engagement teams

Internal consultation, both formal and informal, is a fundamental contributor to quality; it is always encouraged and is mandated in certain circumstances. We provide appropriate consultation support to audit engagement professionals through professional practice resources – this includes our Chief Auditor, Chief Accountant, DPP Accounting & Reporting, DPP Audit, and Audit Risk Management. Mandatory consultation requirements include matters such as where we identify non-compliance with laws and regulations, where a team proposes to deviate from our standard

methodology, or where certain risks such as issues with going concern are identified. Consulting on issues is a fundamental part of our High Challenge, High Support culture.

The Second Line of Defence team provides coaching and technical support through their hot review programme which provides feedback on both the audit approach and the clarity of audit documentation. Our US Accounting and Reporting group (USARG) based in London provides coaching and technical support for our US engagement teams, while further technical support is also available through our International Standards Group, as well as the US Capital Markets Group based in New York for work on SEC registrants.

We also have Audit Risk Panels, led by an audit quality or audit risk management partner and supported by an experienced field partner. These enable direct challenge of the approach to the key audit issues on our highest risk audits and support the team in reaching robust conclusions on approach and timing.

Our Global Quality Framework

Continued

7. Communicate effectively

Framework description

- Provide insights and maintain open and honest two-way communication.
- Conduct and follow up on the Global People Survey.

We recognise that another important contributor to upholding audit quality is to obtain and promptly act upon feedback from key stakeholders.

How we apply this in the UK

Effective communication is critically important, both externally to key stakeholders and internally to staff and audit teams.

External communication audiences include our regulators through reporting and regular dialogue, as well as investors and other interested parties primarily via our audit reports. We also communicate with the entities we audit through two-way channels. Confidentiality, information security and privacy are also essential concerns that we take extremely seriously.

Wider communication to all stakeholders who may take an interest in our business is a growing priority too – as evidenced by the time and resource we commit to our public reporting via this Transparency Report and other reports linked to our Annual Review, such as our: Planet Impact Report; Community Impact Report; Pay Gap Report; Partner Diversity Report; Climate, Energy and Carbon Report; and our Members'

Report and Financial Statements. This is all hosted on [Our Impact](#), which is the home for all of KPMG in the UK's corporate reporting.

Strong internal communication is also key, to ensure that our people know what is expected of them, how the practice is performing, and priorities moving forward – and also to give our staff a mechanism to have their views and feedback heard by audit leaders. Annually, all KPMG colleagues are invited to participate in KPMG's Global People Survey, to share their perception on their experience of working at KPMG. Each member firm is responsible for taking appropriate actions to communicate and respond to its findings.

Activities during the year

External communication and engagement

The Spring Report

We have continued to emphasise the importance of the ecosystem in supporting high audit quality this year. This includes a continued focus from our engagement leaders on the messages from the Spring Report, published the Audit Committee Chairs' Independent Forum (ACCIF), supporting higher quality conversations with audit committee Chairs and changes in some processes with some of the companies we audit. Effective, transparent and robust dialogue between auditors and audit committee Chairs is key to delivering a high-quality audit as assessed by our regulators. We welcome the recognition of the importance of each party playing its role by ACCIF and the FRC and will continue to work with both groups, and representatives of other firms, on future similar projects.

Audit and Corporate Governance reforms

Throughout the year, the firm has been actively involved in the latest Audit and Corporate Governance reform developments. This includes engaging with and responding to consultations and calls for evidence from the FRC and the Department for Business and Trade. In particular, this has included providing our feedback on revisions to the UK Corporate Governance Code which introduce a provision for boards to make a statement about the effectiveness of their material internal controls.

We were pleased to see the Draft Audit Reform and Corporate Governance Bill announced in the King's Speech in July 2024. The creation of the new regulator ARGA (the Audit, Reporting and Governance Authority) with statutory powers to regulate across the boardroom will have a positive impact, supporting well-functioning financial markets, business investment and growth. In our view, the outcome of the legislation should be proportionate, ensuring that the UK remains an attractive destination for business, investment and talent, as well as maintaining the UK's position as a leading provider of professional services. We are committed to working closely with the corporate reporting ecosystem as the draft legislation is developed.

Our Global Quality Framework

Continued

The Centre for Public Interest Audit (CPIA)

The CPIA was established during the year, bringing together leaders from across the profession as a single, standalone voice to support reform, shape best practice in UK public interest entity audit and challenge the status quo. As a firm, we are supportive of the CPIA and have been part of the initiative to establish this entity. An Audit partner from KPMG is also a member of the CPIA Board.

Audit Committee Institute

Our Audit Committee Institute (ACI) helps audit committee members enhance their awareness, commitment and ability to implement effective processes – with a view to contributing positively to the long-term sustainability of UK plc.

With financial reporting, compliance, risk and internal control environments being put to the test by an array of challenges – from global economic volatility and the wars in Ukraine and the Middle East, to cybersecurity risks and ransomware attacks, and preparations for climate and sustainability reporting requirements – our audit committee seminars and thought leadership have covered a wide range of topics. Of particular note have been our discussions around the government's audit and corporate governance reform agenda, ESG, Gen AI, cyber security and financial crime; with our seminars on corporate culture and the science behind why people commit financial deception being particularly well received. Thought leadership highlights have included a comprehensive toolkit for audit committee

members, and our seminal papers '[On the Audit Committee Agenda](#)', '[ESG for audit committees](#)', and '[Oversight of Gen AI](#)'.

The ACI in the UK now has around 2,354 (2023: 2,277) members across both the private and public sectors. 53 FTSE 100 companies (2023: 56) have engaged with the programme through the active attendance of one or more board members. The audit committee chairs of 71 FTSE 100 companies (2023: 61) are members – receiving our thought leadership, guidance, updates and surveys.

Investor engagement

High-quality information and effective governance are an essential foundation for strong capital markets. KPMG's Investor Insights programme has been set up to facilitate communication between auditors, who provide vital assurance over financial statements issued to the markets, and investing shareholders, who rely on that assurance.

Our programme aims to:

- Provide a forum to discuss and share perspectives on how corporate reporting and governance can evolve to meet investors' needs today and in the future.
- Explain the impact of developments in corporate reporting and assurance from an investor's point of view.

The programme is sponsored by the Audit Executive, reports to (and is challenged by) our Audit Board and Public Interest Committee, and is delivered with the support of some of

our most experienced audit partners. We have continued to extend our engagement with investors and investor organisations to better understand their needs and inform how we can best respond.

We have held meetings and events to better understand views on topics of mutual interest such as governance (including the FRC's revisions to the UK Corporate Governance Code), reporting and sustainability matters. We also shared insights on how audits are performed, how to interpret audit reports and the journey to ESG assurance.

This dialogue has generated valuable insight into how audit and assurance might need to change to meet the evolving needs of users of corporate reporting.

We believe engagement between key stakeholders across the ecosystem is essential and invite investor representatives to speak at our Board Leadership Centre events to promote dialogue with Non-Executive Directors. Our Independent Non-Executives and Audit Non-Executives also attend some of our events and we ensure there is ongoing dialogue between the investment community and our leadership.

We greatly value the insight and challenge provided by investors over the course of this year and encourage investors to continue to engage with us as we help shape the future of audit.

To find out more about our programme, our publications and how to get in touch, visit our [Investor Insights](#) website.

Political engagement

As a leading professional services firm, we recognise the importance of engaging with politicians, policy makers and our regulators on issues of importance to business and society. We are committed to ensuring that our political engagement is based on principles of transparency, integrity and accountability, and we maintain a position of political neutrality at all times. We have a firm-wide political relationships and activity policy that all colleagues must comply with to ensure we demonstrate best practice at all levels of engagement.

Further details of our approach to political engagement can be found [here](#).

Our Global Quality Framework

Continued

Internal communication

We have a monthly online news publication, Talking Audit, that supports the cascade of progress and updates aligned to our strategic priorities for Audit (Empowering Our People, Delivering Sustainable Quality, Supporting Seamless Delivery, and Maintaining Robust Growth). We have continued to shape our communication around our Audit of the Future vision, all of which underpins our ambition to become the most trusted firm.

Cath Burnet, Head of Audit, shares practice and firm-wide updates via a monthly video, and we spotlight leaders and colleagues to drive further engagement across topics and teams.

We share a cascade pack tri-annually ('Team Talk'), providing leaders with all of the information they need to share updates in a way that best suits their team's needs. We continuously seek and evaluate feedback to allow us to enhance our communication strategy and outputs.

Our Audit people stories, 'Life Accounts', are published monthly online. They explore the variety of roles and career paths within the practice, helping bring to life our approach to supporting inclusion, diversity and equity and our High Challenge, High Support culture. We also publish 'win' stories in online article format to celebrate our Audit successes and share learnings.

Another way in which we engage colleagues with our progress is via the Audit Progress Dashboard, which is published quarterly.

The dashboard includes metrics showing the progress we are making against our four strategic priorities.

To ensure leadership are informed on topical updates (from economic, regulatory and governance issues to strategy, quality and people matters), monthly calls for the Audit partner and director population are hosted via Teams, including the opportunity to ask questions and discuss complementary key messages and actions.

We also host an annual 'Audit Connect' event (alternating between in-person and remote) for Audit partners and directors where we look back on progress, share successes and learnings, and galvanise leaders around the strategy and opportunities for the upcoming year.

A regional roadshow schedule for colleagues at all levels further supports both leadership visibility and the ability for colleagues to have open and honest dialogue in an informal face-to-face setting with leaders.

Finally, we keep our Audit people manager population updated on all planned communications via a weekly email to prepare them and enable them to engage their individual teams with communications when it's most relevant and timely.

The impact of our engagement in practice

ESG in audit and assurance

Investors continue to be very focused on developments in the ESG agenda, and in particular sustainability and climate risks and how their impact is being reflected in financial statements. We continue to engage with the investor community to better respond to calls for additional transparency in our audit reports and discuss how material climate risk exposures are factored into our audit process. We include insight into our assessment in the long form audit report of every FTSE 350 company.

Increases in the demand and requirement for ESG assurance in global markets continue at pace. We have a dedicated ESG Assurance team working closely with Audit teams, providing additional assurance over KPIs that are of greatest interest to investors. In addition to the voluntary assurance that companies are seeking, we have been assuring European market Corporate Sustainability Reporting Directive (CSRD) disclosures for the first time this year.

Our Global Quality Framework

Continued

8. Nurture diverse skilled teams

Framework description

- Recruit appropriately qualified and skilled people with diversity of specialist skills, perspective and experience.
- Assign appropriately qualified team.
- Invest in data-centric skills – including data mining, analysis and visualisation.
- Focus learning and development on technical expertise, professional acumen and leadership skill.
- Recognise quality.

Across the global organisation KPMG people make the real difference and are instrumental in shaping the future of audit at KPMG. We put quality and integrity at the core of our audit practice. KPMG auditors have diverse skills and capabilities to address complex problems.

How we apply this in the UK

We are committed to equipping our people with the skills and tools they need to deliver high-quality work for our stakeholders and for the entities that we audit.

One of the key drivers of quality is making sure we assign people with the right level of skills and experience to the right engagements. This requires a focus on recruitment, development, promotion and retention of our people and the development of robust capacity, accreditation and resource management processes.

You can read more about our UK people strategy in the [People and culture](#) section.

Activities during the year

We are committed to being a place where diverse talent can flourish and recognise that it is the quality of our people that will ultimately determine our success.

The [People and culture](#) section explains the measures and policies we have in place to ensure we remain focused on diversity, skills and quality.



Our Global Quality Framework

Continued

9. Associate with right audited entities and engagements

Framework description

- Follow acceptance, engagement and continuance policies.
- Accept appropriate engagements.
- Manage portfolio of engagements.

Rigorous client and engagement acceptance and continuance policies are vital to being able to provide high-quality professional services.

How we apply this in the UK

We evaluate all prospective audited entities before accepting them. This includes a review of any non-audit services provided to the entity and of other relevant relationships and matters which may have a bearing on our independence. We also perform background checks on the prospective audited entity, its key management and beneficial owners. A key focus is on the integrity of management.

A second partner, as well as the evaluating partner, approves the prospective audited entity evaluation. Where the audited entity is considered to be 'high risk', the Risk Management Partner is involved in approving it. Each prospective engagement is also evaluated. The engagement leader evaluates this in consultation with other senior colleagues and Risk Management leadership as required.

Controls are built into our engagement management system to ensure we complete the audited entity and engagement acceptance process appropriately.

Additional safeguards may be introduced to help mitigate any identified risks, and potential independence or conflict of interest issues are documented and resolved prior to acceptance.

We will decline a prospective audit engagement if a potential independence or conflict issue cannot be resolved satisfactorily.

Audit services are reviewed at least annually. Ongoing monitoring means that audited entities are re-evaluated earlier if there is an indication that there may be a change in their risk profile. Recurring or long-running engagements are also subject to periodic re-evaluation.

Activities during the year

Robust application of our well-established acceptance and continuance policies enables us to make swift, consistent and sound decisions about which entities we work with and what work we do.

We evaluate all prospective audited entities at a number of points in the onboarding process, starting with the decision to participate in a tender. Checks cover areas including conflicts of interest, independence and the identity and integrity of management and owners.

All new entity evaluations and entity evaluations where there is a change in risk grade are reviewed by a second partner. Engagement continuance evaluations that are medium risk or those that have an increase in their risk rating from the previous year are subject to review by a second partner. All new evaluations, including those deemed high risk and evaluations with a decreased risk rating compared to the prior year, will be reviewed by the Audit Chief Risk Officer (and/or their delegates). The review process may identify additional mitigations to be put in place against specific audit risks including delivery risks such as information security and data privacy.

We reconsider whether to continue as auditor on each audit annually. We take into consideration any perceived weaknesses within the audited entity's governance structure, control environment, finance function, culture and behaviours, and where applicable any known or suspected non-compliance with laws and regulations. Where there are issues that pose a significant risk to audit quality, we may impose conditions on our continuance as auditor.

The issuing of conditions on continuance, in writing, to those charged with governance allows the engagement leader to document the issues experienced during the course of the audit and to outline the necessary steps and/or actions that need to be taken by those charged with governance.

We have developed tools that support engagement leaders who have imposed conditions on continuance to perform regular ongoing monitoring of progress against the conditions. Where there is little evidence of progress, the engagement leader will escalate the case to the Head of Business Risk for consideration of next steps which could include a formal continuance panel.

We work with audited entity management to agree any conditions on continuance and monitor progress against commitments.

Our Global Quality Framework

Continued

10. Monitor and remediate

Framework description

- Rigorously monitor and measure quality.
- Obtain, evaluate and act on stakeholder feedback.
- Perform root cause analysis.

Integrated quality monitoring and compliance programmes enable KPMG firms to identify quality deficiencies, perform root cause analysis and develop, implement and report remedial action plans, both in respect of individual audit engagements and the overall SoQM.

How we apply this in the UK

We focus on ensuring our work continues to meet the needs of participants in the capital markets. To achieve this goal, we employ a broad range of mechanisms to monitor our performance, respond to feedback and understand our opportunities for continuous improvement:

- Internal monitoring which includes: Audit Quality Performance Review (QPR); KPMG Quality & Compliance Evaluation (KQCE); Global Quality & Compliance Review (GQCR); and Root Cause Analysis processes.
- Engagement Quality Control Reviewers (EQCRs) and other 'first line' quality control processes, including in relation to legal and contracting matters.

- External monitoring which includes the findings from Audit Quality Reviews, the Quality Assurance Department and the PCAOB.
- Regulatory investigations and sanctions.
- Audited entity feedback to better understand expectations and where we can do better. Senior leadership has visibility of all feedback to identify trends and ensure an appropriate response.
- Monitoring of complaints received relating to the quality of our work. These procedures are detailed on our website and are also included in our general terms of business. All formal complaints are investigated under the authority of the Chief Risk Officer.

Activities during the year

At the centre of our Global Quality Framework is continuous improvement. Our Single Quality Plan (SQP) is at the heart of this – we use it to drive measurable improvements in critical areas. Our SQP supports us in being dynamic to respond to emerging issues and is a key driver in delivering sustainable audit quality. We have been pleased with the recognition of the quality and utility of our SQP as we have worked to embed it in our processes, use it to monitor our progress, and support us in identifying areas for remediation.

Single Quality Plan (SQP)

Our SQP supports us in evaluating information from a range of data points including our Emerging Issues process, inspection and review findings, Second Line of Defence themes, root cause analysis reporting, the Annual Risk Review, and executive meetings such as the Quality Council and Audit Executive.

We regularly assess what topics have escalated in priority or have been resolved and we track these movements on our dynamic heat map. The heat map helps us identify and keep focus on both our priority and foundational programmes. The status of these programmes can change throughout the year as we evaluate the effectiveness of actions taken using a range of specific and focused KPIs to measure success.

Priority programmes

Our priority programmes at the start of the year were:

- Banking Audit Quality Improvement Programme (focused on improving the quality of our banking audits).
- Root cause analysis (improving the quality and timeliness of our root cause and remediation processes).
- Engagement analytics (using data obtained through KCw to monitor the progress of our audits with the aim of accelerating work).
- Impairment (improving the consistency of audit work execution for impairment of non-financial assets).
- Close the loop (a programme focused on minimising the instances of an audit file not fully reflecting the intentions of a technical consultation or hot review comments).

By the end of the year our Banking Audit Quality Improvement Programme had commenced transition to a business-as-usual state with a focus on sustainable execution, following clear improvements achieved by the broad array of activities within the programme.

Our Global Quality Framework

Continued

Following findings in AQR inspections and internal monitoring, we prioritised activities relating to our audit of non-compliance with laws and regulations and risk assessment – both of which moved to priority programmes during the year. Further, a key theme of 'Simplification' was identified driven by the need to ensure our audit product is suitably scalable across the portfolio – this was escalated in the SQP to a priority programme with the aim of challenging our approach in a range of ways.

Foundational programmes

Our foundational programmes, which we expect to be an enduring focus as they support our ability to deliver sustainable audit quality, are:

- Culture programme initiatives (focused on embedding our culture of High Challenge, High Support consistently across the business).
- Training programme (focusing on delivering effective training that provides our people with the skills they need for both todays and future audits).
- Technology adoption (targeted at ensuring high-quality and consistent adoption and application of both existing and new technology products).

Measuring our progress

Each month we assess our progress through a combination of progress and effectiveness KPIs which are a blend of qualitative and quantitative measures, linked to the objectives of each programme. As these measures can fluctuate during the year, we look for trends and evidence that the measures we are taking are being effective. This will be key in ensuring we have an effective response to audit quality related issues.

Remediation – improving our root cause process

Over the past couple of years, we have invested in both our root cause and remediation teams to ensure that we learn from the findings of both internal and external reviews, have robust processes to embed best practices, and have appropriate actions plans developed to address learnings. Both teams have been set up to be operationally separate from audit teams and report through the Chief Auditor to the Head of Audit Quality.

The root cause team performs reviews on the findings from AQR, QAD and internal monitoring inspections. Ad hoc reviews can also be undertaken to consider audit-wide matters identified through a variety of other sources such as the firm's Audit risk team, Office of General Counsel and the Emerging Issues process. The root cause team uses a variety of data points to inform interview questions and seeks to get to the bottom of why the issues occurred. We now have a stable RCA taxonomy with different levels of aggregation

and disaggregation created to enable clear identification of root causes and enhance the design of targeted remedial actions. Categories have been drawn so that Quality Monitoring, Skills and External Factors are separately identified.

The severity of root causes is assessed with the classifications being primary, secondary or contributory. Primary and secondary are subject to aggregation and reporting.

The remediation team takes the outputs from the root cause team to develop appropriate responses and monitors the effectiveness of these actions, proposing adjustments where they are not having the desired impact. Regular monitoring of the impact of remedial actions is a key part of our RCA programme so that we can adapt our approach as new issues arise. We apply a mix of remedial actions focusing on both firmwide and specific engagement team actions with an overarching goal of driving a sustainable High Challenge, High Support culture.

In the past year we have embedded the improvements in the process established during 2023 and introduced a soft controls model to assist in the identification of factors which drive individual behaviours. The investment made in the team has resulted in an increase in the extent and breadth of reviews undertaken during the year. The remediation team has analysed the forms of remediation previously undertaken and the effectiveness of those actions to provide a framework to assess the likelihood of success for future actions.

Monitoring: data-driven audits

The adoption of KCw as our global audit tool has enhanced the independent monitoring of the status of our audits. We have developed milestones that audit teams are challenged to meet through the audit cycle with the objective of completing as much work as possible in advance of the post-year end compressed time frame, ensuring that teams have the requisite time to stand back and assimilate their audit findings before signing their opinions. This, together with the use of data mining tools to increase real-time visibility of progress and identify the need for direct intervention to provide additional support to teams, helps ensure that the right work is being undertaken by the right people at the right time.

We're pleased with the progress made in re-phasing work across our portfolio to date, but there is more to do as we work with companies on improving the timeliness and quality of management information which is needed to achieve the milestones and avoid rework. We have refreshed our requirements and enhanced our monitoring process this year to further support our engagement teams. We continuously analyse the data and use it to improve and evolve our monitoring process, allowing us to more proactively monitor and support our entire engagement portfolio.

04

Quality control and risk management



Our quality control and risk management systems

Introduction

We have numerous policies and procedures in place within the UK firm to enable our compliance with professional standards. Partners and employees are responsible for complying with these policies and procedures, and there are internal controls and processes in place to help them do so.

The Board annually assesses both the effectiveness of the firm's internal controls and its compliance with independence policies and confirms the firm's compliance with the Audit Firm Governance Code.



Accountability

The Board has overall responsibility for risk management and internal control:

- The assessment and management of risk is supported by the Risk Committee.
- Monitoring of internal controls is supported by the Audit Committee.
- From 1 October 2024, a new UK Audit and Risk Committee will be established to support the assessment and management of risk and monitoring of internal controls.

The firm has adopted KPMG's Global Independence Policies:

- All partners and partner equivalents are subject to a compliance audit at least once every five-year period, and those partners in a Chain of Command role are audited at least once every three years.
- We provide all relevant colleagues (partners, employees and contractors) with annual firm independence, personal independence and conflicts of interest training.
- Training on compliance with laws, regulations, professional standards and our [Code of Conduct](#) is issued to all partners and employees on joining the Firm and annually thereafter.

The firm's Internal Audit plan is reviewed and approved by the Audit Committee:

- Internal Audit provides the Audit Committee with independent and objective assurance on the adequacy and effectiveness of our governance, risk management and internal control processes. As stated above, from 1 October 2024, the new UK Audit and Risk Committee will provide oversight of the Internal Audit plan.
- The firm's Internal Audit function was subject to an external quality assessment in FY21 and received a 'Generally Conforms' report against the professional standards for internal audit.

Policies and procedures

KPMG International (KPMGI) has established a quality framework across its network of member firms based on the International Standard on Quality Management (ISQM1) issued by the International Auditing and Assurance Standards Board (IAASB) and the Code of Ethics for Professional Accountants issued by the International Ethics Standards Board for Accountants (IESBA), which apply to professional services firms that perform statutory audits and other assurance and related services engagements.

The policies and associated procedures within this framework enable member firms to comply with relevant professional standards, and with regulatory and legal requirements, and help our partners and employees act with integrity and objectivity, performing their work with diligence.

Our quality control and risk management systems

Continued

KPMG in the UK supplements KPMG's quality framework with additional policies and procedures that address its specific business risks as well as rules and standards issued by the FRC, the ICAEW and other relevant regulators, such as the US Public Company Accounting Oversight Board (PCAOB).

System of Quality Management (SoQM) and ISQM1

Consistent and strong controls within our firm's system of quality management (SoQM) help reduce quality issues, drive operational efficiencies, and enhance transparency and accountability. We are committed to continually strengthening the consistency and robustness of our SoQM.

ISQM1 was issued by the IAASB and became effective on 15 December 2022, together with the UK version of the standard issued by the FRC (the International Standard on Quality Management (UK) 1 (ISQM (UK) 1)). References to the application of ISQM1 are in accordance with ISQM (UK) 1.

KPMG International's (KPMG's) global approach to SoQM and ISQM1

Across the global organisation, KPMG firms have strengthened the consistency and robustness of their system of quality management (SoQM) to meet the requirements of ISQM1.

Our [Global Quality Framework](#) outlines how we deliver quality at KPMG. An effective System of Quality Management (SoQM) is crucial for the consistent performance of high-quality engagements, it supports our commitment to continually monitor and remediate our processes as necessary and it helps us to adhere to the requirements of ISQM1.

For each component in the standard, KPMG has established globally consistent quality objectives, quality risks and responses. The objective of this centralised approach is to drive consistency, robustness and accountability of responses for processes implemented across our global organisation. Where necessary, we have supplemented the KPMG requirements with additional quality objectives, quality risks and responses identified through a UK risk assessment process.

Roles and responsibilities in the UK

In accordance with ISQM1, the Chief Executive is the leader who has ultimate responsibility for the UK's SoQM.

The Head of Audit and Chief Operating and Financial Officer (COFO) assume operational responsibility for the UK's SoQM.

The Ethics Partner is responsible for compliance with independence requirements under the UK's SoQM and also has operational responsibility in relation to the UK firm's ethics and independence requirements.

The Chief Risk Officer has monitoring and remediation responsibility for the UK's SoQM.

Iterative risk assessment (iRAP) process

KPMG International performs an annual iterative risk assessment process (iRAP) to determine the baseline expected quality objectives, quality risks, process risk points (responses to those risks, including controls) that all KPMG firms agree to adopt.

In recognition that we are responsible for our SoQM complying with ISQM1 in the UK, the firm conducts its own iterative risk assessment process (iRAP). This continuous process, overseen by those with operational responsibility for the SoQM and the Audit Committee, looks at a range of internal and external sources to assess whether there are any additional risks that may require the implementation of additional controls or formal inclusion of existing controls within the SoQM. Once identified, controls are subject to monitoring and evaluation activities as outlined here: [Global Quality Framework](#) (1. Perform quality engagements – Internal monitoring).

Annual SoQM evaluation

Under ISQM1 we are required to evaluate the effectiveness of our system of quality management on an annual basis. Our first evaluation was performed as of 30 September 2023 – see below for the results of our second annual evaluation performed as of 30 September 2024.

Find out more about the approach we take to the monitoring and evaluation of our SoQM here: [Global Quality Framework](#) (1. Perform quality engagements – Internal monitoring).

Statement on the effectiveness of the System of Quality Management of KPMG UK LLP as at 30 September 2024

As required by the International Auditing and Assurance Standards Board (IAASB)'s International Standard on Quality Management (ISQM1), the Financial Reporting Council (FRC)'s International Standard on Quality Management (UK) 1 (ISQM (UK) 1), and KPMG International Limited Policy, KPMG UK LLP (the "Firm" and/or "KPMG UK") has responsibility to design, implement and operate a System of Quality Management for audits or reviews of financial statements, or other assurance or related services engagements performed by the firm.

The objectives of the System of Quality Management are to provide the firm with reasonable assurance that:

- a) The firm and its personnel fulfil their responsibilities in accordance with professional standards and applicable legal and regulatory requirements, and conduct engagements in accordance with such standards and requirements; and
- b) Engagement reports issued by the firm or engagement partners are appropriate in the circumstances.

Integrated quality monitoring and compliance programmes enable KPMG UK to identify and respond to findings and quality deficiencies both in respect of individual engagements and the overall System of Quality Management.

Our quality control and risk management systems

Continued

If deficiencies are identified when KPMG UK performs its annual evaluation of the System of Quality Management, KPMG UK evaluates the severity and pervasiveness of the identified deficiencies by investigating the root causes, and by evaluating the effect of the identified deficiencies individually and in the aggregate, on the System of Quality Management, with consideration of remedial actions taken as of the date of the evaluation.

Based on the annual evaluation of the firm's System of Quality Management as of **30 September 2024**, the System of Quality Management provides the firm with reasonable assurance that the objectives of the System of Quality Management are being achieved.

QC 1000

The PCAOB's new quality control standard, QC 1000, will be applicable to registered public accounting firms from 15 December 2025 and sets out the requirements for the design, implementation and operation of a quality control system. It is similar to ISQM1 but has some differences and incremental requirements which will have implications for audit firms working with US-listed clients or those subject to US regulatory oversight. Work is ongoing to assess the potential impact of QC 1000 on the UK firm and to prepare for implementation.

Responsibility for quality and risk management

Quality control and risk management are the responsibility of all KPMG colleagues (partners, employees and contractors), whether they

are based in the UK or in one of our offshore locations. This responsibility includes the need to understand and adhere to policies and associated procedures in carrying out their day-to-day activities.

The Chief Risk Officer is responsible for setting overall professional risk management and monitoring quality control policies and compliance for KPMG in the UK.

The Chief Risk Officer has a direct reporting line to the Chief Executive and sits on the UK firm's Executive Committee, underlining the importance of the role. The Chief Risk Officer is supported directly by a team of partners and professionals, including a Risk Management Partner in each of the Capabilities.

The Ethics Partner is supported by teams led by the Ethics and Independence Partner and Head of Professional and Ethical Standards to help ensure that we apply robust and consistent ethics and independence policies, processes and tools.

The Head of Audit, Head of Tax and Legal, and Head of Advisory (covering Consulting and Deals) are accountable to the Chief Executive for the quality of service delivered in their respective capability areas. While many of our quality control processes are cross-Capability and apply equally to Tax and Advisory work, the primary focus of the Transparency Report requirements relates to Audit. Our [Global Quality Framework](#) provides more detail on the way it helps ensure the delivery of quality statutory audits and other assurance and related services engagements.

In the case of the Audit practice, the Head of Audit Quality chairs the Audit Quality Council which met on a monthly basis during the year. These meetings, together with the monthly Emerging Issues Meeting chaired by the Chief Auditor, addressed external regulatory matters (including progress on the Audit Quality Review and Quality Assurance Department reviews and actions to address their findings), our internal quality reviews, emerging audit quality issues and current matters from the central quality teams.

The Audit Leadership Team Risk & Quality sub-committee meets monthly to consider risk within the audited entity portfolio and to ensure there are sufficient and appropriate controls and mitigations in place to support engagement leaders in performing a quality audit and in managing risk. Other focus areas of the sub-committee include monitoring of regulatory matters, assessment of the risk watchlist and consideration of other emerging risk areas.

Our UK Audit practice is also a key contributor to our global thinking, with representatives on all major global audit quality and development councils and teams. We use these forums to understand how other member firms have tackled similar issues, share our experiences and facilitate common solutions.

At KPMG, audit quality is not just about reaching the right opinion, but how we reach that opinion. It is about the processes, thought and integrity behind the audit report or other assurance and related services engagements.

We view the outcome of a quality audit as the delivery of an appropriate and independent opinion that complies with auditing standards. This means, above all, being independent, objective and compliant with relevant legal and professional requirements.

Risk management principles

The following statements articulate the principles through which we manage the risk we take across the firm, ensuring we act responsibly, in the public interest and in the interest of the entities we audit, our clients, our people, our regulators, and the markets and communities we work in.

We will:

- Establish and maintain high standards in leadership, accountability, ethics and governance.
- Act as stewards for the KPMG brand and take proactive steps to ensure that we support one another, both within the UK and across our member firms, in doing so.
- Work with trusted partners and alliances, as well as engage in mergers and acquisitions to obtain capability, where it meets our trust and growth objectives.
- Carefully consider the clients, audited entities and engagements we choose to accept, within the context of our 'ACCEPT' framework (a set of client and engagement acceptance guidance embedding our values, risk appetite and ESG commitments).

Our quality control and risk management systems

Continued

- Comply with applicable laws, regulations and codes of conduct, including KPMG's global standards and policies and KPMG's tax principles.
- Manage actual and perceived conflicts of interest.
- Protect confidential information and ensure business service continuity.
- Live our values through high standards of behaviour, and promote a culture of trust, empowerment, accountability and expertise that supports them.
- Anticipate and respond to changes in the competitor landscape, macro-economy and clients' and audited entities' needs.
- Deliver high-quality services – through experienced and appropriately resourced teams, integrated solutions and the use of robust technology.
- Set financial targets that are consistent with achieving both the trust and growth elements of our strategy.
- Be courageous in undertaking work in the public interest and in support of our wider purpose.
- Be brave in working together, contributing to important issues in accordance with our values.
- Develop our diverse, talented and motivated people through inclusive leadership.

Risk management

It is the responsibility of our Board to identify, evaluate, manage and monitor the most significant risks that face our firm and could threaten the achievement of our strategic objectives, or our business model, future performance or solvency. The principal risks and uncertainties that the UK firm faces are set out in, and managed under, the firm's Enterprise-Wide Risk Management (ERM) Framework. This framework is used by the Board throughout the year to ensure the timely identification of new and emerging risks and the development of appropriate mitigations and action planning, in line with the firm's strategy.

The ERM framework is subject to a comprehensive review and refresh on an annual basis. This involves robust challenge of the firm's risk taxonomy, reflecting developments in the firm's risk landscape (current and longer term), changes made to KPMG International's Risk Framework during the year, and the results of a Board Risk Assessment.

Key developments during the prior year included:

- Incremental changes made to the enterprise risk reporting framework such as the ERM emerging risk radar and risk actions reporting.
- Enhancement of the emerging themes section to become part of the monthly watchlist for emerging risks that require separate focus.
- Further engagement with Level 1 risk owners to enhance communication/oversight of Level 2 risks and actions across the matrix of firm-wide, Markets and Capability ownership.
- Identification of any inconsistencies in the reporting of Level 2 risks by Capabilities and Markets.
- Partial rollout of the Level 3 risk taxonomy, development of system and framework training, and a full pilot conducted in People risk.
- Completion of a Board Risk Assessment to confirm the appropriateness of our principal risks and identify opportunities for further enhancement.
- Review and update of our risk matrix, risk appetite framework and supporting scenarios as part of a wider Enterprise-Wide Risk Management Framework refresh.
- Process of further identification, documentation and testing of key risk controls and metrics initiated.
- Enhancement of the risk assurance map to include L1-L3 risks, validated with function owners, and building of a dashboard accessible by the business.
- Further enhancement of the Governance, Risk and Compliance (GRC) tool.
- Further work conducted with the relevant ESG, Operations and Corporate Affairs teams to ensure that an appropriate level of information is captured in relation to climate risks to satisfy increasing external requirements such as TCFD.
- Further building of the maturity of the firm-wide risk management culture through increased engagement with capabilities and central support functions.

Our quality control and risk management systems

Continued

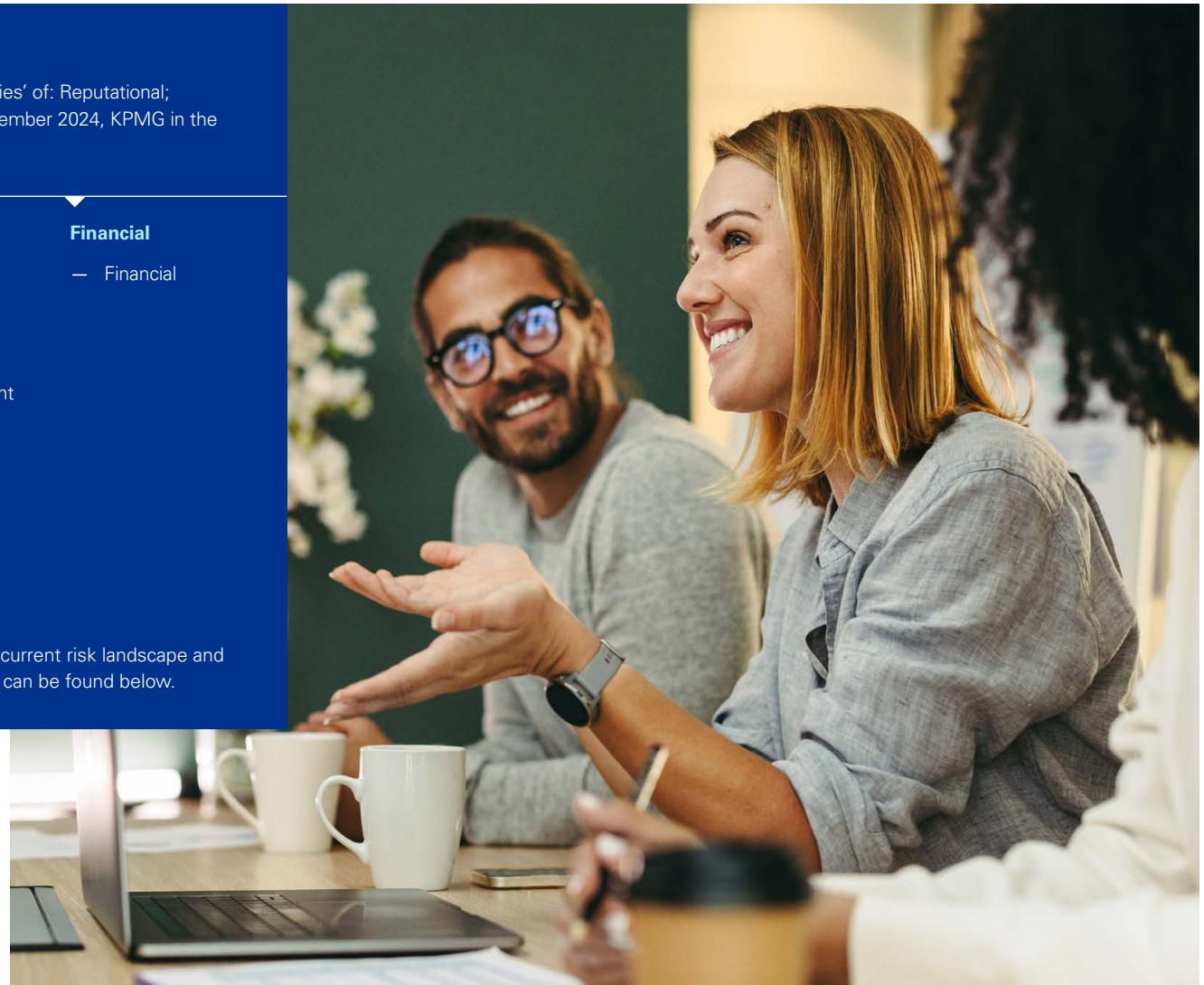
Principal risks

The firm's principal risks are set out within the four key risk 'families' of: Reputational; Strategic; Operational; and Financial. For the year ending 30 September 2024, KPMG in the UK identified 11 principal risks across these four areas:

Reputational	Strategic	Operational	Financial
– Trust	– Growth	– Execution – Quality	– Financial
– Regulation	– Clients and audited entities	– Execution – Delivery	
– Legal		– People, Talent and Culture	
		– Technology	
		– Business operations	

The risks are not shown in order of priority.

Our assessment of how these risks have moved over time, the current risk landscape and the mitigating actions we have put in place to address each risk can be found below.



Our quality control and risk management systems

Continued

Risk	Current and emerging risk landscape	Mitigations
Reputational risks		
1. Trust (Trend: Decreasing) 	<p>KPMG in the UK fails to maintain the trust of external stakeholders, due to a failure to embed trust into the firm's strategy, failure to define and communicate the standards of conduct expected by the firm, and failure to develop a culture aligned to the firm's core values, resulting in negative impact on the firm's reputation at local, national and international levels.</p>	<ul style="list-style-type: none"> — Continued regulator, public and colleague scrutiny of the firm in the context of both audit quality and the outcome of historical regulatory investigations. — Eroding of societal trust in professional services from negative media coverage of issues, litigation, or regulatory enforcement in our competitors. — A culture ambition centred on being values-led, operating to the highest ethical and quality standards. — Increasing importance of, and societal expectations surrounding, ESG, climate related risks and IDE. — A need to embed and sustain the improvement in our AQR results. — A tone at the top which emphasises quality, ethics and integrity, with Ethics Champions embedded in the business. — Embedding and continuous enhancement of Partner Balanced Scorecard to further strengthen the link between behaviours and rewards. This will also be incorporated into FY25 goals for all colleagues. — A culture ambition guided by Our Values, Our KPMG, Our Impact, a Culture Steering Committee and Conflicts of Interest Working Group. Measurement of progress using culture metrics (incl. regular colleague surveys) and oversight from a Culture Steering Committee. — Values Week and Values Immersion sessions designed to ensure all partners and colleagues take greater ownership of living our values. — Refreshed Conflicts of Interest policy supported by mandatory training to relevant teams and Conflicts of Interest Working Group. — Global ethical health survey to identify successes and areas for continued focus. — Implementation of a 'Trust index' to aid with monitoring of external reputation. — Milestone ethics training provided to all new promotes from manager upwards. — Values Leadership sessions delivered to partners. — A refreshed Code of Conduct (reviewed by the Institute of Business Ethics) and set of Values, on which all colleagues receive annual mandatory training. — Head of Conduct and Professional Standards and a Partner Conduct Verification Dashboard process to support performance management of partners, ensuring an appropriate link between conduct and partner remuneration. — Embedded whistleblowing processes and promotion of a Speak Up hotline overseen by a third-party ombudsman. — An Inclusion, Diversity and Equity Policy, employee networks which host a range of diversity focused learning events throughout the year and published diversity target zones, with regular progress reporting. Firm-wide training on inclusion, diversity and equity provided to all KPMG partners and employees. — A Global and UK Impact plan which sets out our environmental, social and governance (ESG) commitments — holding us accountable for progress towards a more sustainable future. — Defined and accountable Environment Steering Group at leadership level and Environment Working Group at operational level to enable progress and monitoring of our environmental and climate objectives as well as appropriate escalation and stakeholder buy-in. — Continued focus on increasing social mobility, with the firm now publishing its socio-economic background pay gaps and setting ambitious targets to increase the socio-economic diversity of its workforce. — Continued focus on the environment, with all UK offices certified to ISO 14001:2015 and ISO5001:2018. — A mandated Global Quality Framework, encompassing global methodologies, mandatory training (including KPMG Audit University), accreditation requirements (including for specialists) and audit quality review programmes (see further detail in Principal Risk 6).

Our quality control and risk management systems

Continued

Risk	Current and emerging risk landscape	Mitigations
Reputational risks (continued)		
2. Regulation (Trend: No change)	 FY22 FY23 FY24 <p>KPMG in the UK fails to meet the expectations of our regulators, due to poor relationships with regulators, regulatory non-compliance and/or lack of regulatory horizon scanning to prepare for incoming regulatory changes, resulting in regulatory sanctions and enforcement action.</p>	<ul style="list-style-type: none"> — New and changing regulatory requirements and expectations or changing interpretations (in respect to historical practices). — More proactive, intrusive and better-connected regulatory supervisors leading to increased monitoring and reporting to ensure the firm is compliant. — Continued enhanced supervisory approach as FRC transitions to ARGA. — Incoming and significant regulatory changes affecting multiple parts of the firm, including audit reform and the transition to ARGA. — FRC published updated principles and timeline for operational separation of the Audit practice. — Emerging regulation regarding innovations such as artificial intelligence (AI). — Greater public attention/interest and changing regulatory standards as to how we assess which clients we choose to do business with. <ul style="list-style-type: none"> — A dedicated Regulatory Affairs function, with constructive and proactive arrangements to meet our regulatory commitments introduced. — Regular engagement with regulators and relevant government bodies to understand and plan for the developing regulatory landscape. — Monitoring of regulatory compliance by relevant regulatory affairs specialists and the firm's Public Interest Committee. — Regulatory horizon scanning with regular reporting to relevant governance groups. — Money Laundering Risk Officer function to meet our obligations in relation to anti-money laundering and financial crime, and regular financial crime training provided on topics such as money laundering, bribery and corruption. — Maintenance of firm-wide and personal independence policies and systems (Sentinel™, KPMG Independence Compliance System, etc.) to ensure compliance, and additional approvals required for PIEs (Public Interest Entities) and OEPIs (Other Entity of Public Interest). — Regular updating of firm policies and procedures to ensure compliance by all our people, on all our clients, with all applicable regulations. — Annual mandatory firm and personal independence training and annual personal independence confirmation by all partners, colleagues and (where relevant) contractors. — Rolling programme of personal compliance audits and compliance monitoring of certain key areas by the firm-wide independence team. — ESG Corporate Reporting team, focused on ensuring timely adoption and compliance with developing ESG regulatory and reporting requirements. — Work is ongoing to assess the potential impact of the PACOB's new quality standard (QC 1000) being introduced in December 2025 on the UK firm and to prepare for implementation.

Our quality control and risk management systems

Continued

Risk	Current and emerging risk landscape	Mitigations
Reputational risks (continued)		
3. Legal (Trend: No change)	   FY22 FY23 FY24 <p>KPMG in the UK fails to comply with legal obligations, including contractual obligations with clients, audited entities, third parties and colleagues etc, due to a failure to identify and understand these obligations, or put in place appropriate controls and monitoring frameworks to ensure that these obligations are met, resulting in litigation, legal costs and reputational damage.</p> <p>The UK firm fails to appropriately monitor and mitigate the impact of reputational damage arising from actions taken by other KPMG member firms.</p>	<ul style="list-style-type: none"> — Increasing complexity of contracting environment, in particular in relation to long-term nature of large advisory engagements and increasingly complex legal and regulatory frameworks (e.g., in relation to liability caps and information security and data requirements). — Increased complexity of global sanctions framework post Russia-Ukraine conflict. — Sanctions environment has continued to evolve due to the war in Ukraine. — Risk of damage to the UK firm's reputation through negative media coverage of issues, litigation, or regulatory enforcement within the KPMG Global network of firms. <ul style="list-style-type: none"> — In-house Office of General Counsel team to assist the business with contracting and compliance with regulation, including specialists in regulation, data privacy and employment law. — Close liaison with KPMG Global through International Office of General Counsel and liaison with other network firms' Offices of General Counsel. — Active participation in Global Governance and Committees to oversee network controls and potential reputational and other risks. — Legal input to both Deal Boards, Client and Engagement Acceptance and Continuance Committee and Conflicts Working Group, to ensure that the appropriate approvals are in place and legal/contracting risks are considered before pursuing new opportunities and agreeing scope and terms of engagement deliverables. — Comprehensive client and engagement acceptance procedures, including in relation to contracting with all stakeholders and recipients of our services/deliverables. — Framework of policies, underpinned by regular training, in relation to compliance with external regulation and legal requirements (including in relation to financial crime and fraud management). — Engagement Quality Control Reviewers (EQCRs) and other 'first line' quality control processes, including in relation to legal and contracting matters. — Annual 'second line' compliance processes (including QPR and Global KQCE) in relation to contracting and legal compliance. — Specific policies, procedures and controls related to complying with sanctions. — Formation of the Modern Slavery Working Group, which has a broad membership and supports the firm to implement and enforce effective systems and controls to help identify, assess, address, and prevent modern slavery.

Our quality control and risk management systems

Continued

Risk	Current and emerging risk landscape	Mitigations
Strategic risks		
4. Growth	<p>Continued levels of market uncertainty in relation to the external environment, including:</p> <ul style="list-style-type: none"> — The impacts of ongoing global conflicts; — The wider political landscape and growing economic uncertainty; — UK economic performance. While the worries about a deep recession have largely gone away, the prospects of high interest rates, continued uncertainty, and low productivity are set to provide headwinds to growth in the near term; — Impact of operational separation of audit on our growth strategy; — Increasing importance of, and stakeholders' expectations surrounding, ESG, climate and decarbonisation; — Significant changes to the economy and client sectors resulting from a push towards a decarbonised economy; — Impact of AI proliferation on the firm's ability to capitalise on market opportunities, meet client demand and stay competitive as AI advances. 	<ul style="list-style-type: none"> — Board approved three-year planning exercise with yearly refreshes and regular review. — Our Board and Executive Committee continuously monitor the performance of our firm and appropriate management action is taken when necessary to adjust to market conditions. — Defined strategies (at firm and Capability/Market level) approved by leadership with Board input and oversight and aligned with Global strategy and Our Impact plan (see below). — Executive Committee sponsorship of strategic growth initiatives with an investment allocation and governance process to prioritise and monitor investment. — Enterprise-Wide Risk Management Framework with matrix reporting across Capability, Market and firm-wide risks to support Board and Committee governance and Executive decision-making. Capability, Market and Regional risk officers in place to support second line management/oversight of risk policies, practices and decision making. — Separate governance for Audit, including Audit Board, with impact of operational separation on delivery of the firm's strategy reflected in both Audit and firm-wide business planning. — A Global and UK Impact plan which set out our own environmental, social and governance (ESG) commitments – holding us accountable for progress towards a more sustainable future. — Globally aligned ESG solutions to address current market demand and needs. — Both physical and transitional climate-related risks and opportunities identified through qualitative and quantitative scenario analysis, informing both strategic and financial decision-making and the firm's Enterprise-Wide Risk Management Framework. — Alongside our AI strategy, we are devising a new ethical review stage in our data/IT governance model to mitigate against the risk of unethical use of AI (for internal use of AI and for use with clients and audited entities).

Our quality control and risk management systems

Continued

Risk	Current and emerging risk landscape	Mitigations
Strategic risks (continued)		
5. Clients and audited entities (Trend: No change) 	<p>KPMG in the UK fails to work with the right clients and audited entities, maintain a balanced portfolio across sectors and industries, optimise its use of strategic alliances and build both a unique and innovative brand proposition and a holistic go-to-market strategy, resulting in declining market share or over-concentration in specific sectors and a failure to achieve its strategy and ESG commitments.</p>	<ul style="list-style-type: none"> — New and changing business models and service needs at scale and speed from clients/audited entities arising from a changing market and their responses to the current external and economic environment, increasing digitalisation and growth in importance of the ESG agenda. — Changes in client/audited entity portfolio mix and/or focus that could result in over-concentration in sectors/industries/clients. — More complex decision-making process around accepting clients/audited entities because of the current external and economic environment and potential impacts on perceived public interest/reputational risk. — Impact of the firm's ESG strategy on the acceptance and delivery of services to clients and audited entities. <ul style="list-style-type: none"> — Comprehensive acceptance procedures undertaken before engaging with clients and audited entities for the provision of services, including KYC checks and global conflict checking to support the management of independence when working with audited entities or potential audit targets. — Client and Engagement Acceptance and Continuance Committee consideration for higher risk clients and engagements to ensure that risks are considered, and appropriate internal approvals obtained, before pursuing new opportunities. — Conflicts Working Group (a sub-committee of the Risk Executive) and mandatory annual firm-wide Conflicts of Interest training to support adherence to conflicts of interest policy. — Continued challenge of audited entities where improvements to systems, controls and governance are required and careful management of transition where we decide to resign from audited entities, with reference to our public interest responsibilities. — ACCEPT framework to further support colleagues in making decisions about who we work with and what work we do in line with Our Impact plan, supported by firm-wide and engagement leader training and communication. — Monitoring period of audit tenure for audited UK PIEs in order to comply with mandatory tendering and rotation requirements. — Extensive independence policies, guidance and processes supported by annual mandatory firm-wide training on personal and firm independence and regular compliance monitoring (see further details in Principal Risk 2). — Regular portfolio strategy and account planning, with Executive Committee oversight of plans for major accounts. — Investment programme to oversee the development of new service lines and propositions, in line with Our Impact plan and reflecting market and client need developments. — Regular review of Client Insights programme feedback, including to inform development of future service propositions. — Investment in technology and specialists e.g., climate, IT audit and data scientists to ensure our audit approach is responsive to changes in the external environment and new markets.

Our quality control and risk management systems

Continued

Risk	Current and emerging risk landscape	Mitigations
Operational risks		
6. Execution – Quality (Trend: Decreasing)	 FY22 FY23 FY24 <p>KPMG in the UK fails to meet the expectations of clients, audited entities, regulators and other interested parties in relation to the quality of work delivered.</p>	<ul style="list-style-type: none"> — Sustained public and regulatory scrutiny of the firm's ability, independence and qualification to deliver engagements to a high standard. — Impact of changing ways of working on the ability to deliver quality services. — Pressure on audit profession potentially leading to fewer people joining the profession, and experienced professionals leaving, which may negatively impact audit quality. — Increased risk of failure of clients/audited entities due to challenging economic environment. — Increasing complexity of products and services, as well as contracting/commercials, or new and innovative service lines (where expertise is limited), posing challenges to the quality of work delivered. <ul style="list-style-type: none"> — System of Quality Management (SoQM) to drive the assessment of risks and controls and to ensure audit quality. — Continued close liaison with KPMG International's SoQM team to support the continuous improvement of the SoQM and to support in preparations for the PCAOB's QC1000 standard. — Continued investment in our Single Quality Plan which prioritises actions with the biggest impact on audit quality supported by the development and implementation of KPMG Clara Audit workflows. — Mandated Global Quality Framework, encompassing global methodologies, mandatory training (including KPMG Audit University), accreditation requirements (including for specialists) and audit quality review programmes. — Mandated engagement quality controls including the use of standardised methodologies and tools, accreditation requirements, targeted involvement of Engagement Quality Control reviewers, Accounting and Auditing specialists, Risk Panels and Deal Boards. Enhanced processes for complex, longer-term engagements. — Audit Regulatory Compliance function, with a remit to deliver a dedicated audit compliance programme, testing outcomes to provide assurance that the processes, procedures and controls in place to meet regulatory requirements are operating effectively. — Regular review of Client Insights programme and requests for feedback in relation to quality of delivery. — Engagement watchlists maintained at Capability and Risk Executive Committee level, with escalation of issues as appropriate. — Firm-wide quality compliance programmes including QPR and Root Cause Analysis programme. Established quality function in Consulting, with appointed quality leads for each performance group. — Rigorous recruitment, training and staff development procedures.

Our quality control and risk management systems

Continued

Risk	Current and emerging risk landscape	Mitigations
Operational risks (continued)		
7. Execution – Delivery (Trend: No change)	 FY22 FY23 FY24 <p>KPMG in the UK experiences failures in its delivery of services to clients and audited entities due to taking on inappropriate clients or engagements, ineffective engagement setup, poorly managed projects, contracting and financials, lack of adequate resourcing or identification and management of third parties in its supply chain, resulting in preventable losses and missed opportunities.</p>	<ul style="list-style-type: none"> — Increasingly competitive market for recruitment of talent. — Increased reliance on reliable and appropriate technology and connectivity due to hybrid working. — Increasing complexity of the work we are performing, the client/audited entity situations we are supporting. — Increased complexity of commercial models and contracting processes, in particular in relation to multi-year framework services and work delivered for the public sector. — Increased use of technology to deliver services or licensing of technology to clients. — Greater collaboration with third parties/alliance partners in engagement delivery, increasing the challenges around quality, independence, security, and contracting. <ul style="list-style-type: none"> — Global Quality & Risk Management Manual supplemented by UK requirements set out in Capability-specific risk management manuals, policies and guidance. — Comprehensive client and engagement acceptance procedures, including ACCEPT framework for decision-making, Client and Engagement Acceptance and Continuance Committee and Conflicts Working Group as described under Principal Risk 5: Clients and Audited Entities. — Engagement watchlists maintained at Capability and Risk Executive Committee level, with escalation of issues as appropriate. — Increased monitoring (including in-flight reviews) and reporting of higher risk engagements. — The use of ProFinda, which provides a single inventory of all colleagues' skills and experience so we can be more rigorous when resourcing projects, matching skills and resources effectively. — Template engagement letters and Office of General Counsel/risk review requirements for contracting. — Inter-firm contracting protocols when working with other KPMG International member firms. — Input from Commercial teams on pricing and terms, as well as Deal Boards for non-audit engagements, and controls in place when working with sub-contractors and alliance partners. — Significant investment in our ESG propositions and client teams to support evolving client requirements. — Significant investment in our colleague proposition, Our KPMG, and recruitment, performance management and wellbeing support, to ensure we can continue to attract and retain the talent we need to meet demand now and in the future (see further detail in Principal Risk 8). — Contractors and associates receive training on Our Code and Our Values on joining and annually. — Compliance programmes including Global GCR, QPR and Compliance Assurance Programme, with appropriate root cause analysis undertaken and action plans implemented and monitored.

Our quality control and risk management systems

Continued

Risk	Current and emerging risk landscape	Mitigations
Operational risks (continued)		
8. People, Talent and Culture (Trend: No change)	 FY22 FY23 FY24 <p>KPMG in the UK fails to appropriately attract and recruit, engage, develop, retain and reward talent at all levels of seniority, resulting in a lack of expertise, capability and capacity (onshore and offshore) to meet the medium- and long-term demands of the business, loss of top talent and gaps in key leadership roles and succession plans. In addition, the UK firm fails to define and develop a culture in alignment with its core values and strategy.</p>	<ul style="list-style-type: none"> — While attrition remains low, reflective of the current market conditions, an emerging risk exists that once market conditions improve, this trend would rapidly reverse impacting workforce demand. — Management of, and ability to meet, expectations in relation to the medium- to long- term, changing ways of working, including hybrid working. — Evolving legislative developments in relation to the government's worker rights agenda, and immigration requirements which presents complexities in attracting and retaining skilled foreign talent. — The current economic environment and its impact on firm performance, continue to place pressure on employee morale and wellbeing. — Continued focus on Inclusion, Diversity and Equity (IDE) and ability to meet IDE improvement objectives (including social mobility). — Maintaining our Culture Ambition and the firm's reputation as an ethical, responsible and inclusive business remains central to our priorities. — Significant investment in colleague reward, and an attractive employee value proposition, Our KPMG, against results of annual salary benchmarking. — Range of projects ongoing to ensure we are able to recruit and retain the skills we need, including in relation to workforce planning strategy and addressing complexities in immigration. — Defined performance management cycle and processes which include goal setting, feedback and performance appraisal. Regular training delivered to Performance Managers and a bi-annual 360 feedback programme for leaders across the firm (next cycle due in FY2025). — Continued focus on learning, which is central to the development of our people, including our significant investment in Space to Learn, our digital learning approach. — Inclusion, Diversity and Equity Policy and firm-wide mandatory training for all KPMG partners and employees. Several dedicated programmes including Elevate, Inspire, Black Heritage Allyship Programme and Cross Company Allyship Programme. Ambitious leadership 2030 targets across six historically under-represented groups with supporting firm-wide and local action plans in place. — A focus on social mobility, for example through our Social Mobility Network – UpBringing – which empowers colleagues from lower socio-economic backgrounds to achieve tangible personal and professional development goals, raise their profile within the firm and in the marketplace and make an impact across our communities. Our Opening Doors to Opportunities aims to empower the next generation to thrive by inviting schools into our offices across the UK, as part of a new commitment we're making to give one million young people the opportunity to develop their skills by 2030. — Comprehensive wellbeing offering including mental wellbeing, bereavement support, a Domestic Violence and Abuse Policy, an employee assistance programme, remote GP private medical insurance (for eligible colleagues), access to counselling and menopause provision. Continuing our 5-year strategic partnership with the University of Cambridge which focuses on the future of work, to see what really works to create a firm that truly has mental wellbeing at its heart. — Employee networks to support and engage with the various communities across the firm and an Employee Business Forum, which represents views within the firm to leadership. Our "Collective Voice" group ensures regular dialogue between a broader colleague representative group and the ExCo (via the Chief People Officer). — Regular feedback on People strategy and practices sought through annual Global People Survey and mid-year Pulse Survey, with action plans in place where required. — A Culture Ambition guided by Our Values, Our Impact Plan and our Code of Conduct. Firm-wide Culture Steering Committee responsible for approving and steering the firm-wide culture strategy, plan and priorities, focused on building trust. — Monitoring and review of key performance indicators by the Board, People sub-committee, and Executive Committee via the Culture Dashboard that includes staff survey results and people-related data points. — Succession plans in place for members of Executive leadership. Board succession monitored and managed through Nominations Committee.

Our quality control and risk management systems

Continued

Risk	Current and emerging risk landscape	Mitigations
Operational risks (continued)		
9. Technology (Trend: Increasing)	   FY22 FY23 FY24 <p>KPMG in the UK fails to provide the technology solutions required by the business to support its operations, reputation and growth, or to adequately protect existing technology solutions, resulting in a breach of the confidentiality, integrity and availability of these solutions. This may lead to an inability to provide key services to internal and external stakeholders, and reputational or financial loss.</p>	<ul style="list-style-type: none"> — Increased risk of cyber-attacks. — Increasing complexity of technology solutions provided to clients. — Increased importance of developing and investing in IT infrastructure for the future to support changing business needs. — Continued reliance on technology and increased complexity of managing information risk in a hybrid working environment. — Increasing technology and security requirements in contractual arrangements with clients and audited entities. — Increased focus on the ethical use of data, AI and other technology. — Increased public, client/audit entity and regulatory scrutiny in respect of data/confidentiality because of high-profile external events. — Importance of ensuring that IT infrastructure aligns with our environmental objectives and that end-of-life IT assets follow a circular lifecycle. <ul style="list-style-type: none"> — Governance/approval requirements in place for technology investment and changes, including: Technology Assurance Group, DMTAP (Demand Management and Technology Assurance Process) and CTO Forum – see Principal Risk 4 (Growth) in relation to governance and approvals relating to AI developments. — Data Protection Officer and Chief Information Security Officer, each with specialist teams. — Range of projects ongoing to improve technology inventory and protections (Backup & Restore, Cloud Migration, Smart Networks, etc). — Ongoing programme of training and awareness of the end-to-end Technology Assurance process and refreshed Technology Assurance Policy. — Multi-year Information Security Transformation Programme, introducing and embedding a new set of information security capabilities and services that can provide a more effective response to evolving cyber security threats and changes in regulations. — Three lines of defence model for management of information risk, including a central Information Assurance team and an Information Governance Oversight Committee. — Ongoing mandatory training, covering information security, data protection and information management. — Additional training/learning support on confidentiality covered as a separate mandatory training module within our November 2023 Building Trust release. — Widespread use of Information Protection Plans in engagements and introduction of Data Champions, and continued progress in our Data Remediation Programme. — ISO 27001, Cyber Essentials/+, SOC2 (eAudit) certification and regular external and internal audits to identify and address control deficiencies. — Insider policy and risk assessment reviewed annually. — Programme of ongoing phishing resilience testing, and security awareness focused on a range of themes including passwords, patching, phishing and social engineering. — Rolling compliance programme (as part of second line assurance activities) in relation to Information Protection Controls and Policy Compliance. — Enterprise focus on Operational Resilience, including the identification of a Minimum Viable Firm (MVF) to provide greater focus for recovery planning and resourcing. — Review and monitoring of the procurement and contracting procedures with suppliers of IT assets to ensure these meet our environmental objectives.

Our quality control and risk management systems

Continued

Risk	Current and emerging risk landscape	Mitigations
Operational risks (continued)		
10. Business operations (Trend: No change)	 FY22 FY23 FY24 <p>KPMG in the UK fails to define, implement and monitor the effectiveness of its policy, procedure and control framework, including in relation to its suppliers, and to ensure continuity in business operations. In addition, the UK firm fails to manage change effectively, resulting in control failure, and disruption to business operations and the services provided to clients and audited entities.</p>	<ul style="list-style-type: none"> — Importance of maintaining robust business processes and controls and adapting where appropriate so that they remain fit for purpose in the current environment. — Continuous improvement as regards ISQM1 by refining and further embedding this into “business as usual” within our System of Quality Management. — Impact of rising global costs and increasing global political conflicts on the ability of third-party suppliers to deliver goods and services to KPMG. — Importance of ensuring that business processes and controls align to the firm’s ESG strategy, as well as the expectations of external stakeholders. — Ability to successfully manage multiple and significant transformation programmes, with appropriate governance and investment controls. — Importance of developing appropriate adaptation plans to mitigate climate-related risks, including physical disruptions to assets as well as financial implications associated with a decarbonising economy. <ul style="list-style-type: none"> — Three lines of defence model, including internal audit, to review the design and operating effectiveness of key controls. — Enterprise-Wide Risk Management Framework with matrix reporting across Capability, Market and firm-wide risks to support Board and Committee governance and Executive decision-making. Capability, Market and Regional risk officers in place to support second line management/oversight of risk policies, practices and decision-making. — Regular updates to the Board on operational performance based on extensive MI; three-year business planning with yearly refreshes and regular review by Operations Executive and COOs. Inclusion of climate considerations and potential financial implications from scenario analysis in the MI. — Operations Executive oversight of both internal and external operational quality reviews. — Operations Executive oversight role in reviewing KPIs, performance and risk at its regular meetings which is a core mechanism for overall performance and operational risk management. — Defined business continuity and crisis management plans, and controls in place to support IT, Third Party, People, Facilities & Data disaster recovery. — Specialist Operational Resilience team which follows business continuity best practice guidelines and complies with ISO 22301 (as confirmed by independent internal audit). — EPMO (Enterprise Project Management Office) to manage investment and transformational change programmes. — Supplier management centre of excellence and Supplier Code of Conduct in place and being incorporated into new contracts. — Third party risk assessment for new subcontractors supporting the delivery of client engagements. Risks are reassessed on a regular basis. — Policies on Procurement, Subcontractors, Alliances and Contingent Workers. — New Enterprise Transformation SteerCo and governance and oversight over change programmes with risk representation. — Continued focus on embedding ISQM1, in close coordination with KPMG International and establishing the UK’s System of Quality of Management (SoQM) under business as usual. — Compliance programmes including Global GCR and Global KQCE, with appropriate root cause analysis undertaken and action plans implemented and monitored. — Further work with the relevant ESG, Operations and Corporate Affairs teams to ensure that an appropriate level of information is captured in relation to climate risks to satisfy increasing external requirements.

Our quality control and risk management systems

Continued

Risk	Current and emerging risk landscape	Mitigations
Financial risks		
11. Financial management (Trend: Increasing)	 FY22 FY23 FY24 <p>The UK firm fails to execute against financial targets or manage medium- to long-term financial position and performance, for example due to delivering unprofitable services, poor investment decisions, and failure to ensure a resilient balance sheet, resulting in poor business performance, inability to achieve growth and negative impacts to the financial health of the firm.</p>	<ul style="list-style-type: none"> — Need to continually invest in our services, people and processes to ensure that the business model is fit for the future. — Current challenging external economic environment with impact on demand for KPMG services, increasing cost base and ability to collect payment for the services delivered to clients and audited entities. — Inherent uncertainty with respect to any outstanding regulatory investigations and civil litigation matters although this is reducing as we resolve our legacy regulatory cases. — Increasing and more complex client requirements and expectations in relation to our firm's ESG strategy and performance. — Budgets which are subject to various levels of approval, through a thorough budgeting process, with appropriate sensitivity analysis and planning based on emerging economic landscape. — Board role in budget and performance oversight and Executive Committee budgetary challenge. — Monthly financial analysis at firm and functional level, including regular refresh of downside scenario planning based on early warning indicators. — Capability FDs and Chief Accounting Officer bring rigour and discipline to accounting treatments. — Pricing panels, pipeline monitoring, WIP management processes and regular tracking of overdue invoices. Tools available across the firm. — Approval and monitoring controls over investments, investment decisions and capital retention strategy. — Closely controlled procurement process and approvals, via technology platform. — Finance policies, including Spend Control Policy, Timesheet Policy and Expenses Policy. — Anti-Fraud Policy, and annual training on fraud for all colleagues. Fraud risk assessment conducted annually by the MLRO. — Professional Indemnity Insurance in place. — Regular review of Our Impact Plan and strategy in line with client requirements and expectations.

Our quality control and risk management systems

Continued

Audit regulatory compliance

Our partner-led Audit Regulatory Compliance (ARC) function, established during FY21, is the main point of contact with the firm's primary regulator, the FRC, maintaining an overview of all interactions with Audit Market Supervision and Audit Firm-wide Supervision and ensuring that all commitments, requirements and actions are fulfilled.

ARC incorporates a Compliance Monitoring function whose purpose is to deliver a dedicated compliance programme, providing independent assurance that the processes, procedures and controls in place to meet audit regulatory requirements are operating effectively. A monitoring plan is developed and presented for approval to the Audit Executive at the start of the year and updated where necessary during the year to ensure it remains focused on appropriate risk areas.

Internal audit

Internal Audit, which is led by a dedicated Head of Internal Audit, provides independent and objective assurance on the adequacy and effectiveness of our governance, risk management and internal control processes. The Internal Audit plan was approved at the start of the year and was updated during it to ensure that it remained appropriate and reflected changes to business risks including the heightened risks presented by the current external environment. The plan is devised by understanding the risk profile of the firm (whether strategic, operational or in relation to change risks), considering other risk management, compliance and assurance activities, and, based on this, agreeing what internal audit work is required.

In reviewing and approving the internal audit plan, the firm's Audit Committee ensured a balance between coverage of the highest priority risks and maintaining appropriate coverage of core business processes. As stated earlier, the joint Audit and Risk Committee that will be established after 1 October 2024 will fulfil this role going forward.



Maintaining an objective and independent mindset

We have adopted KPMG Global Independence Policies which are derived from the International Ethics Standards Board for Accountants' Code of Ethics for Professional Accountants (the IESBA Code) and incorporate other applicable regulatory standards. For KPMG in the UK, we supplement these policies with other processes to ensure compliance with the FRC's 2019 Ethical Standard (FRC's 2019 ES).

These policies and processes cover areas such as firm independence, personal independence, firm financial relationships, post-employment relationships, partner rotation and approval of audit and non-audit services. In the UK, the Ethics Partner is supported by a core team to help ensure that we apply robust and consistent independence policies, processes and tools. Ethics and independence policies are set out in our intranet-hosted Quality & Risk Management Manual as well as various guidance materials on the internal UK portal and reinforced through training.

Failure to comply with the firm's independence policies, whether identified in the rolling compliance review, self-declared, or otherwise, is, in the case of engagement leaders and managers, reflected in their individual ethics and compliance metrics. The Independence Working Group oversees policies and procedures in relation to ethical matters and breaches of the requirements of the FRC's 2019 ES.

Personal independence

KPMG International policy extends the IESBA Code restrictions on ownership of audited entity securities to every member firm partner in respect of any audited entity of any member firm. KPMG in the UK has a policy whereby all staff who are involved in delivering professional services engagements are also prohibited from holding securities in companies audited by KPMG.

Our professionals are responsible for making appropriate inquiries to ensure that they do not have any personal financial, business or family interests that are restricted for independence purposes. We also use a web-based independence compliance tracking system to assist our professionals in their compliance with personal independence investment policies.

We monitor partner and employee compliance with these requirements through a programme of audits on a sample of professionals. In the year ended 30 September 2024, 8% (2023: 7%) of our people were subject to a compliance audit. This included approximately 15% of our partners.

In accordance with KPMG International policy, all partners and partner equivalents are compliance audited in a five-year period, and those partners in a Chain of Command role are audited every three years.

In addition, all direct-entry partners are subject to a compliance audit as a condition of their admission to the partnership and are subject to a further audit after 12 months in the firm.

The policy we apply to members of the audit team who are recruited by entities we audit goes beyond the requirements of the FRC's 2019 ES. It requires any member of an audit team to inform the Ethics and Independence team of any situation involving their potential employment with an entity where they are part of the audit engagement team. We also prohibit all partners in the firm from accepting a director or key management position role at an entity that we audit within two years of retiring from the partnership.

Business relationships/suppliers

We have policies and procedures in place to ensure that business relationships are maintained in accordance with the FRC's 2019 ES, the IESBA Code and, where applicable, the rules of the SEC Consultation with our ethics and independence professionals is required for proposed business relationships with an entity we audit, or its management, provided certain conditions are met. This is to ensure compliance with the relevant independence regulations.

Independence training and confirmations

We provide all relevant colleagues (including all partners and staff who are involved in delivering professional services engagements) with independence training appropriate to their grade and business area and provide all new colleagues with relevant training when they join the firm.

All colleagues are required to sign an independence confirmation upon joining the firm. Thereafter, all personnel confirm annually they have remained in compliance with applicable ethics and independence policies throughout the period. Partners and partner equivalents make an additional confirmation at mid-year in respect of their personal investment compliance.

Audit engagement leader rotation

All audit engagement leaders are subject to periodic rotation of their responsibilities for entities we audit under applicable laws and regulations and independence rules, which limit the number of years that engagement leaders may provide audit services to an audited entity. KPMG rotation policies comply with the requirements of the FRC's 2019 ES (and, where applicable for certain engagements, the rules of the SEC). For example, under the FRC's 2019 ES the audit engagement leader for a UK public interest entity cannot serve in that role for more than five years and once they have rotated off the audit cannot participate in the audit again for a further five years.

We monitor the rotation of audit engagement leaders and any other key roles where there is a rotation requirement, including the Engagement Quality Control Reviewer (EQCR), and have transition plans to enable us to allocate partners with the necessary competence and capability to deliver a consistent quality of service to audited entities.

Maintaining an objective and independent mindset

Continued

Firm rotation

PIEs, as defined in the FRC's 2019 ES, are required to rotate their firm of auditors. Mandatory Firm Rotation (MFR) rules in the UK require that all PIEs must tender their audit contract at least every 10 years and rotate their auditor at least every 20 years. We have processes in place to track and manage MFR.

Non-audit services

We have policies regarding the scope of services that can be provided to entities for whom we are auditors which are consistent with the FRC's 2019 ES and the IESBA Code, and, where applicable, the rules of the SEC and PCAOB. KPMG policies require the audit engagement leader to evaluate the threats arising from the provision of non-audit services and the safeguards available to address those threats, including whether an objective, reasonable and informed third party would consider it appropriate for the auditor to provide the non-audit service.

Every engagement intended to be entered into by a KPMG member firm is required to be included in our **Sentinel™** tool, prior to starting work, enabling group lead audit engagement partners to review and approve, or deny, any proposed service for those entities worldwide. To maintain auditor independence, no individual with the ability to influence the conduct and outcome of an audit can be rewarded for selling non-audit services to entities we audit.

Fee dependency

KPMG firms have agreed to consult with their Regional Risk Management Partner where total fees from an audited entity are expected to exceed 10% of the annual fee income of the KPMG firm for two consecutive years. If the total fees from a public interest entity audited entity and its related entities were to represent more than 15% of the total fees received by a particular KPMG firm in a single year, this would be disclosed to those charged with governance at the audited entity. Where the total fees continued exceeding 15% for two consecutive years, we would engage a partner from another KPMG firm as the EQCR and the fee dependency would be publicly disclosed.

Conflicts of interest

To perform a professional services engagement, both KPMG and all members of the engagement team need to be objective in both fact and appearance. This means that before accepting any engagement it is necessary to identify if there are any conflicts of interest (or any other threats to objectivity) associated with taking on that work and to determine if these can be safeguarded to an acceptable level such that the conflict can be managed, and the engagement accepted. Our Conflicts of Interest Policy and procedures are designed to ensure that we meet these requirements.

Our Conflicts of Interest Policy sets out how to identify, assess and safeguard threats to objectivity, as well as setting out situations where conflicts would always be unmanageable. The policy also details the escalation requirements for specific conflict situations and what the special considerations are with respect to conflicts involving audited entities. Where a conflict of interest involves an audited entity, our policy requires consideration of how accepting that service might give rise to a condition or relationship (or conflict) that would (or would be perceived to) impact on KPMG's independence as auditors. The overarching principle is that we would not accept an engagement where it was clear at acceptance that it would involve the client or KPMG (on behalf of or supporting the client) taking an adversarial position against a statutory audited entity of KPMG on a matter that was material to its financial statements or involved challenging the accounting for any matters that were material to the audited financial statements.

Sentinel™ is used to identify and manage potential conflicts of interest within and across member firms. Any potential conflict of interest issues identified are resolved in consultation with other parties as applicable and the outcome is documented. Where conflicts of interest are identified, it is necessary to consider how they can be safeguarded - for example, through establishing formal dividers between engagement teams serving different entities and/or seeking consent. If a potential conflict issue cannot be safeguarded, the engagement is declined or terminated.

More complex conflicts require consultation and escalation, and the most complex conflicts are considered by our firm's Conflicts Working Group, which is chaired by our Ethics Partner and is one of the enhancements to our processes that we introduced last year.

All partners and client-facing personnel received mandatory training during the year on the process for identifying, assessing, documenting and safeguarding conflicts of interest, along with the need to be alert throughout the engagement for new conflicts or threats to objectivity.

Compliance with laws and regulations

We provide training on compliance with laws (including those relating to anti-bribery and corruption, money laundering and sanctions), regulations and professional standards (including conflicts of interest) and our [Code of Conduct](#) to all partners and employees on joining the firm and annually thereafter. Other topics, including Fraud Risk Awareness, Corporate Criminal Offences and Modern Slavery are run periodically for all partners and employees.

All partners and employees are asked to confirm annually, in our Ethics and Independence Confirmation, that: "I understand that at KPMG we are all committed to behaving ethically and to demonstrate that we are trustworthy which I do by proactively living Our Values – and adhering to Our Code which includes upholding our firm's commitments to comply with our professional, ethical and quality standards at all times."

Statement by the Board on the effectiveness of internal controls

Internal controls statement

The Board is responsible for the firm's system of internal controls and for reviewing its effectiveness. Such a system manages, rather than eliminates, the risk of failure to achieve business objectives and can only provide reasonable and not absolute assurance against material misstatement, loss, or non-compliance with relevant regulatory or legislative requirements. The day-to-day responsibility for managing our operations rests with the Executive Committee (the firm's new Management Committee body will have responsibility for this from 1 October 2024).

In accordance with the Audit Firm Governance Code, the Board has reviewed the effectiveness of its systems of internal control. In reviewing these systems and their effectiveness, it has adopted the approach prescribed within the UK Corporate Governance Code.

This monitoring covers risk management systems and all key controls, including those relating to finance, operations and compliance. It is based principally on the consideration and review of reports from relevant Executive Members and reports from the Audit, Risk and People Committees as well as from the Executive Committee and Audit Board to consider whether significant risks are identified, evaluated, managed and controlled. From 1 October 2024, the Board will continue to discharge this oversight responsibility by receiving reports from the Management Committee and Audit and Risk Committee.

During 2024, the Board has:

- Received regular reports from members of the Executive Committee, including:
 - Chief Operating and Financial Officer on the firm's financial performance and on any emerging financial and operational risks and issues;
 - Head of Audit on the Single Quality Plan relating to audit quality; and
 - Chief Risk Officer who provides updates on emerging regulatory, risk and compliance matters and quarterly reporting under the firm's Enterprise-Wide Risk Management Framework.
- Received regular updates with regards to ethics and independence matters directly from the Ethics and Independence Partner, Head of Conduct and Professional Standards, and Ethics Partner, including updates on the firm's Ethical Health Plan and matters identified through the Speak Up hotline.
- Received regular reports from the Chair of the Risk Committee including:
 - Regulatory, risk and compliance matters; and
 - External regulatory inspections and reviews.
- Received regular reports from the Chair of the Audit Committee including:
 - Results of the evaluation of the SoQM as at 30 September 2024 (refer to our Statement on the effectiveness of the System of Quality Management [here](#)) and the design and status of the remediation plans relating to identified deficiencies;
 - The findings and associated action plans arising from testing of our compliance with our Global Quality and Risk Management Manual policies;
 - Results of internal audit work commissioned as part of the approved annual internal audit plan, and the progression on resolving weaknesses identified; and
 - Progress reports from the group's external auditors, Grant Thornton UK LLP, on its annual audit and discussions with them on any control issues they have identified.
- Considered reports to the Board made by the Risk, Audit, Nominations and People Committees and the Audit Board on how each has discharged its duties in the year.

Conclusions

The Board of KPMG LLP confirms that internal reviews of the effectiveness of internal controls and of independence practices within our firm have been undertaken. Our compliance and internal audit programmes identify deficiencies and opportunities for improvement, and, in such instances, remediation activities are agreed with subsequent follow-up to assess the extent to which the matters identified have been addressed satisfactorily.

However, matters arising from these activities are not considered, either individually or in aggregate, to undermine the overall system of internal control in place.

Compliance with requirements of Audit Firm Governance Code

The Board has reviewed the provisions of the 2022 Audit Firm Governance Code and confirms that the firm complied with these provisions throughout the year ended 30 September 2024.

05

Meeting our reporting requirements



Audit Firm Governance Code (2022)

The FRC published an updated [Audit Firm Governance Code \(2022\) \(the Code\)](#) which supersedes the 2016 Code and is applicable for financial years beginning on or after 1 January 2023. This 2022 Code has therefore been applied to KPMG in the UK's 2024 Transparency Report (this report).

A: Leadership

Principles

- A. A firm's Management¹¹ and governance structures should promote the long-term sustainability of the firm. To this end, the Management of a firm should be accountable to the firm's owners.
- B. A firm's governance arrangements should provide checks and balances on individual power and support effective challenge of Management. There should be a clear division of responsibilities between a firm's governance structures and its Management. No one individual or small group of individuals should have unfettered powers of decision.
- C. A firm's Management should demonstrate its commitment to the public interest through their pursuit of the purpose of this Code and regular dialogue with the INEs. Management should embrace the input and challenge from the INEs (and ANEs).
- D. The members of a firm's Management and governance structures should have appropriate experience, knowledge, influence and authority within the firm, and sufficient time, to fulfil their assigned responsibilities.
- E. The Management of a firm should ensure that members of its governance structures, including owners, INEs and ANEs, are supplied with information in a timely manner and in a form and of a quality appropriate to enable them to discharge their duties.

Provisions	2024 response
1 A firm should establish a Board ¹² or equivalent governance structure to oversee the activities of Management.	Contained in the LLPA.
2 At least half a firm's Board should be selected from among partners who do not have significant management responsibilities within the firm.	Refer to: UK Board Terms of Reference .
3 The chair of the Board should not also chair parts of the Management structure or be the managing partner	Chair and CEO role separate.
4 A firm's Management and Board should have a clear understanding of their authority, accountabilities and responsibilities. The Board should have clearly defined terms of reference, with matters specifically reserved for its decision, detailing in particular its role in relation to firm strategy, risk, culture and other matters relating to the purpose of this Code. Management should have terms of reference that include clear authority over the whole firm and matters relating to the purpose of this Code. Terms of reference should be disclosed on the firm's website. Terms of reference for international management and governance structures taking decisions that apply to the UK should be disclosed on the UK firm's website in the same way as for UK-based structures.	Refer to: UK Board and UK ExCo Terms of Reference .
5 A firm should establish arrangements for determining remuneration and progression matters for members of the Board which support and promote effective challenge of Management.	The Chair is the "third pen" for Board Members. Refer to: UK Nominations Committee Terms of Reference (this will be overseen by the Group Remuneration Committee from 1 October 2024).
6 The individual members of a firm's governance structures and Management should be subject to formal, rigorous and ongoing performance evaluation and, at regular intervals, members should be subject to reelection or re-selection.	Annual performance reviews. The Terms of Reference include term limits.

11 A firm's most senior executives, responsible for running the business.

12 A firm's most senior governance body.

Audit Firm Governance Code (2022)

Continued

Provisions	2024 response
7 There should be a formal annual evaluation of the performance of the Board and any committees, plus the public interest body. ¹³ A firm should consider having a regular externally-facilitated board evaluation at least every three years.	Internal Assessments annually, including external assessment every three years.
8 Management should ensure that, wherever possible and so far as the law allows, members of governance structures and INEs and ANEs have access to the same information as is available to Management.	Regular MI packs provided to the PIC and AB. Terms of Reference also give members the authority to have access to any information required.



Provisions	2024 response
9 A firm should disclose in its annual transparency report:	<p>a) the names and job titles of all members of the firm's governance structures and its Management. Refer to: Governance ("Members" sub-sections).</p> <p>b) a description of how they are elected or appointed and their terms, length of service, meeting attendance in the year, and relevant¹⁴ biographical details. Refer to: Governance:</p> <ul style="list-style-type: none"> — "Role" sub-sections — "Members" sub-sections — "Terms of Reference" sub-sections — "Meeting attendance" section <p>c) a description of how its governance structures and Management operate, their duties, the types of decisions they take and how they contribute to achieving the Code's purpose. If elements of the Management and/or governance of the firm rest at an international level and decisions are taken outside the UK, it should specifically set out how management and oversight is undertaken at that level and the Code's purpose achieved in the UK. Refer to: Governance:</p> <ul style="list-style-type: none"> — "Legal structure" section — "Role" sub-sections — "Terms of Reference" sub-sections <p>d) an explanation of the controls it has in place on individual powers of decision and to support effective challenge by Board members, how these are intended to operate and how they work in practice. The Terms of Reference contain detail on decision making, no one individual has unfettered powers. The role of Board Members, including their ability to provide effective challenge and support to the executive is set out in the Elected Member Role Description. A copy of this is provided to every Board Member upon their induction.</p>

13 See Provision 29.

14 Relevant being judged by reference as to the Code's purpose

Audit Firm Governance Code (2022)

Continued

B: People, Values and Behaviour

Principles

- F. A firm is responsible for its purpose and values and for establishing and promoting an appropriate culture,¹⁵ that supports the consistent performance of high-quality audit, the firm's role in serving the public interest and the long-term sustainability of the firm.
- G. A firm should foster and maintain a culture of openness which encourages people to consult, challenge, contribute ideas and share problems, knowledge and experience in order to achieve quality work in a way that takes the public interest into consideration.
- H. A firm should apply policies and procedures for managing people across the whole firm that support its commitment to the purpose and Principles of this Code.

Provisions	2024 response
10 A firm's Board and Management should establish the firm's purpose and values and satisfy themselves that its purpose, values and culture are aligned. If a firm's purpose and values are established at an international level, the firm should ensure it has the ability to influence that decision-making process and the ability to tailor the output for the UK.	UK Board Terms of Reference.
11 A firm should have a code of conduct which it discloses on its website and requires everyone in the firm to apply. The Board and INEs should oversee compliance with it.	KPMG in the UK's Code of Conduct can be found here .
12 A firm should promote the desired culture and a commitment to quality work, professional judgement and values, serving the public interest and compliance with professional standards and applicable legal and regulatory requirements, in particular through the right tone at the top and the firm's policies and procedures.	Refer to: UK Board and Public Interest Committee Terms of Reference.
13 A firm should establish policies and procedures to promote inclusion and encourage people to speak up and challenge without fear of reprisal, particularly on matters relating to this Code and the firm's values and culture.	Ongoing communications linked to our culture to all staff and partners.
14 A firm should introduce meaningful key performance indicators on the performance of its governance system, and report on performance against these in its transparency reports.	Ethical Health Report and Ethics Programme tabled quarterly at the UK Board.
	Speak up/whistleblowing.
	Ethics Champions.
	Anti-retaliation tool.
	Refer to: Governance (Key performance indicators for our governance system).

¹⁵ Consistent with the requirements of Provision A.1.1 of the 2019 Revised Ethical Standard for Auditors.

Audit Firm Governance Code (2022)

Continued

Provisions	2024 response	Provisions	2024 response
15 A firm should assess and monitor culture. It should conduct a regular review of the effectiveness of the firm's systems for the promotion and embedding of an appropriate cultures underpinned by sound values and behaviour across the firm, and in audit in particular. INEs should be involved in this review and where a firm has implemented operational separation the ANEs should be involved in the review as it relates to the audit practice. Where it is not satisfied that policy, practices or behaviour throughout the business are aligned with the purpose of this Code, it should take corrective action.	The Culture dashboard includes KPIs tabled regularly at the UK Board. Monitoring by Culture Steerco. Refer to: Public Interest Committee and Audit Board Terms of Reference.	18 INEs and ANEs should use a range of data and engagement mechanisms to understand the views of colleagues throughout the firm and to communicate about their own roles and the purpose of this Code. One INE should be designated as having primary responsibility for engaging with the firm's people.	INEs and ANEs receive updates of the Global People Survey and Pulse Surveys. There is an annual INE and ANE engagement plan agreed.
16 A firm should establish mechanisms for delivering meaningful engagement with its people. This should include arrangements for people to raise concerns in confidence and anonymously and to report, without fear, concerns about the firm's culture, commitment to quality work, the public interest and/or professional judgement and values. The INEs should be satisfied that there is an effective whistleblowing policy and procedure in place and should monitor issues raised under that process.	Regional visits by ExCo Members and by INEs and ANEs. There is direct engagement between the Public Interest Committee Members and Audit Board Members and Ethics Champions.	19 A firm should disclose in its annual transparency report a description of how:	Refer to: "We listen, learn and evolve section of People and Culture . Management information from sources such as our Global People Survey, Pulse surveys and Culture Amp is part of the firm's decision-making framework that's referenced on all recommendations or approvals being sought by the UK Board.
17 INEs should be involved in reviewing people management policies and procedures, including remuneration and incentive structures, recruitment and promotion processes, training and development activities, and diversity and inclusion, to ensure that the public interest is protected. They should monitor the firm's success at attracting and managing talent, particularly in the audit practice. Where operational separation is in place the ANEs should be involved in this process.	Refer to: Public Interest Committee Terms of Reference and Audit Board Remuneration Committee Terms of Reference. The Chief People Officer also presents on people related policies and procedures at the Public Interest Committee meeting.	a) it engages with its people and how the interests of its people have been taken into account in decision making.	Refer to: <ul style="list-style-type: none">— Quality control and risk management (Principal risks).— People and culture.

Audit Firm Governance Code (2022)

Continued

C: Operations and Resilience

Principles

- I. A firm should promote a commitment to consistent high-quality audits and firm resilience in the way it operates. To these ends, a firm should collect and assess management information to evaluate the effectiveness of its policies and procedures and to enhance its operational decision-making.
- J. A firm should establish policies and procedures to identify, assess and manage risk, embed the internal control framework and determine the nature and extent of the principal risks the firm is willing to take while working to meet the purpose of this Code.
- K. A firm should communicate with its regulators in an open, cooperative and transparent manner.
- L. A firm should establish policies and procedures to ensure the independence and effectiveness of internal and external audit activities and to monitor the quality of external reporting.

Provisions	2024 response
20 A firm should assist the FRC and its successor bodies to discharge its duties by sharing information openly.	This is in line with our normal business activity but is supported by our Values, Engaging with Regulators Policy and Code of Conduct.
21 A firm should take action to address areas of concern identified by regulators in relation to the firm's audit work, leadership and governance, culture, management information, risk management and internal control systems.	This is managed by our Regulatory Affairs and Oversight Team and Audit Regulatory and Compliance Teams.
22 A firm should develop robust datasets and effective management information to support monitoring of the effectiveness of its activities, including by INEs (and ANEs), and its ability to furnish the regulator with information.	Refer to: Emerging Risk Management (ERM) framework which is reported regularly at various governance meetings. This is also included in monthly MI reports.
23 A firm should establish an audit committee and disclose on its website its terms of reference and information on its membership. Its terms of reference should set out clearly its authority and duties, including its duties in relation to the appointment and independence of the firm's auditors. Where a firm's audit committee sits at an international level, information about the committee and its work should be disclosed by the UK firm as if it were based in the UK.	Refer to: Governance (Audit Committee –Terms of Reference) . With effect from 1 October 2024, this will be the role of the UK Audit and Risk Committee.
24 A firm should monitor its risk management and internal control systems, and, at least annually, conduct a review of their effectiveness. INEs should be involved in the review which should cover all significant controls, including financial, operational and compliance controls and risk management systems.	Refer to: the UK Risk Committee (with effect from 1 October 2024, this will be the role of the UK Audit and Risk Committee).

Audit Firm Governance Code (2022)

Continued

Provisions	2024 response	Provisions	2024 response
25 A firm should carry out a robust assessment of the principal risks facing it, including those that would threaten its business model, future performance, solvency or liquidity. This should reference specifically the sustainability of the audit practice in the UK. INEs (and in firms with operational separation, ANEs) should be involved in this assessment.	Refer to: the Risk Committee Terms of Reference (with effect from 1 October 2024 this will be the role of the UK Audit and Risk Committee). Audit Board and Public Interest Committee Terms of Reference .	28 The transparency report should be fair, balanced and understandable in its entirety. A firm should disclose in its transparency report:	The Board has considered the disclosures within the 2024 Transparency Report and considers the report to be fair, balanced and understandable and in compliance with the 2022 Audit Firm Governance Code.
26 A firm should publicly report how it has applied the Principles of this Code, and make a statement on its compliance with its Provisions or give a detailed explanation for any non-compliance, i.e. why the firm has not complied with the Provision, the alternative arrangements in place and how these work to achieve the desired outcome (Principle) and the purpose of this Code.	Refer to: the Risk Committee Terms of Reference (with effect from 1 October 2024 this will be the role of the UK Audit and Risk Committee). Audit Board and Public Interest Committee Terms of Reference .	a) a commentary on its performance, position and prospects.	Refer to the report of the Chief Executive .
27 A firm should explain who is responsible for preparing the financial statements and the firm's auditors should make a statement about their reporting responsibilities in the form of an extended audit report as required by International Auditing Standards (UK) 700/701.	Refer to: the Risk Committee Terms of Reference (with effect from 1 October 2024 this will be the role of the UK Audit and Risk Committee). Audit Board and Public Interest Committee Terms of Reference .	b) how it has worked to meet the legal and regulatory framework within which it operates.	Refer to reports of the Risk Committee , Audit Committee and UK Board .

Audit Firm Governance Code (2022)

Continued

D: INEs and ANEs

Principles

- M. A firm should appoint INEs to the governance structure who through their involvement collectively enhance the firm's performance in meeting the purpose of this Code. INEs should be positioned so that they can observe, challenge and influence decision-making in the firm.
- N. INEs (and ANEs) should provide constructive challenge and specialist advice with a focus on the public interest. They should assess and promote the public interest in firm operations and activities as they relate to the purpose of this Code, forming their own views on where the public interest lies.
- O. INEs (and ANEs) should maintain and demonstrate objectivity and an independent mindset throughout their tenure. Collectively they should enhance public confidence by virtue of their independence, number, stature, diverse skillsets, backgrounds, experience and expertise. They should have a combination of relevant skills, knowledge and experience, including of audit and a regulated sector. They owe a duty of care to the firm and should command the respect of the firm's owners.
- P. INEs (and ANEs) should have sufficient time to meet their responsibilities. INEs (and ANEs) should have rights consistent with discharging their responsibilities effectively, including a right of access to relevant information and people to the extent permitted by law or regulation, and a right, individually or collectively, to report a fundamental disagreement regarding the firm to its owners and, where ultimately this cannot be resolved and the independent non-executive resigns, to report this resignation publicly.
- Q. INEs (and ANEs) should have an open dialogue with the regulator.

Provisions	2024 response
29 INEs should number at least three, be in the majority on a body chaired by an INE that oversees public interest matters and be embedded in other relevant governance structures within the firm as members or formal attendees with participation rights. If a firm considers that having three INEs is unnecessary given its size or the number of public interest entities it audits, it should explain this in its transparency report and ensure a minimum of two at all times. At least one INE should have competence in accounting and/or auditing, gained for example from a role on an audit committee, in a company's finance function or at an audit firm.	KPMG has five Independent Non-Executives. Three are Independent Non-Executives, and three are Audit Non-Executives as contemplated in the Audit Firm Governance Code 2022; one of the Independent Non-Executives is both an INE and ANE. The Public Interest Committee comprises the three Independent Non-Executives. The Audit Board comprises the three Audit Non-Executives, and two partners. For current information about these groups, and their members, visit: Governance .
30 INEs should meet regularly as a private group to discuss matters relating to their remit. Where a firm adopts an international approach to its management and/or governance it should have at least three INEs with specific responsibility and relevant experience to focus on the UK business and to take part in governance arrangements for this jurisdiction. The firm should disclose on its website the terms of reference and composition of any governance structures whose membership includes INEs, whether in the UK or another jurisdiction.	The members of the Public Interest Committee have a private meeting before each committee meeting. They also meet outside of governance meetings independently. For the year ended 30 September 2024, the three INEs have focused on the UK business.
31 INEs should have full visibility of the entirety of the business. They should assess the impact of firm strategy, culture, senior appointments, financial performance and position, operational policies and procedures including client management processes, and global network initiatives on the firm and the audit practice in particular. They should pay particular attention to and report in the transparency report on how they have worked to address: risks to audit quality; the public interest in a firm's activities and how it is taken into account; and risks to the operational and financial resilience of the firm.	Refer to: Statement by the Independent Non-Executives and Audit Non-Executives . Refer to PIC and Audit Board reports.

Audit Firm Governance Code (2022)

Continued

Provisions	2024 response	Provisions	2024 response
32 A firm should establish a nomination committee, with participation from at least one INE, to lead the process for appointments and re-appointments of INEs (and ANEs), to conduct a regular assessment of gaps in the diversity of their skills and experience and to ensure a succession plan is in place. The nomination committee should assess the time commitment for the role and, when making new appointments, should take into account other demands on INEs' (and ANEs') time. Prior to appointment, significant commitments should be disclosed with an indication of the time involved. Additional external appointments should not be undertaken without prior consultation with the nomination committee.	The Independent Non-Executive chair of our Public Interest Committee attends the Nominations Committee.	37 The firm should provide each INE (and ANE) with the resources necessary to undertake their duties including appropriate induction, training and development, indemnity insurance and access to independent professional advice at the firm's expense where an INE or ANE judges such advice necessary to discharge their duties.	Refer to: Statement by the Independent Non-Executives and Audit Non-Executives .
33 A firm should provide access for INEs to relevant information on the activities of the global network such that they can monitor the impact of the network on the operations and resilience of the UK firm and the public interest in the UK	Public Interest Committee MI includes global matters. The Public Interest Committee Terms of Reference refers to their ability to obtain information that is necessary.	38 The firm should establish, and disclose on its website, well defined and clear escalation procedures compatible with Principle P, for dealing with any fundamental disagreement that cannot otherwise be resolved between the INEs (and /or ANEs) and members of the firm's Management and/or governance structures.	Refer to: Terms of Reference for the Public Interest Committee and Audit Board .
34 INEs should have regular contact with the Ethics Partner, who should under the ethical standards have direct access to them. ¹⁶	The members of the Public Interest Committee have a private meeting with the Ethics Partner after every Public Interest Committee meeting.	39 An INE (and/or ANE) should alert the regulator as soon as possible to their concerns in the following circumstances: <ul style="list-style-type: none"> — the INE or ANE believes the firm is acting contrary to the public interest; or — the INE or ANE believes the firm is endangering the objectives of this Code; or — the INE or ANE initiates the procedure for fundamental disagreements. 	No such instances have arisen during the year ended 30 September 2024.
35 INEs should have dialogue with audit committees and investors to build their understanding of the user experience of audit and to develop a collective view of the way in which their firm operates in practice.	The INEs and ANEs have a dialogue with audit committees and investors throughout the year. Refer to: Statement by the Independent Non-Executives and Audit Non-Executives .	40 A firm should disclose in its annual transparency report: <ol style="list-style-type: none"> a) information about the appointment, retirement and resignation of INEs (and ANEs); their remuneration; their duties and the arrangements by which they discharge those duties; and the obligations of the firm to support them. The firm should report on why it has chosen to position its INEs in the way it has. b) its criteria for assessing whether INEs (and ANEs) are: i) independent from the firm and its owners; and ii) independent from its audited entities. 	Refer to: Appointment and Independence of the INEs and ANEs .
36 Firms should agree with each INE (and ANE) a contract for services setting out their rights and duties. INEs (and ANEs) should be appointed for specific terms and have a maximum tenure of nine years in total.	All INEs and ANEs have a contract for services. No INE or ANE has had a tenure in excess of nine years.		

16 Paragraph 1.14 of the FRC's 2019 Ethical Standard for Auditors.

Audit Firm Governance Code (2022)

Continued

E: Operational Separation

Principles

R. Where a firm applies the Principles for Operational Separation,¹⁷ has established an Audit Board with a majority of ANEs¹⁸ and is subject to regulatory monitoring of these arrangements, ANEs will fulfil the responsibilities of INEs under this Code in so far as these relate to the audit practice. A firm's INEs will focus on representing the public interest in high-quality audit at the firm-wide level as well as on the public interest in firm activities in non-audit parts of the business and the risks posed by these non-audit activities to the audit practice. In fulfilling their role ANEs should follow the Principles set out in section D as applied to the audit practice.

S. INEs should rely on ANEs to provide independent oversight of audit quality plans, audit strategy and remuneration in the audit practice. ANEs should rely on the INEs to monitor activities at the firm-wide and network levels for their potential impact on the audit practice.

Provisions	2024 response
41 ANEs should have the same obligations regarding time commitment, independence and objectivity as INEs. They should focus their attention on the audit practice in accordance with the Principles for Operational Separation ¹⁹ . The Audit Board should have the authority to act independently of the firm-wide public interest body.	Refer to: Appointment and Independence of the INEs and ANEs Refer to: Audit Board Terms of Reference .
42 INEs should participate in governance structures operating across the entirety of the firm and pursue the purpose of this Code at the firm-wide level. They should: <ul style="list-style-type: none"> i) monitor the activities of the wider firm and global network for their potential to affect audit quality and the resilience of the audit practice; and ii) ensure the firm takes account of the public interest in its wider decision making. 	The INEs and ANEs observe the Board, Risk Committee, Audit Committee, People Committee and Nomination Committee meetings throughout the year. Attendance can be seen in Appendix 2 . They do not carry votes on the Board or its other Committees, however they have had access and opportunity to question and challenge KPMG leadership in the UK at these meetings.
43 INEs and ANEs should maintain open dialogue, consult on matters of public interest and share information with one another to the extent this is relevant for the Audit Board's oversight of the audit practice and/or the effective discharge of the INEs' responsibilities at the firm-wide level. They should inform one another in the event they invoke the procedure for fundamental disagreements.	One of the Independent Non-Executives is both an INE and ANE, which supports this dialogue. The Audit Board Chair is invited to attend the Public Interest Committee. The Chair of the Public Interest Committee and the Chair of the Audit Board meet privately through the year to discuss matters arising.

¹⁷ See Appendix 7: Financial Information.

¹⁸ As required by Principle 3 of the Principles for Operational Separation.

¹⁹ As required by Principle 1 of the Principles for Operational Separation.

Article 13 (Transparency Report) of Regulation (EU) No 537/2014 of the European Parliament and of the Council

as amended by The Statutory Auditors and Third Country Auditors (Amendment) (EU Exit) Regulations 2019

Article 13 (Transparency Report) of Regulation (EU) No 537/2014 of the European Parliament and of the Council – as amended by The Statutory Auditors and Third Country Auditors (Amendment) (EU Exit) Regulations 2019 – requires a statutory auditor that carries out the statutory audit of a public interest entity, to publish a signed, annual transparency report (see 2024 KPMG UK Transparency Report).

The Regulation requires that the Report is published at the latest four months after the end of each financial year, on the website of the statutory auditor, and shall remain available on that website for at least five years from the day of its publication on the website (KPMG in the UK's historical reports can be found in our [Report hub](#)).

The Regulation requires the Report to comprise specific disclosures. KPMG in the UK's response to these requirements is shown below.

Para.	Requirement	2024 response
2(a)	A description of the legal structure and ownership of the statutory auditor, if it is a firm;	Refer to: Governance (Legal structure).
2(b)	Where the statutory auditor is a member of a network:	
	(i) a description of the network and the legal and structural arrangements in the network;	Refer to: Governance (Legal structure).
	(ii) the name of each member of the network that is eligible for appointment as a statutory auditor, or is eligible for appointment as an auditor in an EEA state or Gibraltar;	Gibraltar KPMG operates in Gibraltar through KPMG LLP's wholly owned subsidiary, KPMG Limited, a company registered in Gibraltar. KPMG Limited is approved as a statutory auditor by the Gibraltar Financial Services Commission under the Gibraltar Financial Services Act 2019. Refer to: 2024 Gibraltar Transparency Report .
	(iii) for each member of the network identified under paragraph (ii), the countries in which they are eligible for appointment as auditors or in which they have a registered office, central administration or principal place of business;	EU/EEA countries The name of each audit firm that is a member of the organisation and the EU/EEA countries in which each firm is qualified as a statutory auditor or has its registered office, central administration or principal place of business are available here .

Article 13 (Transparency Report) of Regulation (EU) No 537/2014 of the European Parliament and of the Council

Continued

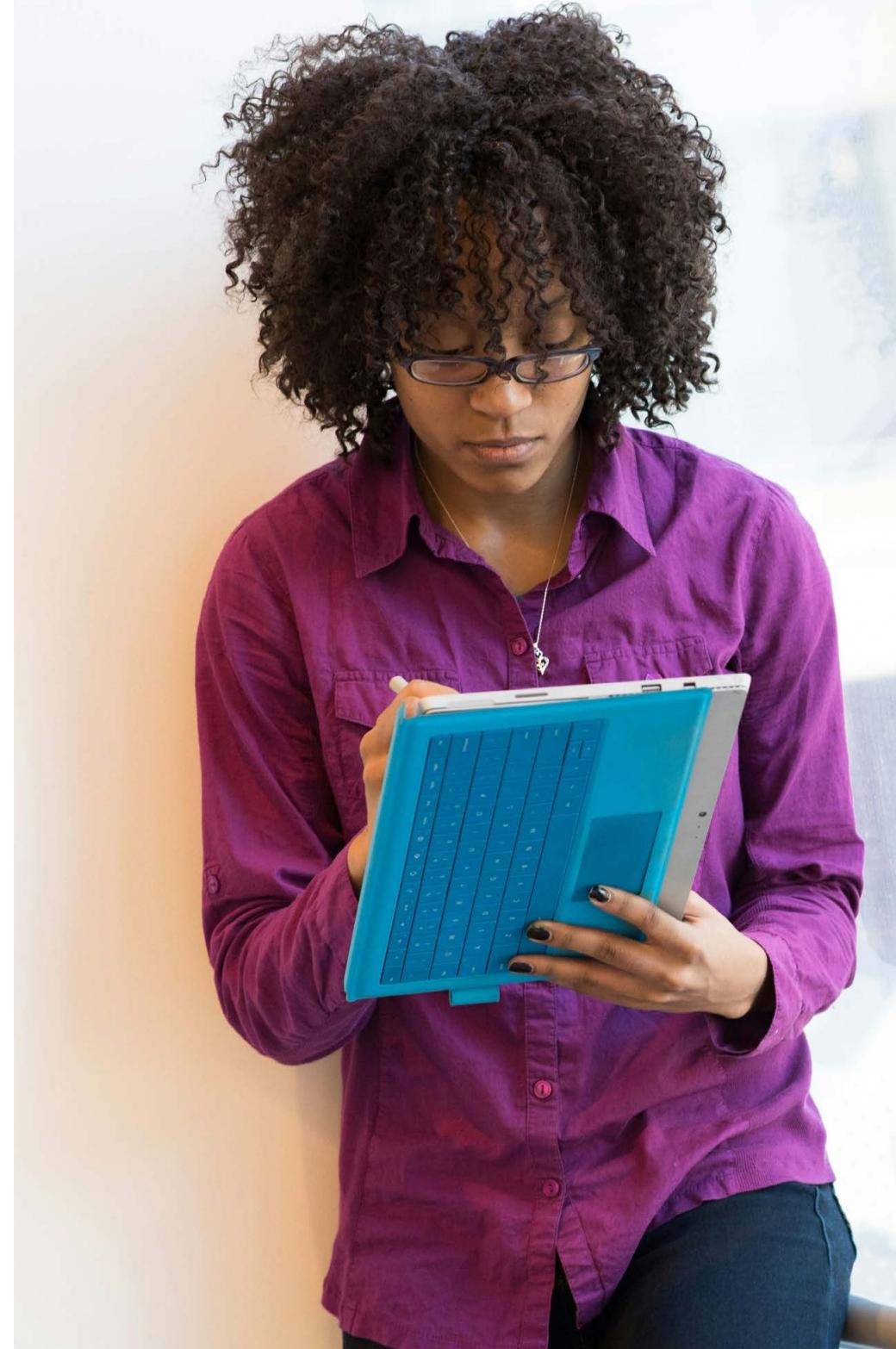
Para. Requirement	2024 response	Para. Requirement	2024 response
(iv) the total turnover of the members of the network identified under (ii) resulting from statutory audit work or equivalent work in EEA states of Gibraltar;	<p>Gibraltar Refer to: 2024 Gibraltar Transparency Report (Financial information).</p> <p>EU/EEA Member States²⁰ Aggregated revenues generated by KPMG firms, from EU and EEA Member States resulting from the statutory audit of annual and consolidated financial statements was EUR 2.6 billion during the year ending 30 September 2024. The EU/EEA aggregated statutory audit revenue figures are presented to the best extent currently calculable and translated at the average exchange rate prevailing in the 12 months ended 30 September 2024.</p> <p>The name of each audit firm that is a member of the organisation and the EU/EEA countries in which each firm is qualified as a statutory auditor or has its registered office, central administration or principal place of business are available here.</p>	2 (e) An indication of when the last quality assurance review referred to in Article 26 was carried out;	Refer to: Audit quality (Perform quality engagements).
2 (c) A description of the governance structure of the statutory auditor, if it is a firm;	Refer to: Governance .	2 (f) A list of public-interest entities for which the statutory auditor carried out statutory audits during the preceding financial year;	Refer to: Appendix 5: UK Public Interest Entities .
2 (d) A description of the internal quality control system of the statutory auditor and a statement by the management body on the effectiveness of its functioning;	<p>Refer to: Quality control and risk management:</p> <ul style="list-style-type: none"> – Statement by the Board on the effectiveness of internal controls. – Statement on the effectiveness of the System of Quality Management. 	2 (g) A statement concerning the statutory auditor's independence practices which also confirms that an internal review of independence compliance has been conducted;	Refer to: Quality control and risk management (Maintaining an objective and independent mindset).
		2 (h) A statement on the policy followed by the statutory auditor concerning the continuing education of statutory auditors referred to in paragraph 11 of Schedule 10 to the Companies Act 2006;	<p>Refer to:</p> <ul style="list-style-type: none"> – Audit quality (Apply expertise and knowledge). – For information on how we ensure Key Audit Partners remain competent to deliver local audits, refer to: Appendix 6: UK Major Local Audits listing.
		2 (i) Information concerning the basis for the remuneration of members of the management body of the statutory auditor, where that statutory auditor is a firm;	Refer to: People and culture (Uphold the highest ethical and quality standards).
		2 (j) A description of the statutory auditor's policy concerning the rotation of key audit partners and staff in accordance with Article 17(7);	Refer to: Quality control and risk management (Maintaining an objective and independent mindset).

²⁰ The financial information set forth represents combined information of the separate KPMG firms from EU and EEA Member States that perform professional services for clients. The information is combined here solely for presentation purposes. KPMG International performs no services for clients nor, concomitantly, generates any client revenue.

Article 13 (Transparency Report) of Regulation (EU) No 537/2014 of the European Parliament and of the Council

Continued

Para.	Requirement	2024 response
2 (k)	Where not disclosed in accounts, information about the total turnover of the statutory auditor or the audit firm, divided into the following categories:	Refer to: Appendix 7: Financial information .
	(i) revenues from the statutory audit of annual and consolidated financial statements of public-interest entities and entities belonging to a group of undertakings whose parent undertaking is a public-interest entity;	
	(ii) revenues from the statutory audit of accounts of other entities;	
	(iii) revenues from permitted non-audit services to entities that are audited by the statutory auditor; and	
	(iv) revenues from non-audit services to other entities.	
3	The transparency report shall be signed by the statutory auditor.	Refer to the Introduction .



The Local Auditors (Transparency) Regulations 2020

[The Local Auditors \(Transparency\) Regulations 2020](#)

Regulations 2020 requires a “transparency reporting local auditor” (a local auditor that has issued an audit report in relation to one or more major local audits at any time during the financial year of that local auditor) to publish a signed, annual transparency report (see [2024 KPMG UK 2024 Transparency Report](#)).

The Regulation requires that the report is published at the latest four months after the end of each financial year, on the website of the transparency reporting local auditor, and shall remain available on that website for at least five years from the day of its publication on the website (KPMG in the UK's historical reports can be found in our [Report hub](#)).

The Regulation requires the report to comprise specific disclosures. KPMG in the UK's response to these requirements is shown in the table opposite.

Para.	Requirement	2024 response
(a)	A description of the legal structure, governance and ownership of the transparency reporting local auditor;	Refer to: Governance .
(b)	Where the transparency reporting local auditor belongs to a network, a description of the network and the legal, governance and structural arrangements of the network;	Refer to: Governance (Legal structure).
(c)	A description of the internal quality control system of the transparency reporting local auditor and a statement by the administrative or management body on the effectiveness of its functioning in relation to local audit work;	Refer to: Quality control and risk management : — Statement by the Board on the effectiveness of internal controls. — Statement on the effectiveness of the System of Quality Management.
(d)	A description of the transparency reporting local auditor's independence procedures and practices including a confirmation that an internal review of independence practices has been conducted;	Refer to: Quality control and risk management (Maintaining an objective and independent mindset).
(e)	Confirmation that all engagement leads are competent to undertake local audit work and staff working on such assignments are suitably trained;	Refer to: Appendix 5: UK Public Interest Entities .
(f)	A statement of when the last monitoring of the performance by the transparency reporting local auditor of local audit functions, within the meaning of paragraph 23 of Schedule 10 to the 2006 Act, as applied in relation to local audits by Section 18 and paragraphs 1, 2 and 28(7) of Schedule 5 to the 2014 Act, took place;	Refer to: Audit quality (Perform quality engagements).
(g)	A list of major local audits in respect of which an audit report has been made by the transparency reporting local auditor in the financial year of the auditor; and any such list may be made available elsewhere on the website specified in regulation 4 provided that a clear link is established between the transparency report and such a list;	Refer to: Appendix 6: UK Major Local Audits listing .
(h)	A statement on the policies and practices of the transparency reporting local auditor designed to ensure that persons eligible for appointment as a local auditor continue to maintain their theoretical knowledge, professional skills and values at a sufficiently high level;	Refer to: Appendix 6: UK Major Local Audits listing .
(i)	Turnover for the financial year of the transparency reporting local auditor to which the report relates, including the showing of the importance of the transparency reporting local auditor's local audit work; and	Refer to: Appendix 7: Financial information .
(j)	Information about the basis for the remuneration of partners.	Refer to: People and culture (Uphold the highest ethical and quality standards).

Consultative Committee of Accountancy Bodies Voluntary Code of Operative Practice on Disclosure of Audit Profitability (March 2009)

Following the recommendation from the Market Participants Group in 2007 that “audit firms should disclose the financial results of their work on statutory audits and directly related services on a comparable basis”, the Consultative Committee of Accountancy Bodies developed guidance (the Code) for audit firms on the voluntary disclosure of this information.

The Code establishes a basis for comparable reporting of audit profitability by defining the audit segment (the ‘reportable segment’) and suggesting principles designed to achieve more comparable and consistent treatment of costs relating to that segment.

KPMG in the UK’s voluntary disclosure of this information can be found in [Appendix 7: Financial information](#).



Operational Separation financial disclosure

The FRC principles for operational separation of the audit practices of the Big Four firms have been implemented by KPMG in the UK.

The stated objectives of operational separation are to improve audit quality by ensuring that people in the audit practice are focused above all on delivery of high-quality audits in the public interest; and to improve audit market resilience by ensuring that no material, structural cross subsidy persists between the audit practice and the rest of the firm. The FRC note that in pursuing these objectives, they seek to ensure that audit remains an attractive and reputable profession and increase deserved confidence in audit.

Para. Requirement	2024 response
P20 Firms should produce annually a separate profit and loss account for the audit practice to a level which is consistent with the firm's own published statutory financial statements. This profit and loss account should be assured by the firm's auditors. Firms should submit more detailed financial information supporting the profit and loss account to the FRC no later than four months after the financial year end.	Please see Appendix 7: Financial information .

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Appendix 1: Legal structure

Legal structure

KPMG LLP is constituted as a limited liability partnership under the Limited Liability Partnerships Act 2000. The capital in KPMG LLP is contributed by its members (the members are referred to as partners).

KPMG LLP is part of the KPMG global organisation of professional services firms providing Audit, Tax, and Advisory services to a wide variety of public and private sector organisations. The KPMG organisation structure is designed to support consistency of service quality and adherence to agreed Values wherever its member firms operate.

In many parts of the world, regulated businesses (such as audit and legal firms) are required by law to be locally owned and independent. KPMG member firms do not, and cannot, operate as a multinational corporate entity. KPMG member firms are generally locally owned and managed. Each KPMG member firm is responsible for its own obligations and liabilities. KPMG International and other member firms are not responsible for a member firm's obligations or liabilities.

Member firms may consist of more than one separate legal entity. If this is the case, each separate legal entity will be responsible only for its own obligations and liabilities, unless it has expressly agreed otherwise.

Our firm and all other KPMG firms are party to membership and associated documents, the key impact of which is that all KPMG member firms in the KPMG global organisation are members in, or have other legal connections to, KPMG International Limited, an English private company limited by guarantee.

KPMG International Limited acts as the coordinating entity for the overall benefit of the KPMG member firms. It does not provide professional services to clients, directly or indirectly, to clients. Professional services to clients are exclusively provided by member firms.

Each firm is part of one of three regions (the Americas, ASPAC and EMA). Each region has a Regional Board comprising a regional chairman, regional chief operating officer, representation from any sub-regions, and other members as appropriate. Each Regional Board focuses specifically on the needs of member firms within their region and assists in the implementation of KPMG International's policies and processes within the region.

KPMG is the registered trademark of KPMG International and is the name by which the member firms are commonly known. The rights of member firms to use the KPMG name and marks are contained within agreements with KPMG International.

KPMG International and the KPMG member firms are not a global partnership, single firm, multinational corporation, joint venture, or in a principal or agent relationship or partnership with each other. No member firm has any authority to obligate or bind KPMG International, any of its related entities or any other member firm vis-à-vis third parties, nor does KPMG International or any of its related entities have any such authority to obligate or bind any member firm.

Further detail on the revised legal and governance arrangements for the KPMG global organisation can be found on the [About Us](#) page of kpmg.com.

Governance

KPMG International's governance bodies are comprised of the Global Council, the Global Board (including its committees), the Global Management Team and the Global Steering Groups. Further details on KPMG International's governance structure can be found in the [KPMG International Transparency Report](#).



Total turnover achieved by EU/EEA audit firms resulting from the statutory audit of annual and consolidated financial statements²¹

KPMG International performs no services for clients nor, concomitantly, generates any client revenue.

Aggregated revenues generated by KPMG firms, from EU and EEA Member States resulting from the statutory audit of annual and consolidated financial statements was EUR xx billion during the year ending 30 September 2024. The EU/EEA aggregated statutory audit revenue figures are presented to the best extent currently calculable and translated at the average exchange rate prevailing in the 12 months ended 30 September 2024.

²¹ The financial information set forth represents combined information of the separate KPMG firms from EU and EEA Member States that perform professional services for clients. The information is combined here solely for presentation purposes.

Appendix 2: Meeting attendance records for the year ended 30 September 2024

Board	Public Interest Committee	Audit Board	Audit Committee	People Committee	Risk Committee	Nomination Committee	Executive Committee
Bina Mehta	12 (12)	<i>3 (3)</i>	<i>2 (3)</i>	-	<i>7 (11)</i>	<i>6 (6)</i>	4 (4)
Jonathan Holt	10 (10)	-	-	-	-	-	11 (11)
Chris Hearld	9 (10)	-	-	<i>6 (6)</i>	-	-	11 (11)
Annette Barker	12 (12)	-	-	6 (6)	11 (11)	-	-
Melissa Geiger	9 (12)	-	-	-	-	5 (6)	4 (4)
Jonathan Downer	12 (12)	-	8 (8)	6 (6)	-	6 (6)	-
Anthony Lobo	9 (12)	-	5 (6)	4 (6)	-	-	-
Louise Kirby	10 (12)				11 (11)		3 (3)
John Hallsworth ²²	9 (10)	-	-	-	10 (11)	-	4 (4)
John Bennett	4 (4)	<i>3 (3)</i>	<i>1 (1)</i>	<i>5 (6)</i>	-	<i>5 (6)</i>	-
Catherine Burnet	-	-	<i>8 (8)</i>	-	-	-	11 (11)
Lisa Fernihough	-	-	-	-	1 (1)	-	-
Karl Edge ²³	-	-	-	-	<i>5 (5)</i>	-	7 (8)
Karim Hajji ²⁴	-	-	-	-	-	-	3 (3)
Victoria Heard	-	-	-	-	-	-	11 (11)
Rachel Hopcroft	-	-	-	-	-	-	10 (11)
Liz Claydon ²⁵	-	-	-	-	-	-	3 (3)
David Rowlands ²⁶	-	-	-	-	-	-	3 (3)
Suzanne Shenton ²⁷	-	-	-	-	-	-	3 (3)
Dan Thomas ²⁸	-	-	-	-	-	-	3 (4)
Anne Bulford	<i>9 (12)</i>	3 (3)	-	<i>5 (6)</i>	-	-	-
Jonathan Evans	<i>9 (12)</i>	3 (3)	-	-	-	<i>4 (6)</i>	<i>1 (2)</i>
Oonagh Harpur	<i>6 (8)</i>	2 (2)	<i>4 (4)</i>	-	<i>6 (7)</i>	-	-
Melanie Hind	-	-	7 (8)	-	<i>6 (6)</i>	-	-
Claire Ighodaro	<i>11 (12)</i>	<i>3 (3)</i>	8 (8)	-	-	-	-
Kathleen O'Donovan	<i>7 (12)</i>	3 (3)	7 (8)	-	-	-	-

Key information

- Meetings eligible to attend are shown in brackets.
- Numbers in blue italics relate to standing invitees of the Committees only and as such attendance is optional
- For the Audit Board, the Chair and the Chief Risk Officer are invited on a periodic basis
- The number of meetings included are formal meetings.

²² John Hallsworth stepped down as a Board member and retired from the firm on 31 July 2024.

²³ Karl Edge became a member of the Executive Committee in his capacity as Chief People Officer on 1 January 2024.

²⁴ Karim Hajji became a member of the Executive Committee on 1 June 2024 in his capacity as Head of Markets and Growth.

²⁵ Liz Claydon stepped down as a member of the Executive Committee on 1 January 2024.

²⁶ David Rowlands stepped down as a member of the Executive Committee on 1 January 2024.

²⁷ Suzanne Shenton stepped down as a member of the Executive Committee on 1 January 2024.

²⁸ Dan Thomas left the firm on 28 February 2024.

Appendix 3: Key performance indicators for our governance system

Our governance KPIs are selected for purposes of assessing the performance of our governance arrangements from the perspectives of not only ensuring there is regular, skilled and diverse oversight of the firm's delivery of its strategic and public interest objectives, but also maintaining the independence and objectivity of that oversight.

Key Performance Indicator	2024 response	Key Performance Indicator	2024 response
The Board should meet at least six times each year with a minimum attendance target of 80% over a 12-month rolling period.	The Board had twelve formal meetings and one ad hoc meeting with average members' attendance of 89%	The terms of reference for all Board Committees are reviewed annually as a minimum.	The terms of reference for all Board Committees were reviewed during the year.
The gender diversity of the Board should be composed of a minimum one third women.	At 30 September 2024 the Board included 50% female members.	External Board evaluation conducted tri-annually.	An external review was initiated in the summer of 2022.
There should be a diverse range of skills represented in the composition of the Board (by reference to each triennial evaluation of Board effectiveness).	There is a diverse range of skills represented on the Board. The appointment of nominated Board members provides a mechanism for maintaining appropriate diversity of skills.	There is an annual self-assessment of Board and Committees' effectiveness (unless external review is undertaken).	This review was not performed due to the changes to the internal governance structure and framework. An external review will be commissioned on the effectiveness of the new governance model during FY25.
As part of the firm's culture assessment, the firm should hold an annual People Survey or Pulse Survey, with the Board acting upon the findings.	A Global People Survey was undertaken in autumn 2024. The UK findings (which provide data on engagement and other key metrics about partners' and employees' relationships with the firm) were tabled at the Board with appropriate action discussed.	The Board comprises a minimum of one practising audit partner.	During the year the Board included Jonathan Downer as a practising audit partner.
There should be at least three UK INEs, and the Public Interest Committee should meet at least four times each year. On an annual basis, the Board must satisfy itself that the INEs remain independent from the firm.	At 30 September 2024 there were three INEs. The Public Interest Committee had three formal meetings during the year. The Board has considered and (based on compliance returns, disclosures and relevant independence checks) is satisfied that the INEs remain independent from the firm.	Board comprises more than 50% members who are qualified auditors (per s.1219 of the Companies Act 2006 or equivalent). The cumulative number of Elected Board Members and Nominated Board Members of the Board shall always make up the majority of the Board. There shall at all times be a majority of Qualified Individuals (under the applicable auditor qualifications regulations) as members of the Board, as set out in the LLP Agreement; of which at least one of the Elected Board Members or Nominated Board Members shall be practising auditors.	During the year, and as at 30 September 2024, 63% of members of the Board were qualified auditors, and at least one of the Elected or Nominated Board Members was a practising auditor.
The Audit Board should meet at least six times each year to oversee the focus on audit quality.	The Audit Board had six formal meetings.	The Board should satisfy itself on at least an annual basis that a formal programme of investor dialogue is occurring.	The Board has assessed that an appropriate level of investor dialogue is in place as summarised here: Audit Quality – Communicate effectively .
The Board should review the annual Transparency Report to satisfy itself that it is fair, balanced and understandable, and complies with the Audit Firm Governance Code, or explains otherwise.	The Board has considered the disclosures within the Transparency Report and considers the report to be fair, balanced and understandable and in compliance with the Audit Firm Governance Code.		

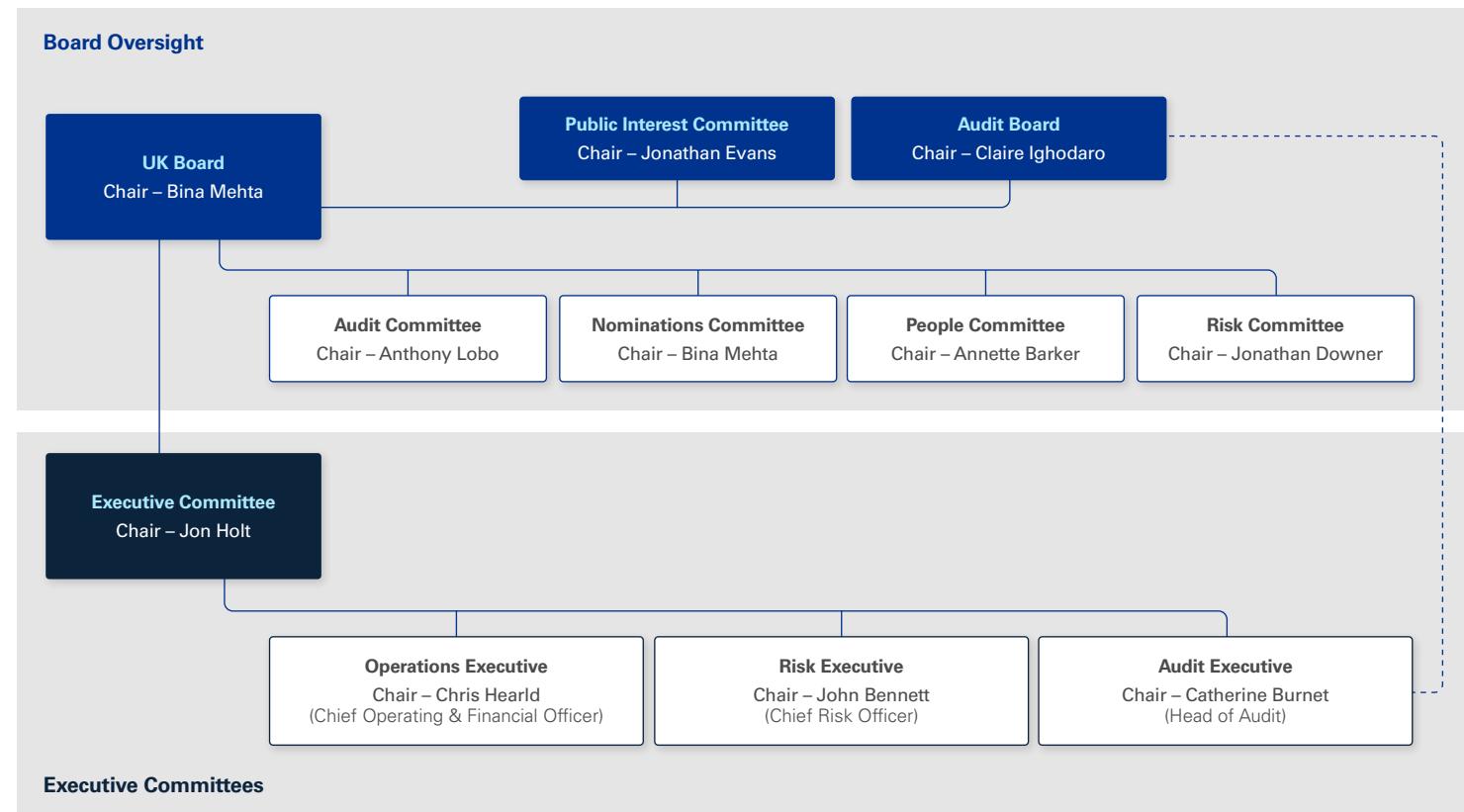
Appendix 4: Board and Committees of the Board membership

As at 30 September 2024, our UK Board was made up of eight members:

- The Chair
- The Senior Elected Member²⁹
- The Chief Executive
- Three additional Elected Board Members, who are elected by the Partners³⁰
- One Nominated Board Member, who is nominated by the Chair (under the new Terms of Reference of the UK Board, this Member will be referred to as an Elected Member)
- An additional Executive Board Member, who is nominated by the Chief Executive.
- More information about the role, membership and activities delivered during FY24 for each of the governance forums above is provided in the [Governance](#) section of the Transparency Report.

As a result of the merger between KPMG Switzerland and KPMG UK, a new governance structure has been established which came into effect on 1 October 2024. For details regarding the new structure, including membership and roles and responsibilities, and the terms of reference, please visit kpmg.com/uk

Governance structure at 30 September 2024



29 The Senior Elected Member (Melissa Geiger) reached the end of her term on 30 September 2024 and stepped down with effect from 1 October 2024.

30 One Elected Board Member (Anthony Lobo) retired from the Partnership on 30 September 2024 and one Elected Board Member (Louise Kirby) stepped down from the Board on 30 November 2024.

Appendix 4: Board and Committees of the Board membership

Continued

UK Board

Bina Mehta

UK Chair

Bina has been a partner since 2015. Bina became Chair of the Board in February 2021. Bina's tenure was extended in September 2023 to end on 31 March 2026.

Jon Holt

Group Chief Executive

Jon has been a partner since 2005. Jon became a member of the Board in April 2021. Jon's tenure was extended in March 2024 to end on 30 September 2029.

Melissa Geiger

Senior Elected Member

Melissa has been a partner since 2008 and joined the Board in October 2019 (as at the year-end, this equates to approximately five years of service as a member of the Board). Melissa was previously a member of the Risk Committee and UK Nominations Committee. Melissa's tenure came to an end on 30 September 2024 and she stepped down from the UK Board and UK Board Committees with effect from 1 October 2024.

Annette Barker

Elected Member

Annette has been a partner since 2016 and joined the Board in October 2020 (as at the year-end, this equates to approximately four years of service as a member of the Board). Annette is a member of the newly combined UK Audit and Risk Committee and was previously a member of the Audit Committee, the Risk Committee and was Chair of the People Committee from 29 July 2024 until 30 September 2024.

Anthony Lobo

Elected Member

Anthony became a partner in 2007 and joined the Board in November 2020. Anthony was previously Chair of the Audit Committee and was a member of the Audit Board and Risk Committee. Anthony retired from the Partnership on 30 September 2024.

Jonathan Downer

Nominated Member

Jonathan has been a partner since 2006 and joined the Board in March 2022. Jonathan is the Chair of the newly combined UK Audit and Risk Committee and is a member of the Audit Board and a practising auditor. As at 1 October 2024, there is no concept of a Nominated Member under the revised terms of reference of the UK Board. Jonathan will be referred to as an Elected Member of the UK Board.

Chris Heard

Group Chief Operating and Financial Officer

Chris was appointed as an Executive Member of the Board in his capacity as Chief Operating and Financial Officer with effect from 1 October 2022.

Louise Kirby

Elected Member

Louise has been a partner since 2018 and joined the Board in October 2023. Louise was previously a member of the People Committee and Risk Committee and stepped down from the Board on 30 November 2024.

The Executive Committee

Jon Holt (Chair)

CEO and Board Member

Jon has been a partner since 2005. Jon became Chair of the Executive Committee in April 2021 (as at the year-end, this equates to over three years of service as Chair).

Chris Heard

CFO and Board Member

Chris has been a partner since 2004. Chris has been a member of the Executive Committee since June 2019 (as at the year-end, this equates to over five years of service as a member of the Executive Committee).

John Bennett

Chief Risk Officer and Ethics Partner

John has been a partner since 2013. John has been a member of the Executive Committee since June 2021 (as at the year-end, this equates to over three years of service as a member of the Executive Committee).

Rachel Hopcroft

Head of Corporate Affairs

Rachel has been a partner since 2018. Rachel has been a member of the Executive Committee since June 2021 (as at the year-end, this equates to over three years of service as a member of the Executive Committee).

Catherine Burnet

Head of Audit

Cath has been a partner since 2011. Cath has been a member of the Executive Committee since June 2021 (as at the year-end, this equates

to over three years of service as a member of the Executive Committee).

Victoria Heard

Head of Tax & Legal

Victoria has been a partner since 2014. Victoria has been a member of the Executive Committee since June 2021 (as at the year-end, this equates to over three years of service as a member of the Executive Committee).

Lisa Fernihough

Head of Advisory

Lisa has been a partner since 2011 and a member of the Executive Committee since 1 January 2023 (as at the year-end, this equates to over one and a half years of service as a member of the Executive Committee).

Karl Edge

Chief People Officer

Karl has been a partner since 2012 and a member of the Executive Committee since 1 January 2024 (as at year-end, this equates to eight months as a member of the Executive Committee).

Karim Haji

Head of Markets & Growth

Karim has been a partner since 2009 and a member of the Executive Committee since 1 June 2024 (as at year-end, this equates to 4 months as a member of the Executive Committee).

Appendix 4: Board and Committees of the Board membership

Continued

Independent Non-Executives as at 30 September 2024

There were no new appointments or resignations of Independent Non-Executives during the year. There was one retirement, Oonagh Harpur.

Lord Evans of Weardale

Chair of the Public Interest Committee
Jonathan Evans joined the Public Interest Committee on 23 March 2017 and became its Chair on 1 October 2019. Jonathan was Director General of MI5 from 2007 to his retirement in 2013, having spent his career in the UK Security Service. From 2013 to 2019 he was a Non-Executive Director of HSBC Holdings and between 2018 – 2023 he was the Chair of the Committee on Standards in Public Life. Jonathan is currently a Non-Executive Director of Ark Data Centres Limited, an advisor to several small tech companies and Chairman of The HALO Trust. Jonathan also became a member of the International Advisory Council of the Institute of Business Ethics in January 2024.

Anne Bulford CB

Member of the Public Interest Committee
Anne joined the Public Interest Committee on 1 May 2019. She is a Chartered Accountant, a Non-Executive Director of Reach plc, Chair of GOSH Children's Charity and a Royal Ballet Governor. Previous roles include Non-Executive member of the Executive Committee of the Army Board, Deputy Director General of the BBC, Channel 4's Chief Operating Officer, Director of Finance and Business Affairs at the Royal Opera House, Chair of Ofcom's Audit Committee and Finance Director at Carlton Productions.



Oonagh Harpur

Member of the Public Interest Committee
Oonagh Harpur joined the Public Interest Committee on 30 April 2018. Oonagh has over 30 years' experience in the boardroom including 14 years in CEO roles in the private, public and third sectors. Her experience spans partnerships and professional service firms, financial and health services. Oonagh is also a member of the Civil Service Talent Advisory Group and the Culture Observatory Advisory Board, a trustee of the Scientific and Medical Network and senior board advisor to a number of professional service firms. Oonagh retired from the Public Interest Committee on 30 April 2024.

Kathleen O'Donovan

Member of the Public Interest Committee and Audit Board
Kathleen O'Donovan joined the Public Interest Committee on 1 July 2019. Kathleen is currently the Chair of the Invensys Pension Scheme and Founder Partner of Bird & Co Board & Executive Mentoring Ltd. Formerly she has held Non-Executive Director roles at ARM Holdings Plc, D S Smith plc, Prudential plc, O2 Plc, Great Portland Estates plc, EMI Group plc and the Bank of England. Kathleen was also co-Chair of International Rescue Committee UK, a charity supporting conflict zone refugees. Kathleen trained as a Chartered Accountant and her previous roles include CFO of BTR plc/ Invensys plc and Partner at EY.

Appendix 4: Board and Committees of the Board membership

Continued

Audit Non-Executives as at 30 September 2024

Claire Ighodaro CBE

Chair of the Audit Board (Audit Non-Executive)

Claire Ighodaro CBE is Remuneration Committee Chair of Pennon Group PLC and a Leadership Council Member of TheCityUK. Her previous board roles also include Board Chair of AXA XL – UK Entities, Audit Committee Chair of Lloyd's of London, Flood Re, UK Trade & Investment and the Open University, Governance Committee Chair of Bank of America's Merrill Lynch International and Board Member of IESBA (the International Ethics Standards Board for Accountants). She was a senior executive at BT PLC, working in the UK and Germany and was the first female global President of CIMA (the Chartered Institute of Management Accountants). Claire is a volunteer mentor on both executive and young people's development programmes. She was awarded an honorary doctorate by the Open University and a CBE, by HM the Queen, for services to business.

Melanie Hind

Member of the Audit Board

Melanie Hind is a former PwC audit and advisory partner, a former Chief Risk Officer and held the role of Executive Director at the FRC between 2012 and 2018. Since then, she has advised on accounting and audit regulation, and in 2020 acted as Head of Assurance Quality at BDO International. Melanie has also held non-executive roles associated with her role at the FRC; she was a board member of the International Forum of Independent Audit Regulators, chairing its Global Audit Quality working group, and is a former member of the Advisory Council to the International Financial Reporting Standards Foundation. Melanie has experience as an independent board member in the private and non-profit sectors in the UK and USA.

She is a board member, audit committee and people and remuneration committee chair of Talbot Underwriting Limited (a Lloyd's managing agent that is part of the AIG group), a board member and risk sub-committee chair at OneFamily (a mutual insurer and asset manager) and is an independent trustee and Honorary Treasurer of the Disasters Emergency Committee which raises funds in the UK to provide overseas humanitarian aid in emergency situations.

Kathleen O'Donovan

Member of the Public Interest Committee and Audit Board

Kathleen O'Donovan joined the Public Interest Committee on 1 July 2019. Kathleen is currently the Chair of the Invensys Pension Scheme and Founder Partner of Bird & Co Board & Executive Mentoring Ltd. Formerly she has held Non-Executive Director roles at ARM Holdings Plc, D S Smith plc, Prudential plc, O2 Plc, Great Portland Estates plc, EMI Group plc and the Bank of England. Kathleen was also co-Chair of International Rescue Committee UK, a charity supporting conflict zone refugees. Kathleen trained as a Chartered Accountant and her previous roles include CFO of BTR plc/ Invensys plc and Partner at EY.

Appendix 4: Board and Committees of the Board membership

Continued



Changes close to, or after, the year end

As a result of the merger between KPMG UK and KPMG Switzerland, a new governance structure has been established with effect from 1 October 2024.

For details of the UK governance structure, including roles and responsibilities, please visit the [leadership pages](#) of our website.

During the year, there were additional changes to the composition of our Board and Board Committees.

These changes were as follows:

Changes effective 1 January 2024:

- Suvro Dutta resigned from the Audit Executive with effect from 1 January 2024.
- Fleur Nieboer was appointed a member of the Audit Executive on 1 January 2024.
- Karl Edge was appointed a member of the Executive Committee on 1 January 2024.

Changes effective 7 January 2024:

- Donald Wilson stepped down as a member of the Operations Executive.
- Sameer Chadha stepped down as a member of the Operations Executive.

Changes effective 1 June 2024:

- Karim Haji was appointed a member of the Executive Committee on 1 June 2024.

Changes effective from 22 July 2024:

- Chris Hearld resigned from the AUdit Executive on 22 July 2024.

Changes effective 31 July 2024:

- John Hallsworth retired from the UK Board, Nominations Committee and People Committee on 31 July 2024.

Changes effective close of business 30 September 2024 are as follows:

- Anthony Lobo retired from the UK Board, Audit Committee, Risk Committee and Audit Board on 30 September 2024.

Changes effective 1 October 2024:

- Melissa's tenure came to an end on 30 September 2024 and she stepped down from the UK Board, Nominations Committee and Risk Committee with effect from 1 October 2024.

Appendix 5: UK Public Interest Entities

In compliance with Article 13 (f) of EU Regulation 537/2014 as amended by The Statutory Auditors and Third Country Auditors (Amendment) (EU Exit) Regulations 2019, we have included the list of UK Public Interest Entities (as defined by the FRC Ethical Standard) for which we carried out statutory audits in the financial year ended 30 September 2024.

Please note:

- Engagements where we resigned, but signed an audit opinion in the year to 30 September 2024, have been included. These are indicated with an *.
- New audit engagements, which have not been signed between October 2023 – September 2024, have been excluded.

Abrdn Life and Pension Limited*	Abrdn Plc	Cardiff University
Amtrust Europe Limited*	Abrdn UK Smaller Companies Growth Trust Plc	Chemring Group Plc
Ascential Plc*	Affinity Sutton Capital Markets PLC	Citibank UK Limited
BRISTOL & WEST PLC*	Aioi Nissay Dowa Insurance UK Limited	Clarion Funding Plc
EMH Treasury Plc*	Alphawave IP Group Plc	Compass Group Plc
Forester Life Limited*	AO World Plc	Connect M77/GSO Plc
Invesco Asia Trust plc*	Aspire Defence Finance Plc	CONNECT PLUS (M25) ISSUER PLC
Ladbrokes Group Finance plc*	Aster Treasury Plc	Consort Healthcare (Birmingham) Funding Plc
Markel International Insurance Company Limited*	Auto Trader Group PLC	Croda International Plc
Motors Insurance Company Limited*	Avon Technologies Plc	Currys Plc
National Casualty Company of America Limited*	AXA INSURANCE UK PLC	DFS Furniture Plc
Network International Holdings Plc*	AXA PPP HEALTHCARE LTD	DIRECT LINE INSURANCE GROUP PLC
Pendragon Plc (Pinewood Technologies Group plc)	B & C E Insurance Limited	DUNCAN FUNDING 2022-1 PLC
Pets at Home Group PLC*	B.A.T. INTERNATIONAL FINANCE P.L.C.	Fidelis Underwriting Limited
Rothschild & Co Continuation Finance PLC*	Balfour Beatty plc	Games Workshop Group Plc
Royal & Sun Alliance Insurance Limited*	Baltic Classifieds Group Plc	Gatwick Airport Finance plc
Royal & Sun Alliance Reinsurance Ltd*	Bank Of Ireland (UK) PLC	Gracechurch Card Programme Funding PLC
RSA Insurance Group Limited*	Barclays Bank PLC	Grainger Plc
Schroder UK Mid Cap Fund Plc*	Barclays Bank UK Plc	Haleon Plc
Smith & Nephew plc*	Barclays PLC	Hampshire Trust Bank Plc
The Marine Insurance Company Limited*	Big Yellow Group Plc	Heylo Housing Secured Bond Plc
Workspace Group plc*	BPHA Finance plc	HICL Infrastructure Plc
Zegona Communications PLC*	Breedon Group plc	Hollywood Bowl Group Plc
3i Group Plc	British American Tobacco Plc	Howden Joinery Group Plc
ABC International Bank plc	British Telecommunications plc	INTERNATIONAL DISTRIBUTIONS SERVICES PLC
Abrdn European Logistics Income Plc	BT Group plc	IP Group Plc
Abrdn New India Investment Trust Plc	Cambridgeshire Housing Capital Plc	James Fisher and Sons Plc
	Capita Plc	John Lewis Plc

Appendix 5: UK Public Interest Entities

Continued

John Wood Group PLC	Pavillion Mortgages 2022-1 PLC	Starling Bank Limited
Lancashire Insurance Company (UK) Limited	Peabody Capital No 2 Plc	TCHG Capital Plc
Legal & General Assurance (Pensions Management) Ltd	Peabody Capital Plc	Telecom Plus Plc
Legal & General Finance Plc	Pension Insurance Corporation plc	The Bank of New York Mellon (International) Limited
Legal & General Group Plc	Pod Point Group Holdings plc	The Berkeley Group Holdings plc
Legal And General Assurance Society Limited	Polar Capital Technology Trust Plc	TR Property Investment Trust Plc
Liontrust Asset Management Plc	Reckitt Benckiser Group plc	Travis Perkins plc
London & Quadrant Housing Trust	Reckitt Benckiser Treasury Services Plc	Tritax Eurobox Plc
Luceco PLC	Redrow PLC	TSB Bank Plc
Midland Heart Capital plc	Ricardo PLC	TSB Banking Group Plc
Mitchells & Butlers plc	Rio Tinto plc	Unilever PLC
Moneysupermarket.com Group PLC	Road Management Services (A13) plc	United Utilities Group plc
Motability Operations Group Plc	Rotork plc	United Utilities PLC
Myriad Capital PLC	Saga Plc	United Utilities Water Finance Plc
National Counties Building Society	Sanctuary Capital Plc	United Utilities Water Limited
Newday Funding Master Issuer Plc	Sanctuary Housing Association	Utilico Emerging Markets Trust Plc
NewDay Partnership Funding 2020-1 Plc	Scottish Power UK Plc	Vitality Health Limited
NewDay Partnership Master Issuer PLC	Senior PLC	Wesleyan Bank Limited
Odyssean Investment Trust plc	Serco Group plc	Wheatley Group Capital plc
Orbit Capital plc	Severfield Plc	Wickes Group Plc
Paragon Bank PLC	Shawbrook Bank Limited	
Paragon Banking Group Plc	SMBC Bank International PLC	
PARAGON MORTGAGES (NO. 27) PLC	Smiths Group plc	
Paragon Mortgages (No.12) Plc	Sovereign Housing Capital plc	
Paragon Mortgages (No.25) Plc	SP Distribution PLC	
Paragon Mortgages (No.26) Plc	SP Manweb plc	
PARAGON MORTGAGES (NO.28) PLC	SP Transmission PLC	
Paragon Treasury Plc	SSP Group Plc	

Appendix 6: UK Major Local Audits listing

Confirmation

In accordance with the Local Auditors (Transparency) Regulations 2020, we confirm that all engagement leads are competent to undertake local audit work and staff working on such assignments are public sector specialists and Key Audit Partners.

Deep technical expertise and knowledge

Our Quarterly Improvement Network Quarterly Connect (QIN-QC) audit training programme within the Public Sector audit practice supports the development of technical expertise and knowledge within our audit practice. These mandatory in-person training days include audit and accounting technical training, public sector specific training and risk courses – such as training on the use of wider auditor powers and value for money assessments with NHS and local government audits – in-year technical updates and technical briefings, lunch and learns (including a programme on NHS and local government specific topics), core audit skills and fundamental sector knowledge.

Our national Public Sector team undertakes tailored and targeted technical accounting training sessions to ensure that they are sufficiently trained to undertake these types of audit engagements.

In addition, all our audit teams on these engagements have an individual RI appointed from our national pool of 'Key Audit Partner' (KAP) accredited RIs. All our engagement leaders for local audit work have been accredited as Key Audit Partners by the ICAEW.

On an annual basis, all KAPs are awarded a Certificate of Accreditation, with specific Public Sector Accreditation, on the basis of their experience and training specifically related to their knowledge, experience and hours of public sector defined audit work. For Public Sector team KAPs, this is directly linked to the local audits in their portfolio, which is in turn is directly linked to our Learning Management System, where each KAP can assign themselves the relevant training without the need to consult. Once a KAP has completed the relevant training, the Public Sector Accreditation element is automatically marked 'green' in the audited entity on which they're working.

All auditors, including KAPs, are expected to join annual KPMG Audit University (KAU) training. This year's training was based around a case study with participants working in teams, mirroring a real audit team structure. The content included risk assessment, controls, sampling, journals testing and fraud, and introduced new technology in the audit in the form of AI transaction scoring.

The mandatory learning curriculum for all KAPs includes quarterly updates focusing on performing an effective quality audit with different topic areas included as relevant, which again for KAPs includes specific public sector related topics.

An Audit Quality and Risk Workshop is delivered twice a year for engagement leaders (including all KAPs) and focuses on key messages driven by internal and external regulatory (AQR etc) and monitoring findings, with all KAPs having

to also complete training relevant to their grade and role, which includes public sector specific training.

In order to meet the International Standard on Quality Management (ISQM1) requirements KPMG has established globally consistent quality objectives, quality risks and responses, with the objective, applied equally to the Public Sector audit practice, of this centralised approach being to drive consistency, robustness and accountability of responses for processes implemented across our global organisation. Where necessary, we have supplemented the requirements with additional quality objectives, quality risks and responses identified through a risk assessment process, such as those specific to the Public Sector audit practice.

Refer to the [Audit Quality](#) section for further information on:

- KPMG Audit University, and the role this plays in helping colleagues develop deep technical expertise and knowledge
- Our AQR results, which include a minimum of one local audit each year
- Our QAD results, which include a selection of local audits as part of the NHSI's review remit of our health audits.
- Our QPR process, which include local audits within its scope.

Major Local Audits listing

The organisations below are those which:

- constitute a 'major local audit' for the purposes of Regulation 12 of The Local Audit (Professional Qualifications and Major Local Audit) Regulations 2014 (SI 2014/1627); and
- for which KPMG LLP signed an audit report on its annual financial statements during year ended 30 September 2024.

NHS Dorset ICB

NHS West Yorkshire ICB

NHS Devon ICB

University Hospitals Leicester NHS Trust

Nottingham University Hospitals NHS Trust

The Royal Wolverhampton Hospitals NHS Trust

University Hospitals Coventry and Warwickshire NHS Trust

NHS Derby & Derbyshire ICB

Shrewsbury and Telford Hospital NHS Trust

NHS Lancashire and South Cumbria ICB

London Ambulance Service NHS Trust

NHS Frimley ICB

NHS North East London ICB

NHS Surrey Heartlands ICB

NHS South Yorkshire ICB

NHS Mid and South Essex ICB

NHS North Central London ICB

London North West Healthcare NHS Trust

NHS Nottingham And Nottinghamshire ICB

Appendix 7: Financial information

Under Article 13.2 of the EU Audit Regulation (subsequently incorporated into UK Law) we are required to disclose certain financial information in respect of statutory audit work.

The information below showing the relative importance of statutory audit work is extracted from KPMG UK's financial reporting systems for the year ended 30 September 2024.

Transparency Reporting requirements

	2024 £m	2023 £m
Statutory audits and directly related services for entities we audit:		
UK public interest entities and their subsidiaries (see Appendix 1)	318	260
Major local audits (see Appendix 2)	4	3
Other entities	556	577
Statutory audit and directly related services for audit clients		
Non-audit services provided to entities we audit	95	96
Total revenues from entities we audit	973	936
Non-audit services to entities we do not audit	2,017	2,024
Total UK firm revenue	2,990	2,960

In line with Principle 20 of the FRC's Operational Separation Principles, a separate profit and loss account for the audit practice is presented below, prepared on a basis consistent with KPMG UK group's published statutory financial statements.

Operational Separation public reporting of Audit & Assurance financials

	2024 £m	2023 £m
Gross revenue		
Expenses and disbursements on assignments	(47)	(50)
Revenue attributable to the audit practice		
Staff costs	(377)	(362)
Other operating charges	(368)	(354)
Operating profit	127	113
Finance expense	(4)	(3)
UK Audit practice profit	123	110

Appendix 7: Financial information

Continued

Revenue, staff costs and operating profit for the separate Audit practice profit and loss account above are consistent with those measures presented in the KPMG UK group's published financial statements:

1. Revenue is stated gross of expenses and disbursements on assignments, consistent with the presentation of revenue in the KPMG UK group's published financial statements. Revenue for the Audit practice reflects all statutory audit work together with revenue from the following services:
 - Permitted audit practice services to entities we audit; and
 - Permitted audit practice and non-audit services to non-audited entities.
2. Staff costs relate to those staff based within the audit practice. No cost is included for the remuneration of members of KPMG LLP. This is consistent with the treatment of partners' remuneration in the KPMG UK group's published financial statements.

3. Other operating charges reflect the following:
 - Costs directly attributable to the Audit practice in delivery of services, based on information in our internal management accounts;
 - Allocations of indirect costs including overheads such as property and IT. These costs are allocated on a consumption basis where practical or on an equitable alternate basis, primarily headcount or revenue;
 - Charges for the work performed by individual specialists from outside the ring-fenced audit practice contributing to the delivery of assignments of the audit practice, net of charges for the work performed by audit practice specialists in delivery of assignments by other areas of the KPMG UK group. These charges are priced on an arm's length basis.



Appendix 8: UK Board

Role

The main governance body of the firm is the Board, chaired by Bina Mehta. The Board is responsible for the growth and long-term prosperity of the firm, ensuring it stays true to its purpose and vision. It provides oversight of the organisation, approves the firm's strategy and oversees its implementation by the Executive Committee, by monitoring performance against the business plan. The Board is the ultimate governance body overseeing the consistent provision by the Audit practice of high-quality audits. The Board also ensures that there is a satisfactory process for managing cultural, ethical, risk and reputational matters affecting the firm including compliance with laws, other regulations relevant to our business and KPMG International's policies.³¹

As at 30 September 2024, our UK Board was made up of 8 members:

- The Chair
- The Senior Elected Member³²
- The Chief Executive
- Three additional Elected Board Members, who are elected by the Partners³²

— One Nominated Board Member, who is nominated by the Chair (under the new Terms of Reference of the UK Board, this Member will be referred to as an Elected Member)

— An additional Executive Board Member, who is nominated by the Chief Executive.

The Elected and Nominated Board Members, including the Senior Elected Board Member, are drawn from the partnership with a sufficient mix of competency, experience and independence of the day-to-day running of the firm. The Elected Members serve three-year terms, extendable up to a maximum of five years, to maintain relevant skills and breadth of experience. Nominated members of the Board are appointed following their nomination by the Chair and approval by Partner vote, for a fixed term.

The Board is attended by the Chair of the Public Interest Committee, the Chair of the Audit Board and by other Independent Non-Executives (INEs).

Members



Bina Mehta (Chair)
UK Chair
KPMG in the UK



Jon Holt
Group Chief Executive
KPMG in the UK



Melissa Geiger
Senior Elected Member
KPMG in the UK



Annette Barker
Elected Member
KPMG in the UK



Anthony Lobo
Elected Member
KPMG in the UK



Jonathan Downer
Nominated Board Member
KPMG in the UK



Chris Heardl
Group Chief Operating and Financial Officer
KPMG in the UK



Louise Kirby
Elected Member
KPMG in the UK

% Female Board members

50%

Sep 24

% Ethnic minority Board members

25%

Sep 24

% Lower socio-economic background Board members

13%

Sep 24

³¹ From 1 October 2024, the Group Board is now the main governance body for the Group, however, the UK firm continues to have a UK Board. For details of the new Group governance structure, including membership and associated terms of reference, please visit our [website](#).

³² The Senior Elected Member (Melissa Geiger) reached the end of her term on 30 September 2024 and stepped down with effect from 1 October 2024. One other Elected Board Member (Anthony Lobo) retired from the Partnership on 30 September 2024.

Appendix 8: UK Board

Continued

Report on the Board's activities during the year

For the year ended 30 September 2024

Areas of oversight

This year, the Board's primary focus has been around the merger between Switzerland and the UK. The Board provided oversight by evaluating the benefits, financial implications and risk profile of the prospective merger, and ensuring the merger's alignment with long-term strategic objectives.

Further activities of the Board are detailed below:

- Executing the firm's business plan, aligning immediate decisions with long-term strategic goals and aspirations, while maintaining Operational Separation.
- Ongoing focus on audit quality with frequent updates from the Head of Audit.
- Oversight of the firm's system of quality management.
- Monitoring the firm's Enterprise-Wide Risk Management Framework (ERM) and the consideration of the effectiveness of internal controls.
- Monitoring the effectiveness of the ERM, including the commission of an emerging risk assessment to consider emerging and principal risks.
- Oversight of the firm's ethical health and ethical programmes.
- Monitoring the firm's people programmes as set out in the Culture Ambition.
- Oversight of the firm's Inclusion, Diversity and Equity (IDE) strategy.

- Monitoring the firm's financial performance and investment outcomes against the investment framework, which included detailed examinations of its capabilities, operational strength, and both inorganic and organic investments.
- Monitoring the effectiveness of the firm's ESG governance approach (delegated to Board committees).
- Approval of material decisions in the firm's response to regulatory matters.

Looking ahead to FY25

The Board's priorities include:

- Monitoring and remediation action as appropriate to the system of quality management, Banking Audit Quality Sustainability (BAQS), Single Quality Plan (SQP) code of practice and business resilience.
- Overseeing risk management actions and mitigations relevant to the UK Firm under the ERM.
- Maintaining financial resilience through regular and robust financial reporting with an emphasis on operational resilience.
- Oversight of the firm's People Strategy (which includes learning, workforce planning and succession) in its multi-disciplinary model with a short-, medium- and long-term focus.
- Continued monitoring of the firm's progress against culture and ethics goals, through the Culture Dashboard, Ethics Programme and Ethical Health Plan.

- Achieving our inclusion and diversity targets.
- Overseeing the embeddedness of the recommendations from the Institute of Business Ethics.
- Overseeing the embeddedness of the Partner Balance Scorecard in the UK firm.
- Achievement of the UK executive committee goals, including delivering sustainable and profitable growth.
- Continued improvement in Audit Quality in the UK firm.

In numbers

- The Board comprises eight members: the Chair, Chief Executive, Chief Operating and Financial Officer, the Senior Elected Member, one Nominated Member and four other Elected Members. All Independent Non-Executives and the Chair of the Audit Board are invited to attend the Board as observers.
- During the year, two Elected Board Members retired.
- During the reporting period, the Board held 12 formal meetings.
- Since 30 September 2024, one further Elected Board Member retired, and the Senior Elected Board Member reached the end of their tenure.



Appendix 8: UK Board

Continued

Board Charter and Board Terms of Reference

For the year ended 30 September 2024

Board Charter

1 Role of the Board

The role of the Board is to oversee the stewardship, accountability and leadership of the firm providing clear sighted counsel on the firm's strategic direction and alignment to its Vision, Values and Purpose.

In doing so the Board seeks to balance the interests of the various stakeholders to whom it is responsible in order for the firm to have a successful and sustainable long-term future.

The focus of the Board is:

- Ensuring that the firm has an appropriate strategy that is consistent with the public interest (having due regard to the views of the firm's Public Interest Committee) and overseeing delivery of the strategy by the Executive Committee;
- Overseeing good financial, quality management and cultural governance (including setting the tone from the top on culture and ethics); and
- Holding the Chief Executive and Executive Committee to account for execution of the strategy.

2 Stewardship and Accountability

The Board is:

- i) Accountable to the partner group as a whole, as the Members of the LLP.
- ii) Responsible for holding both the Chief Executive and the Executive Committee accountable for the execution of the strategy through the approved Business Plan (including the achievement of their respective annual goals).

The Board's accountability (on behalf of partners) is for effective execution of the strategy and more broadly for the proper running of the firm by the Executive Committee. This is achieved by providing clear support and constructive challenge to help the Chief Executive and the Executive Committee to perform effectively. The Board oversees performance and delivery against the Business Plan, financial growth and stability, risk management, quality management, people strategies and cultural governance.

The Board ensures that there is effective two-way communication on its role, work and remit with partners and other stakeholders so this accountability is clearly understood and is seen in action.

3 Ethical Leadership

Members of the Board are exemplars of the firm's Values, acting with integrity, fairness and in the interest of the firm. They maintain the firm's focus on building inclusion, enrichment and trust for the benefit of people, stakeholders and communities.

The Board collectively embodies and promotes ethical leadership by asking the right questions and challenging to ensure that poor behaviour is sanctioned. The Board oversees cultural governance including setting the tone from the top on conduct and ethics.

4 Our Stakeholders

In carrying out its role the Board seeks to balance the interests of various stakeholders to whom it is responsible so the firm has a successful and sustainable long-term future, true to its Purpose and Values.

The LLP's (and therefore the Board's) key stakeholders are as follows, together with the responsibilities that the Board carries out in relation to them³³:

Clients and Investors (in audited entities) – present and future

- i) With relentless focus on quality and commitment, maintains and enhances our reputation for the quality and integrity of our advice for clients and assurance for investors.
- ii) Ensures a consistent standard of excellence that brings us market

reputation and success. Supports the combining of the best thinking from across our geographies, solutions and sectors to bring clients our collective insights and innovative ideas.

Partners – present and future

- i) Protects, grows, invests and equitably distributes the financial value of the firm for its partners, consistent with our Purpose and Values.
- ii) Engages and communicates with partners so their issues are understood, addressed and they are kept informed.

Colleagues – past, present and future

Oversees the management of colleagues by:

- i) Supporting and championing the creation of an environment where people bring their whole selves to work in the knowledge they are treated and rewarded fairly.
- ii) Being exemplars of the firm's commitment to attract a diverse and talented workforce and providing opportunities for colleagues to grow their capabilities and develop their careers.
- iii) Recognising that our alumni are aligned to our firm's reputation and success throughout their careers.
- iv) Understanding that many prospective and serving colleagues are inspired by the purpose and values of responsible business, not financial success alone.

³³ N.B. Some responsibilities, such as effective and regular communication/engagement apply to many or all stakeholder groups and in the interests of brevity are not repeated.

Appendix 8: UK Board

Continued

Board Charter and Board Terms of Reference For the year ended 30 September 2024

Regulators and Government

- i) Sets and monitors high standards for quality, independence and responsible business that meet or exceed regulatory requirements and further our vision of having the public trust us.
- ii) Supports the firm's position as a leading advocate in the development of relevant policy and regulation.
- iii) Recognises the opportunity and responsibility that our convening power affords us – our footprint as a responsible business and voice in policy development for the good of business and society as a whole (aligned to our Purpose).

Global Network

- i) Ensures there is effective senior leadership linkage with the Global Board and influence and input into the global agenda (both at Board and Executive Committee level).
- ii) Ensures Board decision making is aligned and connected to the global strategy.
- iii) Ensures that the LLP's obligations and commitments as a member firm of the KPMG global network are fulfilled and that matters that could impact detrimentally on the global network are escalated and communicated appropriately.

Executive Committee

- i) Gives supportive and constructive challenge to the Executive Committee in order that partners are assured that the Chief Executive and Executive Committee are delivering the agreed strategy.
- ii) Provides clarity on the respective responsibilities of the Board and Executive Committee.
- iii) Recognises that the Executive Committee is responsible for delivering the firm's output, distinctive from the Board's oversight role.

Audit Board

- i) Supports the Audit Board in its purpose to oversee the Audit practice, its delivery of Audit Quality and the interaction of the Audit practice with the rest of the firm.
- ii) Provides clarity on the respective responsibilities of the Board and Audit Board.

Wider Community

- i) Ensures that the firm's strategy, actions and decisions uphold public interest obligations, build public trust and reinforce our reputation as a responsible business that reflects and supports the community and profession in which we operate.
- ii) Demonstrates its commitment to the public interest through pursuit of the purpose of the Audit Firm Governance

Code and regular dialogue with the firm's Independent Non-Executives and Audit Non-Executives.

- iii) Seeks to uphold the firm as a beacon for successful, sustainable, ethical business.
- iv) Leads fair and trusted business relationships with all suppliers, contractors, audited entities and clients.

5 How the Board works

In providing constructive challenge to the Chief Executive and Executive Committee, the Board examines issues and solutions through different lenses to confirm that decisions made are in the long-term interests of the firm.

In order to be consistent and aligned to the firm's strategic goals, the Board balances economic value with risk and reward; Values and value; and competing stakeholder interests. It then applies judgement to balance these factors in the particular circumstances of each issue.

Economic value, public interest and risk and reward

The Board considers the public interest, and the economic and strategic value of each option, within an appetite for risk (including risk to reputation) that the Board approves, using available data and knowledge of the competitive markets in which the firm operates in order to decide if the risks and rewards justify proceeding. The Board takes account of any relevant legal or regulatory requirements.

Values and value

The Board takes the ethical and reputational aspects of each issue under consideration and challenges whether the proposed course of action is in accordance with the Values and standards of the firm. This is the most important of the three lenses: the Board does not pursue commercial value at the expense of our Values. It is prepared to accept negative consequences if it's the right thing to do.

Balancing competing interests

The decisions that the Board takes have different, sometimes competing or even opposite, consequences for different stakeholders. As examples, a cost to today's partners may yield value to the partners of the future; increasing the services we offer may benefit clients but concern regulators; changing the partner reward model may advantage certain partners compared with others. The Board seeks to identify the impact of its decisions on all stakeholders and balance their interests impartially and equitably.

Appendix 8: UK Board

Continued

Board Charter and Board Terms of Reference

For the year ended 30 September 2024

6 Terms of Reference

Composition and membership of the Board

6.1 The Board shall comprise:

- i) The Chair (who may be one of the six Elected Board Members);
- ii) The Chief Executive;
- iii) Up to two Executive members nominated by the Chief Executive;
- iv) Six Members, who are Members, elected by the Individual Members as Elected Board Members; and
- v) Up to two Members, who are Members, nominated by the Chair and then approved by the Individual Members as "Nominated Board Members".

6.2 The cumulative number of Elected Board Members and Nominated Board Members of the Board shall always make up the majority of the Board. There shall at all times be a majority of Qualified Individuals (under the applicable auditor qualifications regulations) as members of the Board, as set out in the LLP Agreement; of which at least one of the Elected Board Members or Nominated Board Members shall be practising auditors.

6.3 All of the Elected Board Members, and in any event at least half of the Board, shall be Individual Members of the LLP who do not have significant management responsibilities within the firm; those with "significant management responsibilities"

includes members of the Executive Committee and their direct reports.

6.4 The Elected Board Members are elected by the Individual Members of the LLP and shall be appointed for a three-year term, with the option for this to be renewed for an additional two-year period subject to Board approval. The maximum term that an Elected Board Member can serve on the Board is five years unless otherwise determined by the approval of the Board.

6.5 As determined by the Elected Board Members, in consultation with the Chair, one of the Elected Board Members will be appointed as the Senior Elected Board Member.

6.6 The Chair may nominate up to two Nominated Board Members to the Board and the other committees established by the Board, to strengthen the Board's skills and ensure appropriate representation of the LLP and to bring the client voice into the boardroom, at their discretion subject to approval by the Members. Nominated Board Members shall be appointed for a two- or three-year term, subject to approval by the Members, with the option for this to be renewed for an additional two- or three-year term, to a maximum five years in aggregate, subject to Board approval.

6.7 The number of Elected Board Members shall be six and will always be more than the aggregate number of Nominated Board Members and nominated Executive Members.

6.8 Independent Non-Executive Members of the Public Interest Committee and the Chair of the Audit Board may, at the discretion of the Chair, attend any and all Board meetings as attendees (including annual Board strategy meetings and Board away days).

6.9 The Board will meet a minimum of six times a year and the Chair, or the Senior Elected Board Member in the Chair's absence, may call further meetings at other times in the year as considered appropriate.

6.10 Other members of the Executive Committee, Individual Members or colleagues may be invited to attend Board meetings, as required by the Chair.

7 Chair of the Board

7.1 The Chair shall be a Partner of the firm.

7.2 The Chair of the Board is elected by the Individual Members of the LLP and shall be appointed for a three-year term, with the option for this to be renewed for an additional two-year period subject to Board approval. The maximum term that a Chair can serve on the Board is five years unless otherwise determined by the approval of the Board.

7.3 If the Chair is not present or so chooses then the Senior Elected Board Member (and in their absence, another Elected Board Member selected for this purpose by the Board) shall chair the meeting of the Board (including agreeing agendas and papers and managing the Board).

7.4 In the event that the Chair or chair of the meeting of the Board declares a conflict of interest, or the Board decides that such individual has a conflict of interest, then the Senior Elected Board Member shall chair the meeting of the Board or the relevant part of the meeting of the Board.

8 Quorum

8.1 The quorum for any meeting of the Board shall be two-thirds of its membership, which must include a majority of Nominated and Elected Board Members present, at the time of the meeting.

8.2 The members of the Board may participate in a meeting of the Board from separate locations by means of conference technology or other communication equipment which allows those participating to hear each other and be heard, and shall be entitled to vote or be counted in the quorum accordingly.

9 Board Procedures

Except as otherwise stated in these terms of reference, the Board shall determine its own procedures.

Appendix 8: UK Board

Continued

Board Charter and Board Terms of Reference For the year ended 30 September 2024

10 Board Resolutions

10.1 The Board shall reach decisions by a simple majority of voting on the issues in question. If the numbers of votes for and against a certain proposal are equal, the Chair, or the Senior Elected Board Member if they are chairing the meeting, has the casting vote.³⁴

10.2 Any resolution evidenced in writing or by electronic (including email) or voice recognition means, by such member or members of the Board as would have been necessary to pass such resolution had all members of the Board been present at a meeting to consider such resolution, shall be valid and effective as if it had been passed at a meeting of the Board duly convened and held, provided that notice and details of the proposed resolution have been given in advance to each member of the Board.

10.3 Executive members on the Board (including the Chief Executive) will not be able to attend certain supervisory sessions of the Board. In addition, unless otherwise determined by the Chair and a majority of the Elected and Nominated members of the Board, Executive members of the Board will not be able to be included in discussions or have a vote in relation to:

(i) significant governance changes; (ii) Board Committee terms of reference and delegated authorities (including the Executive Committee); (iii) review of the Executive Committee, its Executive sub-groups and its members (including the Chief Executive) and their performance (collectively or individually); and (iv) any other session as determined by the Chair or a majority of the Elected and Nominated members of the Board.

11 Conflicts of interest of individual Board members

If a member of the Board finds themselves with a conflict of interest, they shall immediately disclose this to the Chair and Senior Elected Board Member and where appropriate recuse themselves from any deliberations or votes of the Board concerning the relevant subject matter.

12 Board Objectives

The Board will agree objectives annually that are specific and measurable and will regularly review its progress in meeting and delivering those objectives.

13 Board Reserved Matters

Specific matters that are reserved for the Board (and cannot be delegated) are the following:

13.1 Values, Culture and Policies

13.1.1 Approval of the LLP's Purpose and Values.

13.1.2 Monitoring of the firm's culture to include a regular review of the effectiveness of the firm's systems (including the Code of Conduct) for the promotion and embedding of an appropriate culture aligned with the firm's Purpose and Values, that: (a) supports the consistent performance of high-quality engagements, the firm's role in serving the public interest and the long-term sustainability of the firm; and (b) encourages people to consult, challenge, contribute ideas and share problems, knowledge and experience.

13.1.3 Approval of key policies related to people, risk, culture, values, independence and ethics.

13.1.4 Approval of Inclusion and Diversity targets (developed and proposed by the Executive Committee and reviewed by the People Committee).

13.2 Strategy and management

13.2.1 Approval of the LLP's strategy (developed jointly with the Executive Committee and proposed by the Executive Committee³⁵ following consultation with the

Public Interest Committee) and long-term objectives, and oversight of delivery of the strategy. When approving changes to the LLP strategy, the Board shall have due regard to the views of the Public Interest Committee.

13.2.2 Approval of the annual budget and UK Business Plan, (developed and proposed by the Executive Committee), including an assessment that the firm has sufficient human, intellectual and technological resources for the next three years to support audit quality and the effectiveness of controls and processes required by ISQM1.

13.2.3 Oversight of performance of the annual budget and UK Business Plan.

13.2.4 Approval and oversight of the firm's Environment, Social and Governance(ESG) strategy.

13.2.5 Any decision to change the operating model or any decision to cease to operate all or any material part of the LLP's business (developed and proposed by the Executive Committee, or in the case of the Audit business, developed by the Audit Executive and recommended by the Audit Board).

34 In the event the chair of such meeting is not a Qualified Individual, the Chair shall, before the commencement of the relevant Board meeting, nominate in writing another member of the Board who is a Qualified Individual to have the casting vote.

35 It is noted that the Audit strategy is developed by the Audit Executive and must be approved by the Audit Board prior to approval by the Board.

Appendix 8: UK Board

Continued

Board Charter and Board Terms of Reference

For the year ended 30 September 2024

<p>13.2.6 Any major decision in relation to the 'future of the profession' (developed and proposed by the Executive Committee and taking account of recommendations of the Audit Board).</p>	<p>13.3.4 Approval of any such matters likely to have a significant material impact on KPMG from a financial, operational, strategic or reputational perspective, subject to 13.3.5.</p>	<p>13.4 Structure and capital</p> <ul style="list-style-type: none"> 13.4.1 Approval of changes relating to the LLP's capital structure. 13.4.2 Approval of material changes in the LLP's capital and liquidity positions. 13.4.3 Any changes to the LLP's status as a Limited Liability Partnership or major changes to the corporate structure. 	<p>13.5.7 any significant changes in accounting policies or practices (on the recommendation of the Audit Committee);</p>
<p>13.3 Investments</p>	<p>13.3.5 Approvals under this paragraph 13.3 shall be subject to the following:</p> <ul style="list-style-type: none"> i) approvals of transactions or investments by the Board for financial amounts or value shall, unless otherwise specified, be deemed to include additional amounts or value that arise through unanticipated overspend up to the greater of £10m or 10% and are approved by the Executive Committee; ii) the Board may call in for scrutiny, review and modification any transactions or investments previously approved by the Board or the Executive Committee, in relation to which concerns have been identified (or evidenced in the management information provided on the portfolio of investments); and iii) approvals of transactions or investments by the Board shall have due regard to any views of the Public Interest Committee and (where they relate to the Audit business) the Audit Board. 	<p>13.5 Financial and non-financial reporting and controls</p> <p>In connection with year-end matters, approval of:</p> <ul style="list-style-type: none"> 13.5.1 the statement of internal control and independence and compliance with the Audit Firm Governance Code (on recommendation from the Audit Committee); 13.5.2 the going concern statement (on recommendation from the Audit Committee); 13.5.3 the profit distribution; 13.5.4 the letter of representation to the external auditors; 13.5.5 the Transparency Report (developed and proposed by the Executive Committee); 13.5.6 the Financial Statements with a recommendation to the LLP Members for their approval by way of an Ordinary Majority; 	<p>13.5.8 the removal of the external auditors (on the recommendation of the Audit Committee); and</p>
<p>13.3.1 Approval of an investment framework (developed and proposed by the Executive Committee and, where relevant to Audit, by the Audit Executive, having regard to any recommendations of the Audit Board).</p>	<p>13.3.2 Approval of inorganic investments such as acquisitions and joint venture investments and business disposals with a transaction or enterprise value in excess of £20 million (including value of any debt assumed and deferred consideration; and transaction costs), subject to 13.3.5.</p>	<p>13.3.3 Approval of organic and ordinary course investments (including multi-year commitments) with cash or FTE commitments in excess of £40 million (including business builds, technology investments and property leases), subject to 13.3.5.</p>	<p>13.5.9 other environmental, social and governance (ESG) related public reporting, as may be required by law and regulation, save to the extent within the delegated authorities of the Executive.</p>
			<p>13.6 Internal controls</p> <p>Approval of any Board level certifications (including in the annual Transparency Report) as to the effectiveness of sound risk management and internal control systems, on a firm-wide basis, to manage cultural, ethical, risk and reputation matters and to ensure compliance with laws, regulations and global practices and policies relevant to the LLP's business.</p>
			<p>13.7 Contracts and Agreements</p> <p>Approval of contracts which the Chair and Chief Executive agree are material strategically or by reason of size or public interest (taking into consideration, where relevant, the Audit risk appetite framework overseen by the Audit Board and the views of the Public Interest Committee).</p>

Appendix 8: UK Board

Continued

Board Charter and Board Terms of Reference

For the year ended 30 September 2024

13.8 Board and other appointments

- 13.8.1 Approval of changes to the structure, size and composition of the Board (including on recommendation from the Nominations Committee³⁶).

- 13.8.2 Appointments to the Board to fill a casual vacancy (on the recommendation of the Nominations Committee).

- 13.8.3 Appointments of Independent Non-Executives and Audit Non-Executives (on the recommendation of the Nominations Committee).

13.9 Remuneration

- 13.9.1 The establishment or cessation of KPMG pension schemes and material changes to the rules, funding or management arrangements of any such pension schemes.

- 13.9.2 Approval of Equity Partner promotions (developed and proposed by the Executive Committee and recommended by the People Committee).

- 13.9.3 Approval of the design of remuneration policies and principles, and partner remuneration policies, principles and framework (developed and proposed by

the Executive Committee, recommended by the People Committee and (as concerns Audit Partners only) the Audit Board).

13.10 Delegation of authority

- 13.10.1 Approval of the establishment of Board Committees and the Audit Board and their terms of reference.
- 13.10.2 Determining and approving the responsibilities of the Chair and the Chief Executive (which should be in writing).
- 13.10.3 Approval of the terms of reference for all Board Committees, the Audit Board and the Executive Committee and determining which matters are delegated to such committees and boards and which matters are reserved for the Board.
- 13.10.4 Holding the relevant Board Committee, Audit Board or the Executive Committee to account for anything delegated to them.

13.11 Risk Management

- 13.11.1 Approval of KPMG's Risk Appetite and Statement annually (on the recommendation of the Risk Committee, and as regards Audit Risk Appetite, the Audit Board) which will include setting high level parameters such as key principles,

key metrics, expectations as to concentrations (whether in terms of revenue income, to single or connected client, sector or type of engagement) and will consider matters from a strategic perspective but also reflect upon operational, financial, regulatory and conduct/reputational risk type matters (including whether certain services may or may not be appropriate for certain sectors or clients).

- 13.11.2 In respect to material matters related to regulation and regulatory supervision being considered by the Board, the Board will consult with, and have due regard to the views of, the Public Interest Committee and the Audit Board.

- 13.11.3 Approval of KPMG's Risk Management Framework (on the recommendation of the Risk Committee).

- 13.11.4 Prosecution, commencement, defence or settlement of, or appeal against the outcome of, actual or potential litigation, alternative dispute resolution mechanisms or regulatory proceedings that are material (i.e. involving or likely to involve sums of over £20 million), likely to attract significant public interest or other material

contentious matters that are generally not in the ordinary course of business of KPMG). The Board can from time to time direct what level of materiality shall apply for escalation to it and/or its approval to defend or settle regulatory or other dispute matters.

13.12 Other

- 13.12.1 Approval of the overall levels of insurance for KPMG including directors' and officers' liability insurance and indemnification of directors.

- 13.12.2 Any decision likely to have a significant material impact on KPMG from a financial, operational, strategic or reputational perspective.

- 13.12.3 Any proposed changes to the LLP Agreement or any other matter materially affecting the rights and obligations of the Members as a whole.

- 13.12.4 Approval of any relevant deeds, documents or other matters as required by the LLP Agreement.

³⁶ Formerly known as the Nomination Committee.

Appendix 8: UK Board

Continued

Board Charter and Board Terms of Reference For the year ended 30 September 2024

14 Operational Separation

The Board shall provide oversight on steps taken by the firm to implement Operational Separation including specific focus on improving audit market resilience by ensuring that no material, structural cross-subsidy persists between the Audit practice and the rest of the firm.

15 Governance

- 15.1 The Board shall ensure that any matters relating to the purpose of the Audit Firm Governance Code and the firm's role in respecting that purpose are given due consideration.
- 15.2 The Board shall conduct an annual self-assessment of its activities under these Terms of Reference and triennially shall conduct an externally facilitated Board evaluation. The Chair, supported by the Board Secretary, shall be responsible for acting on the results of the self-assessment and embedding the recommendations from the externally facilitated evaluation.

16 Matters delegated by the Board to the Executive Committee

Subject to the matters reserved for the Board and in addition to the matters that the Executive Committee develops and proposes for Board approval set out in section 13 above, the Board delegates, while maintaining oversight, the following to the Executive Committee:

- 16.1 formation and execution of the UK Business Plan underpinning the firm's strategic goals, operational excellence, financial performance and fulfilment of regulatory, compliance and legal requirements;
- 16.2 implementation of both the LLP's Strategy as approved by the Board; and (through the Audit Executive) the Audit Strategy as approved by the Board;
- 16.3 implementation of Operation Separation of the Audit Practice in accordance with the applicable regulatory principles;
- 16.4 monitoring and maintaining operating and financial performance against budget;
- 16.5 prioritisation and allocation of resources;
- 16.6 managing the risk profile of the firm within the Board approved Risk Appetite and Risk Management Framework (including major claims and reputational issues);
- 16.7 managing the System of Quality Management and associated internal controls and processes of the firm in accordance with ISQM1 and Global policies and procedures;
- 16.8 achieving the Board defined goals in relation to (i) strategic goals; (ii) operational excellence, (iii) financial performance and (iv) regulatory, compliance and legal; and
- 16.9 crisis management;
- 16.10 Audit Quality and performance;

- 16.11 significant matters related to KPMG International and the Global network; and

- 16.12 managing the day-to-day activities of LLP Group.

The Executive Committee will bring the above matters to the Board if they feel it is necessary or appropriate.

17 Notice of meetings

The Board meeting agenda and papers in relation to the Board meeting shall, ideally, be circulated at least five working days prior to the Board meeting.

18 Documentation, Communication and Reporting

- 18.1 The Chief Executive, together with the Executive Committee Members, shall report to the Board at each Board meeting on relevant matters within the Executive Committee's responsibility delegated by the Board (including but not limited to reporting on the implementation of achieving the Board approved four pillars – (i) strategic goals; (ii) operational excellence; (iii) financial performance; and (iv) regulatory, compliance and legal commercial outcomes which will also include an attestation against each taking into consideration the Board approved Risk Appetite and Risk Management Framework).
- 18.2 Minutes of the Board are to be kept and filed by the Board Secretary and held at the registered office of the LLP.

Appendix 9: Audit Committee

Role

The Audit Committee oversees financial reporting and control matters on behalf of the Board. This includes reviewing internal controls, overseeing the relationship with our statutory auditors (including recommending their appointment, removal and remuneration as well as monitoring their independence and effectiveness) and reviewing the effectiveness of the firm's Internal Audit function.

As at 1 October 2024, the Audit Committee was combined with the Risk Committee and is chaired by Jonathan Downer. Annette Barker remains a member of the UK Audit and Risk Committee and Bina Mehta is an alternate member. This new membership was effective from 1 October 2024.

Members



Anthony Lobo³⁷
Elected Member
KPMG in the UK



Jonathan Downer
Nominated Board
Member
KPMG in the UK



Annette Barker
Elected Member
KPMG in the UK

³⁷ Anthony Lobo retired from the Partnership on 30 September 2024.

Appendix 9: Audit Committee

Continued

Report on the Audit Committee's activities during the year

For the year ended 30 September 2024

Areas of oversight

During the year, the Audit Committee focused on the following key priorities:

- Monitoring of the extent to which the System of Quality Management (SoQM) processes and controls are embedded.
- Enhancing transparency and accountability, ensuring strict adherence to regulatory requirements, and overseeing compliance efforts.
- Ongoing supervision and assessment of KPMG's internal audit function, including an evaluation of internal processes and controls. This entailed receiving updates from the Head of Internal Audit on the status of ongoing audits and approving the Annual Internal Audit plan to ensure it addresses key business risks.
- Maintaining a solid relationship with the external auditor, with a particular focus on audit quality and integrity and an assessment of the external auditor's performance, independence and objectivity.
- Promoting ESG practices, disclosure and reporting to meet sustainability goals and stakeholder expectations. This included overseeing the independent assurance process and approving ESG disclosures in the Annual Report, including those within the Planet Impact Report, Partner Diversity Report, and Community Impact Report.
- Enhancing governance and transparency reporting to align with evolving standards and expectations, receiving periodic updates on the Operational Separation process.

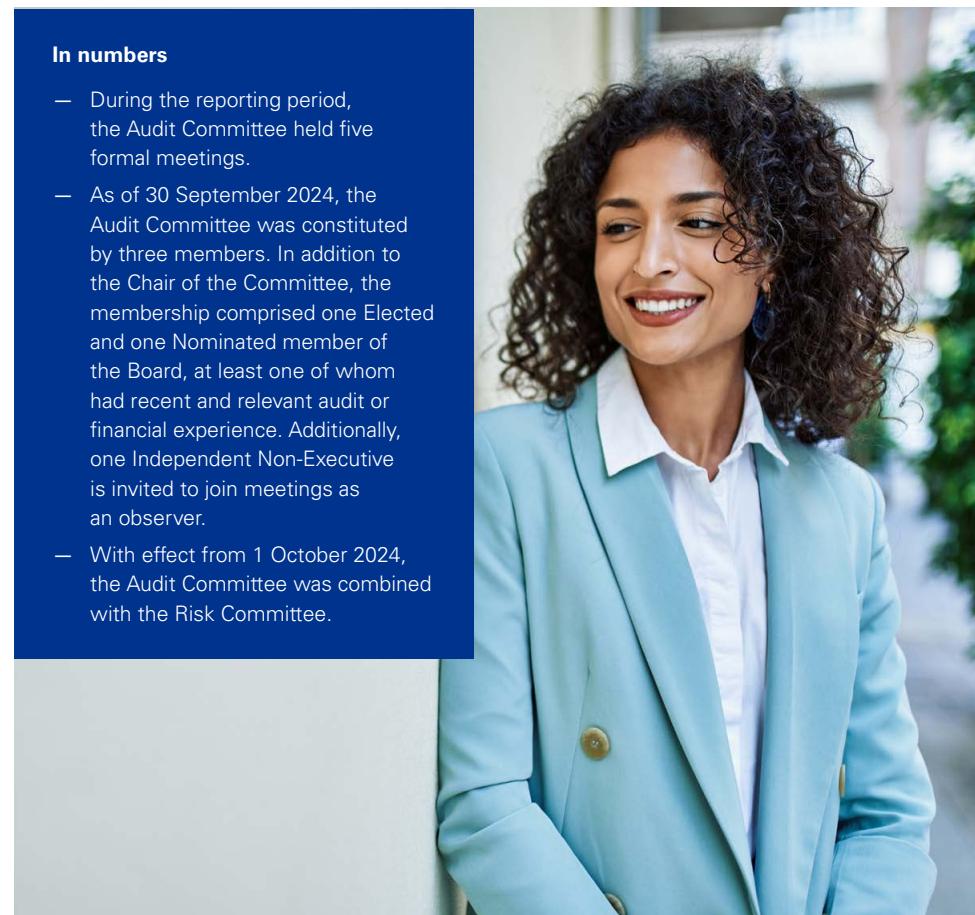
Looking ahead to FY25

The combined UK Audit and Risk Committee's primary objectives are as follows:

- Providing guidance to the UK Board on the firm's risk appetite and tolerance, monitoring current risk exposures, and ensuring alignment with regulatory trends and the Group's risk management policies.
- Continuing to monitor the extent to which the System of Quality Management (SoQM) processes and controls are embedded.
- Monitoring the firm's Ethics and independence including the Ombudsman's reports on Speak Up.
- Oversight of the adoption and effectiveness of the Enterprise-Wide Risk Management Framework, including systems for identifying, reporting and managing emerging risks.
- Ensuring the accuracy and integrity of financial statements, reviewing significant reporting issues, and challenging accounting policies and judgments.
- Oversight of the performance, and independence, of the external auditor, and ensuring effective coordination between external and internal audits.
- Monitoring the Internal Audit annual plan, ensuring that the function has adequate resources and access to effectively fulfil its mandate.

In numbers

- During the reporting period, the Audit Committee held five formal meetings.
- As of 30 September 2024, the Audit Committee was constituted by three members. In addition to the Chair of the Committee, the membership comprised one Elected and one Nominated member of the Board, at least one of whom had recent and relevant audit or financial experience. Additionally, one Independent Non-Executive is invited to join meetings as an observer.
- With effect from 1 October 2024, the Audit Committee was combined with the Risk Committee.



Appendix 9: Audit Committee

Continued

Audit Committee – Terms of Reference

For the year ended 30 September 2024

1 Purpose

The purpose of the Audit Committee ("the Committee") is to:

- 1.1 assist the Board of KPMG LLP ("the Board") in its oversight of the integrity of the LLP's financial reporting, including supporting the Board in meeting its responsibilities regarding financial statements, the financial reporting systems, internal controls and treasury matters;
- 1.2 assist the Board in fulfilling its responsibilities relating to all relevant matters pertaining to the system of quality management and engagement quality (including their contribution to the firm's role in serving the public interest), as more particularly set out in the Appendix to these Terms of Reference;
- 1.3 monitor, on behalf of the Board, the effectiveness and objectivity of internal and external auditors; and
- 1.4 assess, on behalf of the Board, the effectiveness of the firm's key controls framework across the following areas:
 - Conflicts, ethics and independence
 - Financial and financial crime prevention
 - Operational risk
 - Compliance
 - System of Quality Management.

2 Authority

- 2.1 The Committee is a committee of the Board from which it derives its authority and to which it regularly reports.
- 2.2 The Committee has delegated authority from the Board in respect of the functions and powers set out in these Terms of Reference.
- 2.3 The Committee has authority to investigate any matter within its Terms of Reference and to obtain such information as it may require from any partner, officer or employee.
- 2.4 In addition, the Committee may, from time to time, be delegated authority from the Board for oversight of specified strategic, cultural or transformational projects led by the Executive Committee.

3 Constitution

- 3.1 Chairperson
 - 3.1.1 The Chair of the Committee will be either an Elected or Nominated Board member appointed by the Chair and ratified by the Board.
 - 3.1.2 In the absence of the Chair of the Committee or an appointed deputy, the remaining members present shall elect one of themselves to chair the meeting.
 - 3.1.3 In the event that the Chair of the Committee declares a conflict of interest, or the Committee decides

that such individual has a conflict of interest, then the Committee shall appoint an alternative member of the Committee to chair the relevant meeting or the relevant part of the meeting.

3.2 Membership

- 3.2.1 In addition to the Chair of the Committee the membership comprises two Elected or Nominated Board members including at least one member with significant recent and relevant audit financial experience and knowledge of applicable audit quality standards.
- 3.2.2 Additional members of the Committee shall be appointed by the Board on the recommendation of the Chair in consultation with the Senior Elected Board Member.

- 3.2.3 Members can be co-opted onto the Committee as the need arises to help fulfil the duties and obligations of the Committee. These appointments shall be made by the Board on the recommendation of the Chair of the Committee.

- 3.2.4 Elected or Nominated Board Members shall comprise a majority of the Committee at all times.

- 3.2.5 Any or all members may be removed from the Committee at any time before the end of their term by the Board.

3.3 Duration of appointments

Unless otherwise determined by the Board, the duration of appointments of Elected and Nominated members of the Committee and of co-opted members shall be for a period of up to three years which may be extended by the Board for an additional period of two years.

3.4 Secretary

- 3.4.1 The Board Secretary or their nominee shall act as Secretary to the Committee and attend all meetings.

- 3.4.2 The Secretary shall record the proceedings and decisions of the Committee meetings and the minutes shall be circulated to all members and attendees, as appropriate, taking into account any conflicts of interest that may exist.

4 Proceedings of Meetings

4.1 Frequency of Meetings

- 4.1.1 The Committee shall meet at least four times a year and otherwise as required.

- 4.1.2 Meetings of the Committee may be called by the Chair of the Committee at any time to consider any matters falling within these Terms of Reference.

Appendix 9: Audit Committee

Continued

Audit Committee – Terms of Reference

For the year ended 30 September 2024

4.2 Quorum

- 4.2.1 Any two members of the Committee may form a quorum.
- 4.2.2 A duly convened meeting of the Committee at which a quorum is present shall be competent to exercise all or any of the authorities, powers and discretions vested in or exercisable by the Committee.
- 4.2.3 In the event of difficulty in forming a quorum, Elected or Nominated Board members who are not members of the Committee may be co-opted as members for individual meetings.
- 4.2.4 The members of the Committee may participate in a meeting of the Committee from separate locations by means of conference technology or other communication equipment which allows those participating to hear each other and be heard and shall be entitled to vote and/or be counted in the quorum accordingly.

4.3 Attendees

- 4.3.1 Only the members of the Committee, other Elected or Nominated members of the Board and Independent Non-Executives have the right to attend Committee meetings.

4.3.2 In addition the following will be expected to attend Committee meetings on a regular basis:

- a) Chief Operating and Financial Officer
- b) Chief Risk Officer
- c) General Counsel (or delegate)
- d) Head of Internal Audit
- e) External Audit representative
- f) Board Secretary (or delegate).

4.3.3 Any partner, officer or employee of the LLP may attend at the invitation of the Chair of the Committee and they may collectively or individually be requested to withdraw from meetings of the Committee if required to do so by the Chair of the Committee.

4.3.4 The Committee will meet with the external auditor and internal auditor at least once a year without management present.

4.4 Conflicts of Interest

If a member of the Committee has a conflict of interest, they shall immediately disclose this to the Chair of the Committee and where appropriate recuse themselves from any deliberations or votes of the Committee concerning the relevant subject matter.

4.5 Resolutions

4.5.1 The Committee shall reach decisions by a simple majority of those voting on the issue in question. If the number of votes for and against a certain proposal is equal, the Committee Chair shall have a casting vote.

4.5.2 Any resolution evidenced in writing or by electronic or voice recognition means, by such member or members of the Committee as would have been necessary to pass such resolution had all members of the Committee been present at a meeting to consider such resolution, shall be valid and effective as if it had been passed at a meeting of the Committee duly convened and held, provided that notice and details of the proposed resolution have been given in advance to each member of the Committee.

5 Responsibilities

5.1 Financial and non-financial reporting

The Committee shall monitor the integrity of the financial statements of the LLP, including its annual report relating to its financial performance, and review and report to the Board on significant financial reporting issues and judgements which those statements contain having regard to

matters communicated to it by the auditor. In particular, the Committee shall review and challenge where necessary:

- 5.1.1 the application of significant accounting policies and any changes to them;
- 5.1.2 the methods used to account for significant or unusual transactions where different approaches are possible;
- 5.1.3 whether the firm has adopted appropriate accounting policies and made appropriate estimates and judgements, taking into account the external auditor's views on the financial statements;
- 5.1.4 whether the firm has respected applicable regulatory requirements with respect to corporate reporting, including the financial reporting related to the Audit practice; and
- 5.1.5 all material information presented with the financial statements, including the Transparency Report and any additional information or report on the firm's activities and performance with regard to Environmental, Social and Governance ("ESG") matters.

Appendix 9: Audit Committee

Continued

Audit Committee – Terms of Reference

For the year ended 30 September 2024

5.2 Capital Adequacy and Treasury Matters	5.3 External Audit and Assurance	5.3.5 Agree a policy on the employment of former employees of the auditor, taking into account the Ethical Standard, including the guidance on the rotation of the audit partner and staff; monitor the level of fees paid to the auditor compared to the overall fee income of the firm, office and partner and assess these in the context of relevant legal, professional and regulatory requirements, guidance and the Ethical Standard;	5.3.8 Approve the nature, scope and plan of the audit and assurance review with the external auditor, including the factors that could affect audit or assurance quality, before the audit or assurance process commences;
5.2.1 Prior to consideration and approval by the Board, the Committee shall review significant changes to general banking and treasury operations (in excess of the Executive Committee's delegated limits) of the LLP, or any of its subsidiaries, such as: <ul style="list-style-type: none"> — proposals to raise finance; — arrangements and agreements to meet funding requirements; — entering into any type of document or arrangement to create security of any nature or collateral arrangement for borrowing or treasury management arrangements (including being held on trust for any lender or other finance provider); — borrowing money or issuing any type of debt instrument; — entering into any interest rate hedging or foreign exchange hedging transaction including, without limitation, any rate/exchange cap transaction or swap transaction or other hedging or derivative transaction; and — any parent company guarantee. 	The Committee shall: <ul style="list-style-type: none"> 5.3.1 Consider the appointment, re-appointment or removal of the external auditor and assurance provider (with respect to the firm's ESG reporting) and oversee the selection process for a new auditor and/or ESG assurance provider where required;³⁸ 5.3.2 If an external auditor resigns, investigate the issues leading to this and decide whether any action is required; 5.3.3 Assess annually the external auditor's independence and objectivity taking into account relevant UK law, regulation, the Ethical Standard and other professional requirements and the firm's relationship with the auditor as a whole, including any threats to the auditor's independence and the safeguards applied to mitigate those threats including the provision of non-audit services; 5.3.4 Satisfy itself that there are no relationships between the auditor and the firm (other than in the ordinary course of business) which could adversely affect the auditor's independence and objectivity; 	5.3.6 Annually challenge and assess the performance, independence and objectivity of the external auditor, discussing issues they raise in the audit and monitoring the effectiveness of the audit and assurance process and reviewing their quality control procedures and steps taken to respond to regulatory, professional and other changes;	5.3.9 Review the findings of the audit and assurance review with the external auditor. This shall include, but not be limited to, the following: <ul style="list-style-type: none"> — a discussion of any major issues which arose during the audit or assurance review; — the auditor's explanation of how the risks to audit or assurance quality were addressed; — key accounting and audit or assurance judgements; — the auditor's view of their interactions with senior management; and — levels of errors identified during the audit or assurance review.
		5.3.7 Approve the terms of engagement in respect of the statutory audit, developing and implementing policy on engaging the external auditor for non-audit services and approving in advance the fees for both audit (ensuring that the level of fees is appropriate to enable an effective and high-quality audit to be conducted) and non-audit services;	5.3.10 Review management representation letters in relation to financial reporting requested by the external auditor prior to signature by the Executives;
			5.3.11 Review any external assurance report on Environmental, Social and Governance (ESG) information for publication as part of the Annual Report;

³⁸ References to the external auditor in these Terms of Reference shall be deemed to apply to an assurance provider *mutatis mutandis*, in circumstances where the auditor is not the ESG assurance provider.

Appendix 9: Audit Committee

Continued

Audit Committee – Terms of Reference

For the year ended 30 September 2024

<p>5.3.12 Monitor the effectiveness of the relationship between the external and internal auditors;</p> <p>5.3.13 Review management's response to findings of the audit and the resolution of any disagreements between management and the external auditor regarding financial reporting; and</p> <p>5.3.14 Meet regularly with the external auditor (including at least once a year without management being present), to discuss the auditor's remit and any issues arising from the audit.</p>	<p>5.4 Internal Controls</p> <p>The Committee shall:</p> <p>5.4.1 Keep under review the firm's internal financial controls systems that identify, assess, manage and monitor financial risks, and other internal control and risk management systems (seeking assurance from relevant Board Committees as appropriate);</p> <p>5.4.2 Oversee the effectiveness of the firm's Systems of Quality Management ("SoQM") and processes relevant to engagement quality and the SoQM framework,</p>	<p>5.4.3 Make policy recommendations to the Board with respect to all matters relevant to engagement quality, the SoQM and their contribution to the firm's role in serving the public interest;</p> <p>5.4.4 Carry out its activities with a view to ensuring that the firm is fully aligned and compliant with applicable law and regulation and KPMG International's requirements as regards to engagement quality, the SoQM, and their contribution to the firm's role in serving the public interest;</p> <p>5.4.5 Review and recommend for Board approval the statements to be included in the Annual Report concerning internal control, risk management³⁹ and the going concern statement;</p> <p>5.4.6 Consider the major findings of any relevant internal investigations into control weaknesses, fraud or misconduct and management's response (in the absence of management where necessary); and</p>	<p>5.4.7 Review the firm's control framework across key control areas including:</p> <ul style="list-style-type: none"> — Conflicts, ethics and independence — Financial and financial crime prevention — Operational risk — Compliance — System of Quality Management and its linkage to the Enterprise-Wide Risk Management Framework and assurance planning. <p>5.5 Internal Audit</p> <p>The Head of Internal Audit and the firm's Internal Audit function shall report to the Committee. The Committee shall:</p> <p>5.5.1 Approve the remuneration, appointment or termination of the appointment of the Head of Internal Audit;</p> <p>5.5.2 Review and approve the role and mandate of Internal Audit, monitor and review the effectiveness of its work, and annually approve the Internal Audit Charter ensuring that it is appropriate for the current needs of the organisation;</p>	<p>5.5.3 Review and approve the annual internal audit plan to ensure that it is aligned to the key risks of the business and receive regular reports on work carried out;</p> <p>5.5.4 Ensure Internal Audit has unrestricted scope, the necessary resources and access to information to enable it to fulfil its mandate; ensure there is open communication between different functions and that the Internal Audit function evaluates the effectiveness of these functions as part of its internal audit plan; and ensure that the Internal Audit function is equipped to perform in accordance with appropriate professional standards for internal auditors;</p> <p>5.5.5 Ensure the Head of Internal Audit has direct access to the Chair and to the Chair of the Committee, providing independence from the executive and accountability to the Committee;</p>
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³⁹ Subject to confirmation of the Risk Committee.

Appendix 9: Audit Committee

Continued

Audit Committee – Terms of Reference

For the year ended 30 September 2024

5.5.6 Carry out an annual assessment of the effectiveness of the internal audit function and as part of this assessment:

- Meet with the Head of Internal Audit without the presence of management to discuss the effectiveness of the function;
- Review and assess the internal audit work plan;
- Receive a report on the results of Internal Audit's work;
- Determine whether it is satisfied that the quality, experience and expertise of Internal Audit is appropriate for the business; and
- Review the actions taken by management to implement the recommendations of Internal Audit and to support the effective working of the function;

5.5.7 Monitor and assess the role of the Internal Audit function in the overall context of the firm's system of controls and the work of compliance, finance and the external auditor.

6 Reporting

6.1 Minutes of each Committee meeting will be disclosed at the next meeting of the Board.

6.2 The Chair of the Committee shall report to the Board on its proceedings after each meeting on all matters within its duties and responsibilities.

6.3 The Committee shall compile a report of the work of the Committee in discharging its responsibilities for inclusion in the Transparency Report, including; an explanation of how the Committee has addressed the effectiveness of the external audit process; the significant issues that the Committee considered in relation to the financial statements; and how these issues were addressed, having regard to matters communicated to it by the auditor.

6.4 The Chair of the Committee shall report to the Risk Committee, People Committee and the Audit Board after each meeting on relevant matters within its duties and responsibilities.

6.5 The Committee shall work and liaise as necessary with other Committees of the Board and with the Audit Board.

7 Governance and Resources

7.1 The Committee shall, via the Secretary to the Committee, make available to new members of the Committee a suitable induction process and, for existing members, ongoing training as discussed and agreed by the Committee.

7.2 The Committee shall conduct an annual self-assessment of its activities under these Terms of Reference and report any conclusions and recommendations to the Board and, as part of this assessment, shall consider whether or not it receives adequate and appropriate support in fulfilment of its role and whether or not its annual plan of work is manageable.

7.3 The Committee shall in its decision making, give due regard to any relevant legal or regulatory requirements, and associated best practice guidance, as well as to the risk and reputation implications of its decisions (liaising where relevant with other Committees).

7.4 The Committee shall have access to sufficient resources in order to carry out its duties and have the power to engage independent counsel and other professional advisers and to invite them to attend meetings.

8 Terms of Reference

The Committee shall annually review its Terms of Reference and may recommend to the Board any amendments to its Terms of Reference.

Appendix 9: Audit Committee

Continued

Audit Committee – Terms of Reference

For the year ended 30 September 2024

Appendix

Responsibilities with respect to the oversight of engagement quality and the system of quality management.

1 Governance and leadership

1.1 Consider whether the firm's culture promotes a commitment to quality, including recognising and reinforcing the importance of professional ethics, values and attitudes throughout the firm and emphasising the responsibility of all personnel for quality relating to the performance of engagements or activities within the system of quality management ("SoQM").

1.2 Consider whether the firm's strategic priorities (including financial and operational priorities) and strategic investments (undertaken and to be undertaken) demonstrate a commitment to quality and the firm's role in serving the public interest by consistently performing quality engagements.

1.3 Consider whether the firm's governance and leadership quality objectives include:

1.3.1 Establishing policies or procedures for periodic performance evaluations of the individual(s) assigned ultimate responsibility and accountability and, if appropriate, the individual(s) assigned operational responsibility, for the firm's SoQM; and

1.3.2 Establishing policies or procedures for dealing with complaints and allegations about the commitment to quality of the firm or its personnel, including clearly defining channels within the firm that enable reporting by personnel or external parties to appropriate individual(s) without fear of reprisal and enabling the investigation and resolution of the complaints and allegations.

1.4 Consider, as appropriate:

- 1.4.1 How the firm fulfils its responsibilities to comply with the laws, regulations and professional standards that relate to the governance and leadership of the firm;
- 1.4.2 How the firm leadership is responsible and accountable for the SoQM and engagement quality;
- 1.4.3 How the firm has adopted and implemented KPMG International policies relevant to the SoQM and engagement quality.

1.5 Consider how the firm has established structures, reporting lines, and appropriate authorities and responsibilities, including assigning executive and operational responsibilities for the SoQM.

1.6 Consider whether the individual(s) assigned executive and operational responsibility for the SoQM have:

1.6.1 the appropriate experience and knowledge and sufficient time to fulfil their assigned responsibility;

1.6.2 an understanding of their assigned responsibilities and accountability for such responsibilities;

1.6.3 a direct line of communication to the individual(s) assigned ultimate responsibility and accountability for the SoQM; and

1.6.4 demonstrated a commitment to quality through their actions and behaviours.

1.7 In relation to performance management, consider, as appropriate (and in liaison with other Board Committees and the Audit Board):

1.7.1 the performance of the firm and in particular the Audit practice in terms of engagement quality goals, financial performance, capacity and resource utilisation, partner and colleague satisfaction and adequacy of training and development;

1.7.2 policies related to remuneration of members of the Audit Executive, Audit partners and directors to acknowledge wider contributions to quality;

1.7.3 the annual performance evaluation of the members of the Audit Executive, Audit partners and directors relating to engagement quality and the SoQM;

1.7.4 policies related to acknowledgement of wider contributions to quality compensation of professionals in the Audit practice; and

1.7.5 the firm's Audit practice's succession planning process.

2 Risk assessment process

2.1 Consider, as appropriate (and in liaison with the Risk Committee and the Audit Board):

2.1.1 whether the firm has an adequate process of identifying risks arising from the activities of the Audit practice;

2.1.2 whether the firm has appropriate plans in place to mitigate the identified risks and in particular reviewing the criteria for categorisation of risk levels to individual engagements; and

2.1.3 whether the firm has controls and processes in place in respect of engagement quality, including audit risk management, and specifically (but not exclusively) in respect of engagements that are subject to external/regulatory annual inspection processes.

Appendix 9: Audit Committee

Continued

Audit Committee – Terms of Reference

For the year ended 30 September 2024

3 Relevant ethical requirements

3.1 Consider whether the firm has established quality objectives that address the fulfilment of responsibilities in accordance with relevant ethical requirements, including applicable principles of professional ethics.

4 Acceptance and continuance of client relationships and specific engagements

4.1 Consider (in liaison with the Risk Committee and, as regards audit engagements, the Audit Board) the firm's appetite for accepting and retaining higher risk engagements.

4.2 Consider (in liaison with the Risk Committee) how the firm's process for client acceptance and continuance supports the firm's engagement quality objectives.

4.3 Discuss (under legal privilege where relevant and subject to any applicable legal or confidentiality constraints, and jointly as appropriate with the Risk Committee and/or Audit Board) with the General Counsel, the Chief Risk Officer and where appropriate the Ethics Partner and/or Head of Professional Conduct, the status of the following matters where they have a significance to the Committee's responsibilities in these Terms of Reference:

4.3.1 engagements or engagement clients that are under case examination, review or investigation by a relevant global or statutory regulator that relate to engagement quality;

4.3.2 engagements or engagement clients that are in litigation or in an investigation that relates to engagement quality; and

4.3.3 whistle-blower matters in relation to engagement quality, the system of quality management and associated matters within the scope of the Terms of Reference.

5 Engagement performance

5.1 Consider (in liaison as appropriate with other Board Committees and the Audit Board) how the firm and, in particular, the Audit practice apply the Global definition of "Audit Quality", including identification of the drivers that contribute to engagement quality, and how this is measured by the firm and by external stakeholders.

6 Resources

6.1 Consider (in liaison with the People Committee and, as regards the Audit practice, the Audit Board) whether the firm has in place professional development and human resource processes that support engagement quality objectives in accordance with the professional standards and the firm's SoQM.

6.2 Consider (in liaison with the People Committee and, as regards the Audit practice, the Audit Board) whether the firm has the ability to hire, develop and retain a diverse group of personnel, including partners, who have the competence and

capabilities to consistently perform quality engagements or carry out responsibilities in relation to the operation of the firm's SoQM.

6.3 Consider (in liaison with the Audit Board and People Committee) whether the firm has the capacity to manage the portfolio of audited entities and maintain engagement quality, including the required capacity and resource from non-Audit Capabilities, as appropriate.

7 Information and communication

7.1 Consider (in liaison with the Risk Committee, the Public Interest Committee and the Audit Board) the firm's relationship with prudential and securities regulators, including the regulators' existing and potential future trends and issues of concern.

7.2 Maintain availability (in coordination with the Chair, the Chief Executive and Independent Non-Executives) to meet external stakeholders such as the firm's regulators and provide a link to those responsible for oversight of engagement quality and the SoQM.

7.3 Consider, as appropriate, material communications (including the firm's annual Transparency Report) made or to be made relating to the SoQM and engagement quality, in particular the process the relevant members of the Executive Committee undertook to understand the completeness, accuracy and consideration of findings to be included in the communication.

8 Monitoring and remediation process

8.1 Consider (in liaison with the Audit Board) the annual planning for internal engagement quality performance reviews and inspections by external regulators within the Audit practice.

8.2 Consider (in liaison with the Audit Board) how the firm holds the Audit Executive accountable for the monitoring and oversight of root cause analysis processes and the implementation and execution of continuous improvement plans related to the SoQM and engagement quality.

8.3 Consider (in liaison with the Audit Board) reports that outline:

8.3.1 the performance of the firm's Audit practice;

8.3.2 the activities of the Head of Audit and the Head of Audit Quality; and

8.3.3 the monitoring of key audit quality indicators including the targets set for the audit quality indicators and the performance against the targets (including, at minimum, those outlined in the Global Quality & Risk Management Manual policy 13.5.1).

8.4 Consider the overall results of the firm's monitoring of the SoQM and engagement quality, and the implementation of effective remedial action based on findings from internal and external reviews of the SoQM and engagement quality.

Appendix 10: Nominations Committee

Role

The Nominations Committee was established as a Committee of the Board in May 2022.

The Nominations Committee assists the Board in ensuring that the size and composition of the Board is appropriate to support executive oversight of the firm and oversees the processes for appointment of the Chair, Chief Executive and Board members, as well as the independent non-executive members of the Audit Board and Public Interest Committee.

The Nominations Committee was dissolved as of 1 October 2024. A new governance body, the Group Nominations Committee has been created which now oversees and recommends appointments to the UK Board. The UK Board approves the appointment of Independent Non-Executives and Audit Non-Executives based on the recommendations of the Chair of the UK Board. Where the appointment concerns the Chair of the Public Interest Committee, this appointment will be in consultation with the Group Board Chair.

Members



Bina Mehta
UK Chair
KPMG in the UK



Melissa Geiger⁴⁰
Senior Elected Member
KPMG in the UK



John Hallsworth⁴¹
Elected Member
KPMG in the UK

⁴⁰ Melissa's tenure came to an end on 30 September 2024 and she stepped down from the UK Board and UK Board Committees with effect from 1 October 2024.

⁴¹ John was a member of the Nominations Committee until he retired on 31 July 2024.

Appendix 10: Nominations Committee

Continued

Report on the Nomination Committee's activities during the year

For the year ended 30 September 2024

Areas of oversight

During the year the Nominations Committee focused on the following key priorities:

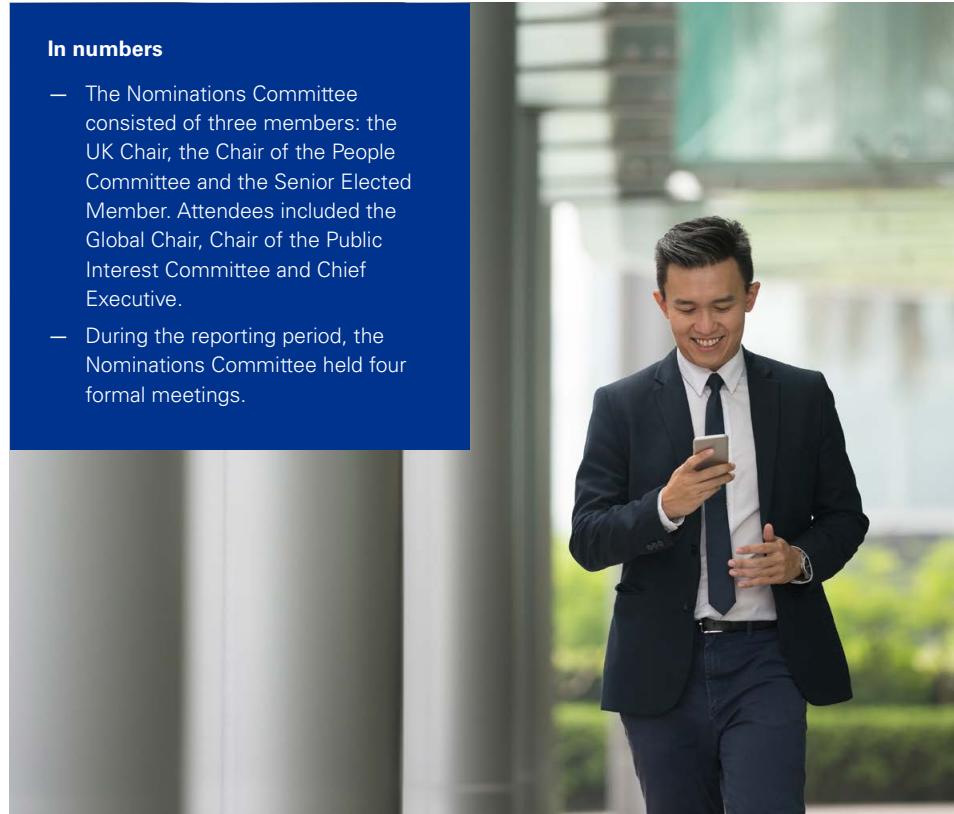
- The extension of the tenure of the Chief Executive for an additional five years ending 30 September 2029.
- Succession planning for the Independent Non-Executives.
- The extension of the tenure of two Audit Non-Executives for a further three-year period ending 30 September 2027.
- The extension of Jonathan Downer as a Nominated Member of the UK Board for an additional two-year term ending 28 February 2027.
- Succession planning and composition of the Audit Board.

Looking ahead to FY25

From 1 October 2024, the responsibilities of the UK Nominations Committee will be split between the Group Nominations Committee and the UK Board.

In numbers

- The Nominations Committee consisted of three members: the UK Chair, the Chair of the People Committee and the Senior Elected Member. Attendees included the Global Chair, Chair of the Public Interest Committee and Chief Executive.
- During the reporting period, the Nominations Committee held four formal meetings.



Appendix 10: Nominations Committee

Continued

Nominations Committee – Terms of Reference

For the year ended 30 September 2024

1 Purpose

1.1 The purpose of the Nominations Committee is to assist the Board in:

- Ensuring that the Board's size and composition are appropriate to support effective oversight of the strategic objectives and stewardship of the values of the firm; and
- Overseeing and supporting the processes for appointment of the Chair, the Chief Executive and Board Members, as well as of the independent non-executive members of the Audit Board and the Public Interest Committee, so as to ensure high-quality candidates are appointed to any such position.

2 Authority

2.1 The Nominations Committee is a Committee of the Board from which it derives its authority and to which it reports.

2.2 The Committee has delegated authority from the Board in respect of the functions and powers set out in these Terms of Reference.

3 Constitution

3.1 Chairperson

3.1.1 The Committee shall be chaired by the firm's Chair.

3.1.2 In the absence of the Chair, the Chair of the People Committee shall chair the meeting (save with

respect to matters concerning the election and appointment of the Chair, which shall be chaired by the Senior Elected Member). In the absence of such alternative, the remaining members present shall elect one of themselves to chair the meeting.

3.1.3 In the event that the Chair declares a conflict of interest, or the Committee decides that such individual has a conflict of interest, then the Committee shall appoint an alternative member of the Committee to chair the relevant meeting or the relevant part of the meeting.

3.2 Membership

3.2.1 In addition to the Chair the membership comprises:

- The Senior Elected Member
- The Chair of the People Committee.

3.2.2 Members of the Committee shall be appointed by the Board on the recommendation of the Chair in consultation with the Senior Elected Member.

3.2.3 Members can be co-opted onto the Committee as the need arises to help fulfil the duties and obligations of the Committee. These appointments shall be made by the Board on the recommendation

of the Chair (or, where relevant with regard to matters related to the appointment of the Chair, on the recommendation of the Senior Elected Member).

3.2.4 Elected and Nominated Members shall comprise a majority of the Committee at all times.

3.2.5 Any or all members may be removed from the Committee at any time by the Board.

3.3 Duration of appointments

3.3.1 Unless otherwise determined by the Board, the duration of appointments of Elected and Nominated members of the Committee and of co-opted members shall be for a period of up to three years which may be extended by the Board for an additional period of two years.

3.4 Head of Governance/Board Secretary

3.4.1 The Board Secretary or their nominee shall act as Secretary to the Committee and attend all meetings.

3.4.2 The Secretary shall record the proceedings and decisions of the Committee meetings and the minutes shall be circulated to all members and attendees, as appropriate, taking into account any conflicts of interest that may exist.

4 Proceedings of Meetings

4.1 Frequency of Meetings

4.1.1 The Committee shall meet at least once a year and otherwise as required.

4.1.2 Meetings of the Committee may be called by the Chair at any time to consider any matters falling within these Terms of Reference.

4.2 Quorum

4.2.1 Any two members of the Committee may form a quorum, provided at least one Elected Member is in attendance.

4.2.2 A duly convened meeting of the Committee at which a quorum is present shall be competent to exercise all or any of the authorities, powers and discretions vested in or exercisable by the Committee.

4.2.3 In the event of difficulty in forming a quorum, Elected or Nominated Board members who are not members of the Committee may be co-opted as members for individual meetings.

4.2.4 The members of the Committee may participate in a meeting of the Committee from separate locations by means of conference technology or other communication equipment which allows those participating to hear each other and be heard and shall be entitled to vote and/or be counted in the quorum accordingly.

Appendix 10: Nominations Committee

Continued

Nominations Committee – Terms of Reference

For the year ended 30 September 2024

4.3 Attendees

4.3.1 Only the members of the Committee and other Elected and Nominated members of the Board and Independent Non-Executives have the right to attend Committee meetings.

4.3.2 The following will be expected to attend Committee meetings on a regular basis:

- a) General Counsel
- b) Chair of the Public Interest Committee (or their delegate, who must be another Independent Non-Executive)
- c) Board Secretary (or their delegate).

4.3.3 The Chief Executive shall attend at the invitation of the Chair, in particular for consideration of appointments of Executive Members to the Board.

4.3.4 Any partner, officer or employee of the LLP may attend at the invitation of the Chair of the Committee and they may collectively or individually be requested to withdraw from meetings of the Committee if required to do so by the Chair.

5 Conflicts of Interest

If a member of the Committee has a conflict of interest, they shall immediately disclose this to the Chair and where appropriate recuse themselves from any deliberations or votes of the Committee concerning the relevant subject matter.

6 Resolutions

6.1 The Committee shall reach decisions by a simple majority of those voting on the issue in question. If the number of votes for and against a certain proposal is equal, the Chair shall have a casting vote.

6.2 Any resolution evidenced in writing or by electronic or voice recognition means, by such member or members of the Committee as would have been necessary to pass such resolution had all members of the Committee been present at a meeting to consider such resolution, shall be valid and effective as if it had been passed at a meeting of the Committee duly convened and held, provided that notice and details of the proposed resolution have been given in advance to each member of the Committee.

7 Responsibilities

The Committee shall:

7.1.1 Review on a periodic basis the size and composition of the Board (including taking into account any recommendations and observations

of triennial independent board effectiveness reviews, the Audit Firm Governance Code and any relevant regulatory reviews from time to time) and make recommendations to the Board with respect thereto;

7.1.2 Make recommendations to the Board with respect to the election processes, including candidacy criteria, for the appointments of the Chair, the Chief Executive and the Elected Members of the Board; and oversee the implementation of such Board approved processes;

7.1.3 On behalf of the Board, and in coordination with the General Counsel, shortlist one or more candidates to be submitted to the Partners in the respective election ballots for the election or re-election of the Chair, the Chief Executive and the Elected Members of the Board;

7.1.4 Review and recommend for Board approval and Partners' ratification, Nominated Members following nomination by the Chair;

7.1.5 On behalf of the Board, where a Board member steps down from their position as a Board member with only twelve months of their tenure left to run, approve the reserve Board member's tenure

with a recommendation to the Board on the appointment. In all other cases, the tenure for a reserve Board member will be three years and the Nominations Committee will recommend the reserve Board member to the Board for approval.

7.1.6 Lead the process for appointments and reappointments of INEs and ANEs and recommend them for Board approval. The Committee shall assess the time commitments for the role and, when recommending new appointments, shall take into account other demands on the INEs' and ANEs' time;

7.1.7 Review and approve, in consultation as deemed appropriate with the Chair of the PIC or, as the case may be, the Chair of the Audit Board, any other external appointments proposed to be undertaken by INEs or ANEs, taking into consideration time commitments of the role and existing role(s). This responsibility may be delegated by the Committee to the Chair of the Committee;

7.1.8 Review and recommend for Board approval the appointment of Executive Members, following nomination by the Chief Executive in consultation with the Chair;

Appendix 10: Nominations Committee

Continued

Nominations Committee – Terms of Reference

For the year ended 30 September 2024

- 7.1.9 Oversee the maintenance of an effective framework for succession planning for the Board, INEs and ANEs with reference to the relevant Skills Matrix;
- 7.1.10 Establish a framework for determining remuneration and progression matters for members of the Board which support and promote effective challenge;
- 7.1.11 Approve the process for the evaluation of Board members as proposed by the Chair and Senior Elected Member;
- 7.1.12 Annually review the induction programme and board skills training for new Board members and independent members of the Audit Board and the Public Interest Committee; and
- 7.1.13 Oversee the induction of all new Board members and ongoing training for existing Board members and independent members of the Audit Board and the Public Interest Committee.

8 Reporting

- 8.1 The Chair shall report to the Board after each meeting on matters within its duties and responsibilities.
- 8.2 The Committee shall work and liaise as necessary with other committees of the Board.

9 Governance and Resources

- 9.1 The Committee shall in its decision making give due regard to any relevant legal or regulatory requirements, and associated best practice guidance, as well as to the risk and reputation implications of its decisions (liaising where relevant with other committees).
- 9.2 In order to ensure the integrity of its decision making, where the Committee is considering any proposal related to the appointment of an individual as an Executive Member, who either:
 - i) is a member of the Committee; or
 - ii) was within the previous 12 months a member of the Committee for the purposes of the Chief Executive election, then the Committee shall co-opt at least one additional Elected Board member and one Independent Non-Executive PIC member (in a non-voting capacity) for the specific consultation and decision-making process and that discussion will be chaired by the Independent Non-Executive PIC member provided that the Independent Non-Executive PIC member does not make recommendations.

- 9.3 The Committee shall have access to sufficient resources in order to carry out its duties and have the power to engage independent counsel and other professional advisers and to invite them to attend meetings.

10 Terms of Reference

- 10.1 The Committee shall annually review its Terms of Reference and may recommend to the Board any amendments to its Terms of Reference.

Appendix 11: People Committee

Role

The People Committee provides oversight of the processes for the appointment of senior leadership positions; oversees leadership succession planning; reviews remuneration policies for Partners and senior leadership; assists the Board in its oversight of the effective execution of the People Strategy by the Executive; and oversees the effectiveness of the firm's programmes relating to culture and ethics.

The People Committee was dissolved as of the 1 October 2024 when the new governance framework came into effect. The responsibilities of the People Committee have been split between the Group Board, UK Board, Group Nominations Committee and Group Remuneration Committee.

Members



Annette Barker
Elected Member
KPMG in the UK



Louise Kirby
Elected Member
KPMG in the UK



John Hallsworth⁴²
Elected Member
KPMG in the UK

⁴² John Hallsworth was a member of the People Committee until he retired on 31 July 2024.

Appendix 11: People Committee

Continued

Report on the People Committee's activities during the year

For the year ended 30 September 2024

Areas of oversight

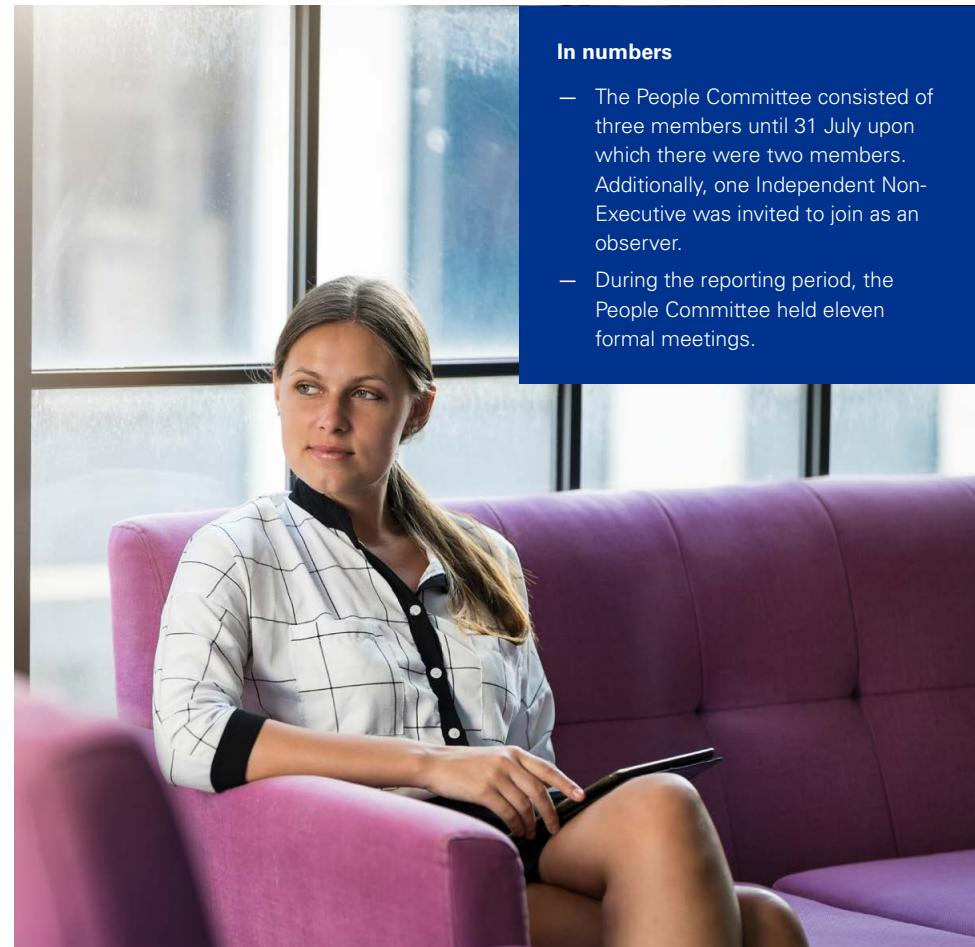
- Monitoring the Global People Survey action plan and the progress made against the key actions such as wellbeing.
- Overseeing the People Strategy and ensuring it is aligned with the firm's culture and growth plan which included the People Transformation plan.
- Monitoring diversity and inclusion targets for both partners and staff and the progress made against the short- and long-term targets.
- Monitoring the culture dashboard and the culture baseline for the merger.
- Overseeing the firm's 'Black Swan' succession plan and forward approach.
- Overseeing review of staff and partner performance.
- Monitoring partner promotions and the impact they would have on diversity. This included overseeing the Partner Balanced Scorecard.
- Overseeing the Equity Partner Pay Principles and Pay along with Salaried Partner promotions to Equity Partner.
- Overseeing the Executive Committee's goals and objectives, particularly those related to people.
- Overseeing the Chair and CEO performance, ratings and remuneration.

Looking ahead to FY25

The responsibilities of the People Committee will be split between the Group Board, UK Board, Group Remuneration Committee and Group Nominations Committee.

In numbers

- The People Committee consisted of three members until 31 July upon which there were two members. Additionally, one Independent Non-Executive was invited to join as an observer.
- During the reporting period, the People Committee held eleven formal meetings.



Appendix 11: People Committee

Continued

People Committee – Terms of Reference

For the year ended 30 September 2024

1 Purpose

The purpose of the People Committee is to:

- 1.1 Assist the Board of KPMG LLP (the "Board") through its oversight of the Executive's People Strategy.
- 1.2 On behalf of the Board ensure that policies and practices associated with the People Strategy are consistent with, and have regard to, the firm's values, Inclusion, Diversity & Equity (IDE), culture ambition and its commitment to the purpose and principles of the Audit Firm Governance Code to support its long-term sustainable success.
- 1.3 Support the Board in fulfilling its oversight responsibilities with respect to the appointment and performance of the Executive Leadership of the firm, in particular members of the Executive Committee.

2 Authority

- 2.1 The People Committee is a Committee of the Board from which it derives its authority and to which it regularly reports.
- 2.2 The Committee has delegated authority from the Board in respect of the functions and powers set out in these Terms of Reference.
- 2.3 The Committee has authority to investigate any matter within its Terms of Reference and to obtain such information as it may require from any partner, officer or employee.

2.4 In addition, the Committee may have delegated authority from the Board for oversight of specified strategic, cultural or transformational projects led by the Executive Committee.

3 Constitution

- 3.1 Chairperson
 - 3.1.1 The Chair of the Committee will be either an Elected or Nominated Board member appointed by the Chair of the Board and ratified by the Board.
 - 3.1.2 In the absence of the Chair of the Committee or an appointed deputy, the remaining members present shall elect one of themselves to chair the meeting.
 - 3.1.3 The Chair shall invite an Independent Non-Executive member of the Public Interest Committee ("PIC") to attend and chair any meeting to consider the performance evaluation and determine remuneration of the Chair of the Board or the Chief Executive, provided that the Independent Non-Executive shall not make recommendations or approve the compensation of any individual.
 - 3.1.4 In the event that the Chair of the Committee declares a conflict of interest, or the Committee decides that such individual has a conflict of

interest, then the Committee shall appoint an alternative member of the Committee to chair the relevant meeting or the relevant part of the meeting.

3.2 Membership

- 3.2.1 In addition to the Chair of the Committee the membership comprises:
 - A member of the Risk Committee
 - An additional Elected or Nominated Board Member.
- 3.2.2 Members of the Committee shall be appointed by the Board on the recommendation of the Chair in consultation with the Senior Elected Member.
- 3.2.3 Members can be co-opted onto the Committee as the need arises to help fulfil the duties and obligations of the Committee. These appointments shall be made by the Board on the recommendation of the Chair of the Committee.
- 3.2.4 Elected and Nominated Members shall comprise a majority of the Committee at all times.
- 3.2.5 Any or all members may be removed from the Committee at any time by the Board.

3.3 Duration of appointments

3.3.1 Unless otherwise determined by the Board, the duration of appointments of Elected and Nominated members of the Committee and of co-opted members shall be for a period of up to three years which may be extended by the Board for an additional period of two years.

3.4 Board Secretary

- 3.4.1 The Board Secretary or their nominee shall act as Secretary to the Committee and attend all meetings.
- 3.4.2 The Secretary shall record the proceedings and decisions of the Committee meetings and the minutes shall be circulated to all members and attendees, as appropriate, taking into account any conflicts of interest that may exist.

4 Proceedings of Meetings

- 4.1 Frequency of Meetings
 - 4.1.1 The Committee shall meet at least six times a year and otherwise as required.
 - 4.1.2 Meetings of the Committee may be called by the Chair of the Committee at any time to consider any matters falling within these Terms of Reference.

Appendix 11: People Committee

Continued

People Committee – Terms of Reference

For the year ended 30 September 2024

4.2 Quorum

- 4.2.1 Any two members of the Committee may form a quorum, provided at least one Elected Member is in attendance.
- 4.2.2 A duly convened meeting of the Committee at which a quorum is present shall be competent to exercise all or any of the authorities, powers and discretions vested in or exercisable by the Committee.
- 4.2.3 In the event of difficulty in forming a quorum, Elected or Nominated Board members who are not members of the Committee may be co-opted as members for individual meetings.
- 4.2.4 The members of the Committee may participate in a meeting of the Committee from separate locations by means of conference technology or other communication equipment which allows those participating to hear each other and be heard and shall be entitled to vote and/or be counted in the quorum accordingly.

4.3 Attendees

- 4.3.1 Only the members of the Committee and other Elected and Nominated members of the Board and Independent Non-Executives have the right to attend Committee meetings.

4.3.2 The following will be expected to attend Committee meetings on a regular basis:

- a) Chief People Officer
- b) Head of Partnership Office
- c) Ethics Partner
- d) General Counsel or their delegate
- e) Board Secretary or their delegate.

4.3.3 The Chair, Senior Elected Member, Chief Executive and Chief Operating and Financial Officer will attend meetings from time to time as appropriate.

4.3.4 Any partner, officer or employee of the LLP may attend at the invitation of the Chair of the Committee and they may collectively or individually be requested to withdraw from meetings of the Committee if required to do so by the Chair of the Committee.

5 Conflicts of Interest

- 5.1 If a member of the Committee has a conflict of interest, they shall immediately disclose this to the Chair of the Committee and where appropriate recuse themselves from any deliberations or votes of the Committee concerning the relevant subject matter.

6 Resolutions

- 6.1 The Committee shall reach decisions by a simple majority of those voting on the issue in question. If the number of votes for and against a certain proposal is equal, the Chair of the Committee shall have a casting vote.
- 6.2 Any resolution evidenced in writing or by electronic or voice recognition means, by such member or members of the Committee as would have been necessary to pass such resolution had all members of the Committee been present at a meeting to consider such resolution, shall be valid and effective as if it had been passed at a meeting of the Committee duly convened and held, provided that notice and details of the proposed resolution have been given in advance to each member of the Committee.

7 Responsibilities

The Committee shall, on behalf of the Board or, where appropriate, in support of the Board in fulfilling its responsibilities:

7.1 Leadership and management

- 7.1.1 Oversee a formal, rigorous and transparent approach to senior appointments in the firm, as set out in the Appendix to these Terms of Reference;
- 7.1.2 Recommend for Board approval candidates for promotion to Equity Partner, following a recommendation from the Executive Committee;

7.1.3 Approve the candidates for promotion to Salaried Partner following a recommendation from the Executive Committee;

7.1.4 Oversee the maintenance of an effective framework for succession planning including reviewing and commenting on Executive Committee proposals for succession planning for Executive Leadership roles, as defined in the Appendix to these Terms of Reference (and taking input from the Audit Board as regards succession planning in the Audit business);

7.1.5 Oversee the composition of the Executive Committee in the context of its members needing to have an appropriate balance of skills, experience, knowledge, influence and authority within the firm to fulfil their assigned responsibilities and to support the strategic objectives and values of the firm;

7.1.6 Oversee the Executive Committee development and delivery of the People Strategy to include leadership and management, culture ambition, knowledge and skills development, performance management and reward;

Appendix 11: People Committee

Continued

People Committee – Terms of Reference

For the year ended 30 September 2024

7.1.7	Oversee policies designed to enable the recruitment, wellbeing, motivation and retention of partners and colleagues; and	incorporating the input of the Audit Board on their performance (by inviting the Chair of the Audit Board to that portion of any relevant meeting or discussion);	7.2.9	Oversee the implementation of the pay appeals process approved by the Board and establish appeal panels to determine appeals submitted to the Committee by partners in respect of their remuneration, as related to their banding and/or base units; and	7.3.5	Oversee actions being taken to support the wellbeing of partners and staff.	
7.1.8	Oversee the framework and policies for partner promotions and movements between bands, including their implementation and reference to IDE, risk metrics and Partner Conduct Dashboard ratings.	7.2.4	Approve a framework and determine criteria for the balanced scorecard and KPIs of the Chief Executive by which their performance is measured;	7.2.10	Make recommendations to the Executive Committee, where appropriate, in respect of the remuneration policies and framework for all staff to ensure they support the strategic objectives, cultural ambition and values of the firm.	7.4	Culture and LLP's Overall Ethical Health
7.2	Evaluation and Reward	7.2.5	Approve the remuneration of the Chief Executive taking into account the evidence and feedback on their performance presented by the Chair;	7.3	Talent	7.4.1	On the request of the Board or at the request of the Head of Professional Conduct or Head of Ethics and Independence, receive reports on the Ethical Health of the firm, the firm's Code of Conduct or reports involving serious partner behavioural issues related to ethics or values;
7.2.1	Approve the remuneration policies for all partners which are designed both to recognise in-year performance and to support the long term business strategy, values and cultural ambition of the firm, as well as to promote effective risk management (taking into account input from the Audit Board as regards such policies with respect to Audit Partners);	7.2.6	Approve the remuneration of the Chair of the Board, taking into account the evidence and feedback on their performance presented by the Senior Elected Member (or other Elected Member designated by the Elected Members);	7.3.1	Consider and comment on the strategy for attraction and retention of key talent and oversee effective execution by reference to key metrics;	7.4.2	Make recommendations to the Board with respect to determining the firm's IDE targets and monitor and challenge the actions being taken where achievement against targets is outside acceptable levels;
7.2.2	Oversee the effective implementation of remuneration policies for partners and colleagues by the Executive Committee;	7.2.7	Oversee remuneration and benefits arrangements for partners (including Audit Partners), and approve any material exceptions to policy, or material payments or guarantees outside the normal remuneration model;	7.3.2	Consider and comment on the strategy and actions for effective performance management for partners and staff;	7.4.3	Consider the firm's Pay Gap data (provided by the Executive Committee) and escalate any concerns to the Board;
7.2.3	Approve the remuneration of the members of the Executive Committee taking into account the assessment of their performance by the Chief Executive and their respective first and second line reviewer (their "dual pens"), and, in the case of the Head of Audit,	7.2.8	Oversee the approach and application of out of cycle pay changes as approved by the Executive Committee;	7.3.3	Consider and comment on the strategy for knowledge and skills development and oversee effective execution;	7.4.4	Consider the evidence to support compliance with the Code of Conduct bi-annually;
				7.3.4	Consider and comment on policies and actions to promote IDE to meet Board approved targets; and	7.4.5	Recommend amendments to the Code of Conduct to the Board, ensuring that lessons learnt from internal and external sources are integrated as required; and
						7.4.6	Make recommendations to the Board on proposals and policies associated with ethics and behaviours.

Appendix 11: People Committee

Continued

People Committee – Terms of Reference

For the year ended 30 September 2024

8 Reporting

- 8.1 The Chair of the Committee shall report to the Board after each meeting on matters within its duties and responsibilities.
- 8.2 The Committee shall compile a report of the work of the Committee in discharging its responsibilities for inclusion in the Transparency Report, including a description of significant issues dealt with by the Committee.
- 8.3 The Committee shall work and liaise as necessary with other committees of the Board and with the Audit Board. In particular, the Committee shall liaise with the Audit Committee as contemplated in the latter's Terms of Reference as regards the consideration of those people-related matters that support the quality of engagements in the firm's system of quality management (e.g. leadership, resource management, performance management, remuneration policies, skills development and succession planning).

9 Governance and Resources

- 9.1 The Committee shall, via the Secretary to the Committee, make available to new members of the Committee a suitable induction process and, for existing members, ongoing training as discussed and agreed by the Committee.
- 9.2 The Committee shall conduct an annual self-assessment of its activities under these Terms of Reference and report any conclusions and recommendations to the Board and, as part of this assessment, shall consider whether or not it receives adequate and appropriate support in fulfilment of its role and whether or not its annual plan of work is manageable.
- 9.3 The Committee shall in its decision making give due regard to any relevant legal or regulatory requirements, and associated best practice guidance, as well as to the risk, IDE, Values, public interest and reputation implications of its decisions (liaising where relevant with other committees).

9.4 In order to ensure the integrity of its decision making, where the Committee is considering any proposal related to either the appointment to a leadership position, or the remuneration, of a partner who:

- i) is a member of the Committee; or
- ii) was within the previous 12 months a member of the Nomination Committee for the Chief Executive election or for the Chair election, then the Committee shall co-opt at least one additional Elected Board member and one Independent Non-Executive PIC member (in a non-voting capacity) for the specific consultation and decision-making process and that discussion will be chaired by the Independent Non-Executive PIC member provided that the Independent Non-Executive PIC member does not make recommendations or approve the compensation of any individual and/or recuses themselves from any situation where this might arise.

- 9.5 The Committee shall have access to sufficient resources in order to carry out its duties and have the power to engage independent counsel and other professional advisers and to invite them to attend meetings.

10 Terms of Reference

- 10.1 The Committee shall annually review its Terms of Reference and may recommend to the Board any amendments to its Terms of Reference.

Appendix 11: People Committee

Continued

People Committee – Terms of Reference

For the year ended 30 September 2024

Appendix

Appointment of Executive Leadership

“Executive Leadership” means all leaders who report directly to the Chief Executive (including all members of the Executive Committee).

- Executive Leadership members report to the Chief Executive as first or second pen. Therefore, the Chief Executive appoints and removes them from leadership post.
- The People Committee has oversight of the quality and composition of the Executive Committee and holds the Chief Executive accountable accordingly.
- The People Committee will review any significant role changes within Executive Leadership and will periodically review the Chief Executive’s assessment of the balance of skills of the members of the Executive Committee (including when there are significant changes to its composition and in any event at least annually in a closed private session with the Chief Executive).
- The Chief Executive will provide reasonable advance notice (i.e., no less than one month, save in an emergency) to the Chair of the People Committee of any anticipated appointments to the Executive Leadership.
- The People Committee has delegated power from the Board to review certain designated Executive Leadership appointments, whether internal or external candidates, prior to appointment by the Chief Executive. At the date of this document, the designated roles

are Chief Risk Officer, Chief Financial Officer and (if a separate role from CFO) Chief Operating Officer. The People Committee must be satisfied both that the process for identification of potential candidates has been appropriate and that the candidates for these roles are acceptable, by reference to the written criteria for each role and taking account of the overall composition of the Executive Committee.

– Removal of Executive Leaders from leadership position is a decision for the Chief Executive; however, the People Committee can ask for an Executive Leader to be removed from role (including on the basis of KPMG Global input) with escalation to the Board if necessary.

– The Nominations Committee is responsible for Board appointments and therefore is responsible for making recommendations as regards any Executive Leader being put forward by the Chief Executive as a proposed Executive Member of the Board.

– People Committee oversight includes review of Executive Leadership talent reviews and succession planning.

– Candidates for the designated Executive Leadership roles above should be interviewed by the Chair of the People Committee or, for proposed Executive Members of the Board, by the Chair (or by another Board Member nominated by them as an alternative). An Independent Non-Executive may also be involved in the interview and review process.

– Although it is not essential for more than one candidate to be presented when the People Committee reviews a proposed appointment, the Committee must be satisfied a proper process has been followed and documented, and principles of IDE respected.

– The Chair of the People Committee and the Chief Executive shall liaise with regards to determining the relevant process for any other appointments to Executive Leadership roles (including the level of involvement and visibility on the part of the People Committee). However, in any event, having received advance notice of any other such appointment, the People Committee is entitled to call in such proposed appointment for its review, which will be conducted on a basis determined by the Chair of the People Committee, in consultation with the Chief Executive.

Documentation

The following documentation will be gathered and stored:

- Documentation of the process agreed by the People Committee to be followed for each senior appointment including decision as to whether to run an open process or not.
- Documentation that the approver (the Chair of the People Committee and the Chief Executive will decide on who the approver will be depending on who makes up the panel) has obtained and reviewed the results of any relevant external assessment, panel interview and independence checks

to determine whether the assessment made is appropriate in accordance with the firm’s standards within its system of quality management and that the candidate:

- Has the appropriate experience and knowledge to fulfil the assigned accountabilities and responsibilities.
- Demonstrates a commitment to quality through their actions and behaviours, including recognising and reinforcing the importance of professional ethics, values, attitudes, and establishing the expected behaviour of personnel relating to the performance of engagements and activities within the system of quality management.
- Has the appropriate competency and capability based on experience and knowledge to fulfil the accountabilities and responsibilities.

– Documentation that shows that any steps recommended by the Panel / People Committee have been considered for action. This documentation will then be retained for all future senior appointments.

Appendix 12: Risk Committee

Role

The Risk Committee assists the Board in its oversight of current risk exposures and determination of risk appetite and strategy.

The Committee also oversees the effectiveness of the firm's Enterprise-Wide Risk Management (ERM) Framework, the prevailing risk culture in the organisation, the firm's capability to identify and manage new risk types, and the adequacy of risk and assurance resources for first, second and third lines of defence.

As at 1 October 2024, the Audit Committee was combined with the Risk Committee.

Members



Jonathan Downer
Nominated Board Member
KPMG in the UK



Louise Kirby
Elected Member
KPMG in the UK



Melissa Geiger⁴³
Senior Elected Member
KPMG in the UK



Anthony Lobo⁴⁴
Elected Member
KPMG in the UK

⁴³ Melissa's tenure came to an end on 30 September 2024 and she stepped down from the UK Board and UK Board Committees with effect from 1 October 2024.

⁴⁴ Anthony Lobo retired from the Partnership on 30 September 2024.

Appendix 12: Risk Committee

Continued

Report on the Risk Committee's activities during the year

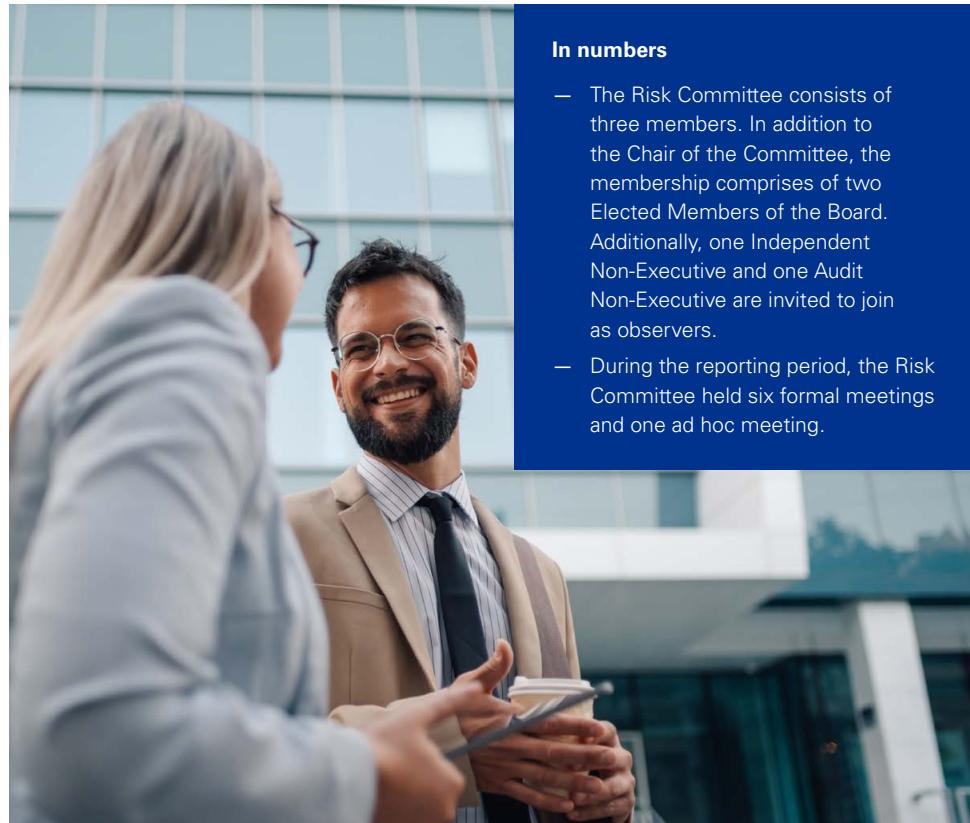
For the year ended 30 September 2024

Areas of oversight

- Overseeing the development of the firm's risk appetite and the controls in place to ensure the business is operating within it.
- Monitoring and overseeing the effectiveness of the Enterprise-Wide Risk Management Framework by receiving ERM reports.
- Reviewing the key risks faced by the firm, including updates on the UK/Swiss merger covering both Pre and Post Transaction Risk assessment.
- Thorough assessment of the risks associated with the launch of EMpowered (an internal change programme to future-proof our business), receiving regular updates on the programme status throughout the year.
- Monitoring the firm's Ethics and Independence including the Ombudsman's reports on Speak Up.
- Receiving deep dive reviews on key areas of the business including ESG, cyber security and data risks, artificial intelligence and the impact of Copilot.
- Overseeing the firm's relationship with its regulators, working with the regulatory engagement team. Reviewing the activities and frameworks used to monitor and ensure the operational resilience of the firm.

Looking ahead to FY25

The Risk Committee will be combined with the Audit Committee from 1 October 2024. The priorities of the combined committees can be found in the report of the Audit Committee.



In numbers

- The Risk Committee consists of three members. In addition to the Chair of the Committee, the membership comprises of two Elected Members of the Board. Additionally, one Independent Non-Executive and one Audit Non-Executive are invited to join as observers.
- During the reporting period, the Risk Committee held six formal meetings and one ad hoc meeting.

Appendix 12: Risk Committee

Continued

Risk Committee – Terms of Reference

For the year ended 30 September 2024

1 Purpose

The role of the Risk Committee ("the Committee") is to assist the Board of KPMG LLP ("the Board) by:

- Overseeing risk appetite and risk tolerance appropriate to each business area.
- Considering the risk policy and strategy.
- Ensuring that there are adequate enterprise-wide processes and systems for identifying and reporting risks and deficiencies, including emerging risks.
- Overseeing compliance with the stated risk appetite and policies and procedures related to risk management governance and the risk controls framework.
- Monitoring the alignment of the risk framework to the firm's growth strategy, supporting a culture of risk taking within sound risk governance.
- Having an overview of the key risk issues identified across the organisation and the wider network.

2 Authority

2.1 The Risk Committee is a committee of the Board of KPMG LLP from which it derives its authority and to which it regularly reports.

2.2 The Committee has delegated authority from the Board in respect of the functions and powers set out in these Terms of Reference.

2.3 The Committee has authority to investigate any matter within its Terms of Reference and to obtain such information as it may require from any partner, officer or employee.

2.4 When required, the Committee may delegate matters to a panel comprising a minimum of two members of the Committee plus such additional individuals with relevant expertise as deemed appropriate, in order to make specific decisions on behalf of the Committee or to escalate recommendations for approval by the Committee. Such panels should be subject to terms of reference (including protocols for escalation to the Committee) as determined by the Committee.

2.5 In addition, the Committee may have delegated authority from the Board for oversight of specified strategic, cultural or transformational projects led by the Executive.

3 Constitution

3.1 Chairperson

3.1.1 The Chair of the Committee will be either an Elected or Nominated Board member, appointed by the Chair and ratified by the Board.

3.1.2 In the absence of the Chair of the Committee or an appointed deputy, the remaining members present shall elect one of themselves to chair the meeting.

3.1.3 In the event that the Chair of the Committee declares a conflict of interest, or the Committee decides that such individual has a conflict of interest, then the Committee shall appoint an alternative member of the Committee to chair the meeting or the relevant section of the meeting.

3.2 Membership

3.2.1 In addition to the Chair the membership comprises:

- A member of the People Committee
- An additional Elected or Nominated Board Member.

3.2.2 Additional members of the Committee shall be appointed by the Board on the recommendation of the Chair in consultation with the Senior Elected Board Member.

3.2.3 Members can be co-opted onto the Committee as the need arises to help fulfil the duties and obligations of the Committee. These appointments shall be made by the Board on the recommendation of the Chair of the Committee.

3.2.4 Working groups of the Committee may be established by the Committee for specific tasks and activities, including for analysis, consultations and escalations as

appropriate. Such groups may be comprised of representatives of the Committee and other individuals with relevant expertise.

3.2.5 Members may be removed from the Committee at any time by the Board.

3.3 Duration of appointments

3.3.1 Unless otherwise determined by the Board, the duration of appointments of members of the Committee and of co-opted members shall be for a period of up to three years which may be extended by the Board for an additional period of two years.

3.4 Secretary

3.4.1 The Board Secretary or their nominee shall act as Secretary to the Committee and attend all meetings.

3.4.2 The Secretary shall record the proceedings and decisions of the Committee meetings and the minutes shall be circulated to all members and attendees, as appropriate, taking into account any conflicts of interest that may exist.

Appendix 12: Risk Committee

Continued

Risk Committee – Terms of Reference

For the year ended 30 September 2024

4 Proceedings of Meetings

4.1 Frequency of Meetings

4.1.1 The Committee shall meet every two months and otherwise as required.

4.1.2 Meetings of the Committee may be called by the Chair of the Committee at any time to consider any matters falling within these Terms of Reference.

4.2 Quorum

4.2.1 Any two members of the Committee may form a quorum, provided at least one Elected Member is in attendance.

4.2.2 A duly convened meeting of the Committee at which a quorum is present shall be competent to exercise all or any of the authorities, powers and discretions vested in or exercisable by the Committee.

4.2.3 In the event of difficulty in forming a quorum, Elected and Nominated Board members who are not members of the Committee may be co-opted as members for individual meetings.

4.2.4 The members of the Committee may participate in a meeting of the Committee from separate locations by means of conference telephone

or other communication equipment which allows those participating to hear each other and be heard, and shall be entitled to vote or be counted in the quorum accordingly.

4.3 Attendees

4.3.1 Only the members of the Committee and other Elected and Nominated members of the Board and Independent Non-Executives have the right to attend Committee meetings.

4.3.2 The Chair of the Audit Board (or, at his/her request, another member of the Audit Board) shall be invited to attend the regular meetings of the Committee as well as any meeting of the Committee which is of direct or indirect relevance to the responsibilities of the Audit Board.

4.3.3 The following will be expected to attend Committee meetings on a regular basis:

- a) An Independent Non-Executive
- b) Chief Risk Officer
- c) General Counsel or their nominee
- d) Head of Regulatory Affairs
- e) Head of Internal Audit
- f) Board Secretary or their nominee.

4.3.4 The Chair, Chair of the Audit Committee, Senior Elected Member, Chief Executive, Chief Operating and Financial Officer will attend meetings on an as-needed basis.

4.3.5 Any partner, officer or employee of the LLP may attend at the invitation of the Chair of the Committee and they may collectively or individually be requested to withdraw from meetings of the Committee if required to do so by the Chair of the Committee.

5 Resolutions

5.1 The Committee shall reach decisions by a simple majority of those voting on the issue in question. If the number of votes for and against a certain proposal is equal, the Committee Chair shall have a casting vote.

5.2 Any resolution evidenced in writing or by electronic or voice recognition means, by such member or members of the Committee as would have been necessary to pass such resolution had all members of the Committee been present at a meeting to consider such resolution, shall be valid and effective as if it had been passed at a meeting of the Committee duly convened and held, provided that notice and details of the proposed resolution have been given in advance to each member of the Committee.

6 Responsibilities

The Committee's responsibilities shall be determined by the Board from time to time and, in any event, include the responsibility to:

6.1 Advise the Board and (with respect to the Audit business) the Audit Board in relation to the determination of overall risk appetite, tolerance and strategy, taking account of:

- a) the LLP's values and public interest purpose, as well as the current and prospective regulatory, macroeconomic, technological, environmental and social developments and trends that may be relevant for the LLP's risk policies; and
- b) relevant policies, guidance and determinations of KPMG International and its global risk management steering group;

6.2 Oversee and advise the Board and (with respect to the Audit business) the Audit Board on the current risk exposures of the LLP, appropriate determination of risk appetite and future risk strategy, including as regards the following families of risk: strategic, operational, financial and compliance, conduct and reputation;

6.3 Provide advice and assurance to the Board by adopting a holistic and enterprise-wide view of the firm and the key risks that it is exposed to, assessing the adequacy and effectiveness of the firm's adoption of the Enterprise-Wide Risk Management Framework;

Appendix 12: Risk Committee

Continued

Risk Committee – Terms of Reference

For the year ended 30 September 2024

- 6.4 Undertake horizon-scanning of the risk landscape, including material risks, reputational and franchise impacts arising from the Global network and undertake deep-dive reviews into significant risks at the request of the Board or where, in the Committee's view, further scrutiny is required;
- 6.5 Using internal and external sources of assurance, monitor the robustness of the firm's risk management policies and processes, including the firm's Enterprise-Wide Risk Management Framework, and their fitness for purpose when tested against the Board approved Risk Appetite (including the Audit practice's appetite framework and mitigations for accepting higher risk audits as approved by the Audit Board) and the LLP's strategy ;
- 6.6 Consider and review the prevailing risk culture in the organisation (values, beliefs, knowledge, attitudes and understanding about risk) and maintain oversight of relevant work streams and projects to bring about the desired risk culture;
- 6.7 In relation to risk assessment:
 - 6.7.1 Assess the firm's principal risks including those that would threaten its business model, future performance, solvency or liquidity, including how they relate to the sustainability of the Audit practice (and involve, as appropriate, the INEs and ANEs in such assessment);
 - 6.7.2 Keep under review the LLP's overall risk assessment processes that inform the Board's and the Audit Board's decision making, ensuring both qualitative and quantitative metrics are used;
 - 6.7.3 Review regularly and approve the parameters used in these measures and the methodology adopted; and
 - 6.7.4 Set a standard for the accurate and timely monitoring of large exposures and certain risk types of critical importance.
- 6.8 Review the firm's capability to identify and manage new risk types;
- 6.9 Before a decision to proceed is taken by the Board, advise the Board on proposed strategic transactions including acquisitions or disposals ensuring that a due diligence appraisal of the proposition is undertaken, focusing in particular on risk aspects and implications for the risk appetite and tolerance of the LLP, and taking independent external advice where appropriate and available;
- 6.10 Review reports on any material breaches of risk limits and the adequacy of proposed action;
- 6.11 Review and approve the statements to be included in the annual report concerning risk management;
- 6.12 Consider and approve the remit of all risk and assurance functions and ensure they have adequate resources and appropriate access to information to enable them to perform their respective functions in first, second and third lines of defence effectively and in accordance with the relevant professional standards. The Committee shall also ensure these functions have adequate independence, as applicable, and are free from inappropriate management and other restrictions;
- 6.13 Recommend to the Board the appointment and/or removal of the Chief Risk Officer (the "CRO") and provide input to the evaluation of the CRO's performance;
- 6.14 Review promptly all reports on the LLP from the CRO;
- 6.15 Review and monitor management's responsiveness to the findings and recommendations of the CRO;
- 6.16 Consider the major findings of any relevant internal investigations into fraud or misconduct and management's response (in the absence of management where necessary);
- 6.17 Consider the major findings of any relevant Internal Audit reviews and investigations which are identified as Enterprise-Wide Risks and any other Internal Audit investigations deemed appropriate by the Audit Committee Chair in consultation with the Chair of the Committee (it being noted that the Audit Committee has primary responsibility for Internal Audit) and management's response (in the absence of management where necessary);
- 6.18 Consider to the extent appropriate and in liaison with the Audit Committee (which has primary oversight of the firm's compliance with ISQM1) the firm's Systems of Quality Management and processes relevant to engagement quality; and in coordination with the Audit Committee assist the Board in fulfilling its responsibilities in relation to the same; and
- 6.19 Ensure the CRO shall be given the right of unfettered direct access to the Chair and to the Chair of the Committee.

7 Reporting

- 7.1 The Chair of the Committee shall report to the Board after each meeting on matters within its duties and responsibilities.
- 7.2 The Committee shall produce a report of its activities and the firm's risk management and strategy to be included in the annual report.
- 7.3 The Chair of the Committee shall report to the Audit Board, Audit Committee and People Committee after each meeting on relevant matters within its duties and responsibilities.
- 7.4 The Committee shall work and liaise as necessary with other Committees of the Board and the Audit Board.

Appendix 12: Risk Committee

Continued

Risk Committee – Terms of Reference

For the year ended 30 September 2024

8 Governance and Resources

- 8.1 The Committee shall, via the Secretary to the Committee, make available to new members of the Committee a suitable induction process and, for existing members, ongoing training as discussed and agreed by the Committee.
- 8.2 The Committee shall conduct an annual self-assessment of its activities under these Terms of Reference and report any conclusions and recommendations to the Board and, as part of this assessment, shall consider whether or not it receives adequate and appropriate support in fulfilment of its role and whether or not its annual plan of work is manageable.
- 8.3 The Committee shall in its decision making give due regard to any relevant legal or regulatory requirements, and associated best practice guidance, as well as to the risk and reputation implications of its decisions (liaising where relevant with other Committees).
- 8.4 The Committee shall have access to sufficient resources in order to carry out its duties and have the power to engage independent counsel and other professional advisers and to invite them to attend meetings.

9 Compliance, Whistleblowing and Fraud

- The Committee shall:
 - 9.1 Review the firm's procedures for detecting fraud;
 - 9.2 Review the firm's systems and controls for the prevention of bribery and receive reports on non-compliance;
 - 9.3 At the request of the Board or by the firm's Head of Ethics and Independence, consider whistleblowing reports including performing a deep dive into any areas of the business of concern;
 - 9.4 Review reports from the firm's Money Laundering Reporting Officer and the adequacy and effectiveness of the firm's anti-money laundering systems and controls; and
 - 9.5 Review regular reports from the Risk function in relation to compliance and keep under review the adequacy and effectiveness of the firm's compliance function.

10 Insurance Arrangements

- The Committee shall:
 - 10.1.1 Annually assess the adequacy of the firm's insurance arrangements and high-level governance having regard to the nature of the firm's business and insurable risks; and
 - 10.1.2 Make recommendations to the Board of any changes to the insurance programme as a result of its annual review.

11 Terms of Reference

- The Committee shall annually review its Terms of Reference and may recommend to the Board any amendments to its Terms of Reference.

Appendix 13: Executive Committee

Role

The purpose of the Executive Committee is to manage the day-to-day activities of KPMG LLP's business through:

- Developing and implementing strategy, operational plans, policies, procedures and budgets
- Driving and monitoring operating and financial performance
- Assessing and controlling risk
- Prioritising and allocating resources.

The committees of the Executive during the year comprised of: Operations Executive, Investment Committee, Risk Executive and Audit Executive. From 1 October 2024, the committees changed as a result of the merger between KPMG Switzerland and KPMG UK. A new governance structure has been established. For details of the new governance structure, including membership and associated terms of reference please visit our [website](#).

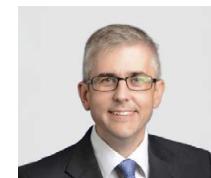
Members



Jon Holt
Group Chief Executive
and Board Member
KPMG in the UK



Chris Heard
Chief Operating and Financial
Officer and Board Member
KPMG in the UK



John Bennett
Audit Head of Risk
KPMG in the UK



Rachel Hopcroft CBE
Head of Corporate Affairs
KPMG in the UK



Catherine Burnet
Head of Audit
KPMG in the UK



Victoria Heard
Head of Tax and Legal
Services
KPMG in the UK



Lisa Fernihough
Head of Advisory
KPMG in the UK



Karl Edge
Chief People Officer
KPMG in the UK



Karim Haji
Head of Markets & Growth
KPMG in the UK

Appendix 13: Executive Committee

Continued

Executive Committee – Terms of Reference

For the year ended 30 September 2024

1 Purpose

1.1 The purpose of the Executive Committee is to manage the day-to-day activities of the LLP's business, in order for the firm to have a successful and sustainable long-term future, through:

- Developing and implementing strategy, operational plans, policies, procedures and budgets;
- Promoting and embedding an appropriate culture aligned with the firm's Purpose and Values, that:
 - a) supports the consistent performance of high-quality engagements, the firm's role in serving the public interest and the long-term sustainability of the firm; and
 - b) encourages people to consult, challenge, contribute ideas and share problems, knowledge and experience.
- Driving and monitoring operating and financial performance;
- Assessing and controlling risk; and
- Prioritising and allocating resources.

1.2 In fulfilling its purpose the Executive Committee shall give due consideration to:

- The LLP's obligations and commitments as a member firm of the KPMG global network;

- Balancing the interests of various stakeholders (employees, partners, clients, regulators and the public at large);
- The firm's Purpose and Values;
- Upholding the integrity, brand and reputation of KPMG; and
- Planning the firm's future development.

1.3 In fulfilling its responsibilities the Executive Committee ensures that the firm discharges its public interest responsibilities through its pursuit of the purpose of the Audit Firm Governance Code and regular dialogue with the Independent Non-Executives, in particular, prioritising Audit Quality (in coordination with the Audit Executive and regular dialogue with the Audit Non-Executives) and the application of Ethical Standards and the ICAEW's Code of Ethics.

2 Authority and Delegation

2.1 The Executive Committee is a committee of the LLP and the individual members of the Executive Committee have duly delegated authority to carry out the responsibilities in section 5 below, and any other matters relating to the purpose of the Audit Firm Governance Code and as set out from time to time in their respective role mandates approved by the Chief Executive (and, in the case of the Head of Audit's role mandate, subject to consultation with the Audit Board).

2.2 These terms of reference should be read in conjunction with any delegated authorities or decisions matrix approved by the Chief Executive.

2.3 Subject to the LLP Agreement and the firm's other constitutional documents and to any directions given by the Board, the Executive Committee may exercise all the powers of the LLP provided that the Executive Committee shall not exercise any power reserved to the Board (as set out in the LLP Agreement, Board Charter and Terms of Reference, or notified by the Board from time to time) or reserved to the Audit Board (as determined by the Board), or reserved to the Members (as set out in the LLP Agreement).

2.4 The Executive Committee may delegate any of the powers it is authorised to exercise to an Executive sub-group of the Executive Committee but shall continue to remain accountable for any management undertaken or any decisions made by any of those Executive sub-groups.

2.5 The Executive Committee shall remain accountable to the Chief Executive and to the Board, and may at its own discretion, or at the request of the Board, promptly give or make available to the Board such information, reports and other documents to enable the Board to carry out its duties.

3 Constitution

3.1 Chair

3.1.1 The Chair of the Executive Committee is the Chief Executive.

3.1.2 In the absence of the Chair of the Executive Committee or if the Chair so chooses another member of the Executive Committee shall act as Chair.

3.1.3 The Chair of the Committee has a casting vote.

3.1.4 In the event that the Chair of the Executive Committee declares a conflict of interest, or the Executive Committee decides that such individual has a conflict of interest, then the members of the Executive Committee shall appoint a chair from amongst themselves to chair the meeting or the relevant part of the meeting.

Appendix 13: Executive Committee

Continued

Executive Committee – Terms of Reference

For the year ended 30 September 2024

3.2	Membership	3.3	Duration of appointments. Unless otherwise determined by the Board, the duration of appointments will be for a continuous term at the discretion of the Chief Executive.	4.2	Quorum	4.3.3	Any partner, officer, employee of the LLP or other potential attendees may attend all or part of an Executive Committee meeting at the invitation of the Chair of the Executive Committee and they may collectively or individually be requested to withdraw from meetings of the Committee at any time if required to do so by the Chair of the Executive Committee.
3.2.1	The Executive Committee comprises those senior executives as the Chief Executive may determine as ratified by the Board (and who shall be appointed with the endorsement of the People Committee). At the date of these Terms of Reference, such senior executives are the following:	3.4	Secretary	4.2.1	The quorum for any meeting of the Executive Committee shall be two-thirds of its members.	4.4.1	The Committee shall reach decisions by a simple majority of those voting on the issue in question. If the number of votes for and against a certain proposal is equal, the Chair has a casting vote.
	<ul style="list-style-type: none"> – Chief Executive (Chair) – Chief Operating and Financial Officer ("COFO") – Chief Risk Officer ("CRO") – Chief People Officer ("CPO") – Head of Audit – Head of Advisory – Head of Tax and Legal – Head of Markets – Head of Corporate Affairs. 	3.4.1	The Head of Governance or their nominee shall act as Secretary to the Executive Committee and attend all meetings.	4.2.2	A duly convened meeting of the Executive Committee at which a quorum is present shall be competent to exercise all or any of the authorities, powers and discretions vested in or exercisable by the Executive Committee.	4.4.2	Any resolution evidenced in writing or by electronical or voice recognition means, by such member or members of the Executive Committee as would have been necessary to pass such resolution had all members of the Executive Committee been present at a meeting to consider such resolution, shall be valid and effective as if it had been passed at a meeting of the Executive Committee duly convened and held, provided that notice and details of the proposed resolution have been given in advance to each member of the Executive Committee.
3.2.2	Executive Committee Members' roles, duties, responsibilities, goals, delegations and key accountabilities shall be set by the Chief Executive with reference to strategic goals, performance (including financial, operations and technology), people and culture and risk. Performance against these objectives and accountabilities shall be the subject of regular reporting (on an approximately monthly basis) to the Executive Committee.	4	Proceedings of Meetings	4.1	Frequency of Meetings	4.2.3	The members of the Executive Committee may participate in a meeting of the Executive Committee from separate locations by means of conference telephone or other communication equipment which allows those participating to hear each other and be heard, and shall be entitled to vote or be counted in the quorum accordingly.
		4.1.1	The Executive Committee shall meet monthly and otherwise as required.	4.3	Attendees	4.3.1	Only the members of the Executive Committee, and the General Counsel, have the right to attend all Executive Committee meetings.
		4.1.2	Meetings of the Executive Committee may be called by the Chair of the Executive Committee at any time to consider any matters falling within these Terms of Reference.	4.3.2	In addition to the General Counsel, regular attendees at meetings of the Executive Committee include the following (at the discretion of the Chair of the Executive Committee):		
						<ul style="list-style-type: none"> – Chief of Staff – Head of Governance (or delegate). 	

Appendix 13: Executive Committee

Continued

Executive Committee – Terms of Reference

For the year ended 30 September 2024

4.5 Conflicts of interest of individual Executive Committee members If a member of the Executive Committee has a conflict of interest, they shall immediately disclose this to the Chair of the Executive Committee and where appropriate recuse themselves from any deliberations or votes of the Executive Committee concerning the relevant subject matter.	5.1.5 Developing and proposing Inclusion and Diversity targets and recommending them to the Board (subject to prior consultation with the People Committee) for approval; and 5.1.6 Monitoring the firm's diversity pay gap data and taking steps to address any relevant concerns identified.	5.2.4 The development and implementation of financial and operational plans, policies, procedures and budgets to execute the strategy; 5.2.5 Ensuring the active liaison, coordination and cooperation between different parts of the business to support execution of the strategy and business plans and fulfilment of its other responsibilities;	Board or the Executive Committee where appropriate) including oversight of delivery of these targets, objectives and performance indicators by individual Executive Committee members in line with their individual accountabilities, and in the case of the Audit business and the Head of Audit, taking into account any targets, objectives and key performance indicators recommended by the Audit Board;
5 Responsibilities The detailed responsibilities of the Executive Committee include, but are not limited to, the following:	5.2 Strategy. The Executive Committee is responsible for: 5.2.1 Working jointly with the Board on the development of the strategy for the LLP (for recommendation and approval by the Board) having regard to: — the interests of its members, clients, employees, regulators and other stakeholders; and — the appropriate appetite for associated risks; 5.2.2 Informing the strategy, laying the foundations and designing the process for the strategy development; 5.2.3 The delivery, successful execution and implementation of the approved strategy including considering and managing actual and emerging risks that may impact achievement of the strategy;	5.2.6 Ensuring the alignment between the strategy for the Audit business, as developed by the Audit Executive, and the strategy for the LLP; and 5.2.7 The communication of the firm's strategy.	5.3.4 Optimising the calibration, allocation, prioritisation and adequacy of the firm's resources;
5.1 Values, integrity and diversity. The Executive Committee is responsible for: 5.1.1 Actively promoting the LLP's culture and values; 5.1.2 Operationalising the firm's values and ensuring these are widely understood and consistently adhered to; 5.1.3 Ensuring the firm, its partners and employees act with high integrity, which is aligned to and promotes the KPMG vision of becoming the most trusted professional services firm; 5.1.4 Driving inclusion and diversity and ensuring the composition of the LLP's workforce (partners, employees and contractors) is representative of wider society;	5.3 Performance and Operations The Executive Committee is responsible for: 5.3.1 Developing and preparing the firm's budgets, forecasts, annual budget plan and UK Business Plan and recommending to the Board for approval; 5.3.2 Achieving the approved budgets, and annual budget plan; 5.3.3 Actively managing and monitoring the operational and financial performance of the LLP against targets, objectives and key performance indicators (set by the	5.3.5 Ensuring the FRC's Principles of Operational Separation are respected as regards the operations of the firm, including the Audit Practice;	5.3.6 Holding leaders within the business to account through an effective organisational, performance and accountability structure taking action where required; and 5.3.7 Identifying issues and acting on early warnings and deviations from the business plan and/or budget, reviewing the adequacy of interventions and monitoring the effectiveness of remedial actions.

Appendix 13: Executive Committee

Continued

Executive Committee – Terms of Reference

For the year ended 30 September 2024

5.4 Partner promotion, performance cycle and remuneration.

The Executive Committee is responsible for:

5.4.1 The design (for recommendation and approval by the People Committee and Board as appropriate) of the performance cycle for partners, including balanced score cards, goals, mid-year reviews, year-end reviews, partner 360 evaluation and dual pens, taking account of relevant recommendations of the Audit Board as concerns Audit Partners;

5.4.2 Developing the partner promotion framework and process (for recommendation and approval by the People Committee and Board as appropriate), identifying suitable candidates for partner promotion and approving the quantum of promotions and individual candidates in alignment with the business plan, inclusion and diversity targets and KPMG values, taking account of relevant recommendations of the Audit Board with respect to the framework and process only as concerns Audit Partners;

5.4.3 The design (for recommendation and approval by the People Committee and Board as appropriate) of relevant remuneration policies and principles

for partners, taking account of relevant recommendations of the Audit Board and the Remuneration Committee of the Audit Board, as such policies and principles concern Audit Partners; and

5.4.4 Implementation of the performance cycle, remuneration policies and principles through the annual distribution of profits to partners within the parameters established by the Board, including taking account of recommendations as the case may be by the People Committee and/or the Audit Board, and set out in the LLP Partnership Agreement.

5.5 Investments

The Executive Committee is responsible for:

5.5.1 Developing an investment framework (for approval by the Board) (including processes, portfolio allocation, evaluation criteria and governance) and implementing it effectively;

5.5.2 Reviewing proposed investment business cases (including assessing strategic and financial merits as well as risk profile) and, in the case of organic and ordinary course investments (including multi-year commitments) with cash or FTE commitments with a value of up to £40 million, approving them if

appropriate, or if greater than £40 million, making recommendations to the Board for its deliberation and approval. For inorganic investments such as acquisitions and JV investments, and business disposals, the approval limit is £20 million with any investments exceeding this to be recommended to the Board for approval;

5.5.3 Ensuring that the relevant members of the Executive Committee and Executive sub-groups execute and deliver all approved investments in accordance with the relevant approved business plans in their business area;

5.5.4 Examining all trade investments, divestments and major capital expenditure proposals and recommending to the Board, for approval, those which are material either by nature or cost (taking into consideration, the view of the Public Interest Committee or, if relevant to the Audit practice, the view of the Audit Board); and

5.5.5 Reviewing the performance of investments in terms of both effectiveness of integration, management of risks and return on investment, each as set out in the given investment's approved business case.

5.6 Risk Management and Internal Controls

The Executive Committee is responsible for:

5.6.1 Managing the firm's risk (including ensuring that the Enterprise-Wide Risk Management Framework is operative and effective) and protecting the KPMG brand in general and for each individual Executive Committee member's area of responsibility;

5.6.2 Ensuring that the Risk Appetite is developed in collaboration with the CRO and COO and once approved by the Board is fully embedded in the business, including across strategy, planning, decision-making processes and partner remuneration;

5.6.3 Ensuring resources and processes are in place to support the Risk Appetite framework (including the Audit practice's appetite and mitigations for accepting higher risk audits as recommended by the Audit Board);

5.6.4 Identifying on a timely basis breaches of Risk Appetite, escalating them and developing mitigating actions;

5.6.5 Monitoring compliance with the Board approved Risk Appetite, including overseeing and managing portfolio risks and risk reward profiles of different parts of the business;

Appendix 13: Executive Committee

Continued

Executive Committee – Terms of Reference

For the year ended 30 September 2024

<p>5.6.6 Ensuring that risk considerations are incorporated within the strategic planning and budgeting processes;</p> <p>5.6.7 Ensuring each individual Executive Committee member manages the strategic risk, operational risk, financial risk and regulatory, compliance and legal risk in their area of responsibility, including the embedding of the risk principles and the developing of their respective risk appetite statements (and, in the case of the Head of Audit's area of responsibility, taking account of any applicable recommendations of the Audit Board);</p> <p>5.6.8 Receiving regular reports on risk issues from the CRO in their risk oversight (2nd line of defence) capacity;</p> <p>5.6.9 Receiving and acting upon findings and recommendations of the Head of Internal Audit in their risk assurance (3rd line of defence) capacity;</p> <p>5.6.10 Ensuring compliance with relevant policies, legislation and regulations;</p> <p>5.6.11 Ensuring the adequacy and compliance with internal controls within the Executive Committee members' respective business areas through active monitoring and management and in particular</p>	<p>the implementation of controls and processes within the applicable ISQM1 requirements; and</p> <p>5.6.12 Safeguarding the integrity and adequacy of management information and financial reporting systems.</p> <p>5.7 Financial and non-financial reporting In connection with year-end matters, development and, where applicable, recommendation for Board approval of the firm's Financial Statements, Annual Report, Transparency Report and other relevant Environmental, Social and Governance public reporting.</p> <p>5.8 Board Alignment and Escalation The Executive Committee has a responsibility to identify matters required or appropriate for escalation to the Board or the appropriate Board Committee and to review, debate and form recommendations on relevant items prior to such escalation. This responsibility is in addition to the right for the Board or any Board Committee to request or require escalation to them of any defined matters or categories of matter.</p>	<p>6.2 The Executive Committee reports to the Board and the Chief Executive shall report to each Board meeting on matters within their duties and responsibilities.</p> <p>6.3 The Executive Committee shall provide relevant reports to the Audit Board and the Head of Audit shall report to each Audit Board meeting on matters relating to or impacting the Audit business within the Executive Committee's duties and responsibilities.</p> <p>7 Executive Committee Sub-Groups and Delegations</p> <p>7.1 The Executive Committee may establish Executive sub-groups to support the fulfilment of responsibilities outlined in section 5. At the date of these terms of reference the following are in operation:</p> <ul style="list-style-type: none"> — Operations Executive — Risk Executive — Audit Executive. <p>All duties and powers of such Executive sub-groups are subject to the limitations of authority stated in their Terms of Reference which are subject to approval by the Executive Committee and, in the case of the Audit Executive, also to take account of any recommendations of the Audit Board.</p> <p>7.2 Executive Committee Sub-Groups shall routinely and regularly report to the Executive Committee, Board, Audit Board (in the case of the Audit Executive) and/ or Board Committee (as relevant) on</p>
		<p>the exercise of their delegated duties and powers.</p> <p>7.3 The Executive sub-groups shall work closely with the other Executive sub-groups to share information, be efficient and timely and prevent overlap (unless required).</p>
		<p>8 Governance and Resources</p> <p>8.1 The Executive Committee shall, via the Chief Executive's office, make available to new members of the Executive Committee a suitable induction process and, for existing members, ongoing training as discussed and agreed by the Executive Committee.</p> <p>8.2 The Executive Committee shall conduct an annual self-assessment of its activities under these Terms of Reference and report any conclusions and recommendations to the Board and, as part of this assessment, shall consider whether or not it receives adequate and appropriate support in fulfilment of its role and whether or not its annual plan of work is manageable.</p> <p>8.3 The Executive Committee shall in its decision making give due regard to any relevant legal or regulatory requirements, and associated best practice guidance, as well as to the risk, public interest and reputation implications of its decisions (liaising where relevant with the Board, its committees and the Audit Board).</p>

Appendix 13: Executive Committee

Continued

Executive Committee – Terms of Reference

For the year ended 30 September 2024

8.4 The Executive Committee shall have access to sufficient resources in order to carry out its duties. In consultation with the Chair of the Board and/or General Counsel, it shall have the power to engage independent counsel and other professional advisers.

9 Review and Terms of Reference

9.1 The Executive Committee shall annually review its Terms of Reference and may recommend to the Board for approval any amendments.

9.2 The Executive Committee shall conduct an annual assessment of its activities under these terms of reference and report any conclusions or recommendations to the Board.

Appendix 14: Operations Executive

Role

The Operations Executive provides the Executive Committee with appropriate oversight and outcomes in relation to delivery of the UK firm's operations and technology strategy in support of the three-year business plan, and vision to be the 'Fastest Growing, Most Connected, Most Trusted professional services firm'.

The Operations Executive was dissolved as of 1 October 2024.

Members



Chris Heardl
Group Chief Operating and Financial Officer
KPMG in the UK



Mick Davies
Chief Operating Officer, Audit
KPMG in the UK



Sue Richardson
Chief Operating Officer, Deal Advisory
KPMG in the UK



Alan Turner
Chief Operating Officer, Tax & Legal
KPMG in the UK



Suzanne Shenton
Head of Enterprise-Wide Transformation
KPMG in the UK



Phil Abram
Head of Corporate Development
KPMG in the UK



John Bennett
Audit Head of Risk
KPMG in the UK



Neil Barnicoat
General Counsel
KPMG in the UK



James Osborn
Chief Digital Officer
KPMG in the UK



Karl Edge
Chief People Officer
KPMG in the UK



Guy Stallard
Chief Operating Officer, EWT & KBS
KPMG in the UK



Laura Stamp
Chief Operating Officer, Markets
KPMG in the UK



Lindsey Crossland
Chief Accounting Officer, KPMG in the UK



Peter Luscombe
Advisory Alignment Lead & Consulting COO
KPMG in the UK



Rachel Hopcroft CBE
Head of Corporate Affairs
KPMG in the UK

Note: Donald Wilson and Sameer Chadha were members until 7 January 2024.

Appendix 14: Operations Executive

Continued

Operations Executive – Terms of Reference

For the year ended 30 September 2024

1 Purpose

The role of the Operations Executive Committee ("the Operations Executive" or "the Committee") shall be to provide the Executive Committee ("the ExCo") with appropriate oversight and outcomes in relation to delivery of the UK Firm's operations and technology strategy in support of the 3 Year Business Plan and KPMG's vision to be the 'Fastest Growing, Most Connected, Most Trusted professional services firm'.

2 Authority and Delegation (including working groups)

- 2.1 The Operations Executive is a subcommittee of the ExCo from which it derives its authority and to which it regularly reports. The ExCo derives its authority from the Board.
- 2.2 The Operations Executive has delegated authority from the ExCo in respect of functions and powers set out in these terms of reference and the specific responsibilities set out above (with further approval required from the ExCo, Board or Board Committee as relevant).
- 2.3 The Operations Executive has authority to review and investigate any matter within its terms of reference and to obtain such information as it may require from any member, officer, or employee of KPMG in relation to such.

2.4 Additional working groups of the Operations Executive may be established by the Operations Executive for specific tasks and activities, including for analysis, consultations and escalations as appropriate. Such working groups may be comprised of representatives of the Operations Executive and other individuals (including KPMG partners, officers, and employees) with relevant expertise.

- 2.5 Only members of the Operations Executive however will be able to make decisions on matters.
- 2.6 Delegations to, and the terms of reference of, the working groups will be approved by the Operations Executive and reviewed on an annual basis.

3 Constitution

3.1 Chairperson

- 3.1.1 The Chair of the Committee will be the Chief Operating and Financial Officer as appointed by the Chief Executive and ratified by the ExCo.
- 3.1.2 In the absence of the Chair of the Committee or an appointed deputy, the remaining members present shall elect one of themselves to chair the meeting.

3.1.3 In the event that the Chair of the Committee declares a conflict of interest, or the Committee decides that such individual has a conflict of interest, then the Committee shall appoint an alternative member of the Committee to chair the meeting or the relevant section of the meeting.

3.2 Membership

- 3.2.1 Membership shall be ratified by the ExCo and shall include the following, or delegates acceptable to the Chair:
 - Chief Operating and Financial Officer (Chair)
 - Chief People Officer
 - Chief Accounting Officer
 - Chief Digital Officer
 - Chief Risk Officer
 - Capability COOs
 - Head of Corporate Development
 - Head of KBS and Transformation
 - Corporate Services COOs
 - General Counsel, Risk and Legal COO
 - Director of Internal Communications.

3.3 Standing Invites

- 3.3.1 The following individuals will have a standing invitation to the Operations Executive and can attend when they wish:
 - Chief Executive
 - Head of Corporate Affairs (in relation to Reputational Matters)
 - Programme Lead – EMpowered
 - KGS CEO
 - The Board Secretary (or their delegate)
 - COFO Operations Representatives.

3.4 Other attendees

- 3.4.1 Other individuals shall be asked to attend meetings as required at the discretion of the Chair.

3.5 Duration of appointments

- 3.5.1 Unless otherwise determined by the ExCo, the duration of appointments of members of the Committee will be for a continuous term.

3.6 Secretary

- 3.6.1 A Committee Secretary shall be appointed to support the Committee from the Governance team.

Appendix 14: Operations Executive

Continued

Operations Executive – Terms of Reference

For the year ended 30 September 2024

3.6.2	The Secretary shall attend all meetings and will be responsible for recording the proceedings and decisions of the Committee meetings and the minutes shall be made available to all members and attendees, as appropriate.	4.3	Ad hoc meetings	4.3.1	Other than those regularly scheduled, the Operations Executive shall be convened by the COFO's office at the request of any of the Operations Executive members, if they consider it necessary.	4.5.2	has a material impact on Audit, the matter shall be referred to the ExCo.	5.2	Strategy
4	Proceedings of Meetings	4.4	Quorum	4.4.1	Any four members may form a quorum. A duly convened meeting of the Operations Executive at which quorum is present shall be competent to exercise all or any of the authorities, powers and discretions vested in or exercisable by the Operations Executive.	4.5.3	The Operations Executive shall reach decisions by simple majority of those members voting on the matter in question. If the number for and against is equal the Chair of the Operations Executive shall have the casting vote or escalate the matter to the Executive Committee.	5.2.1	Developing and preparing (for the ExCo's review and recommendation to the Board for approval) the firm's annual budget and 3 Year Business Plan that seeks to deliver sustainable profitable growth over the next 3 to 4 years;
4.1	Frequency of Meetings	4.5	Decisions	4.5.1	While making decisions the Operations Executive will take into consideration the Board approved Strategy and Risk Appetite, any instructions given to it by the ExCo to which it reports and the Decision Matrix as approved from time to time by the ExCo. The Operations Executive shall not have the authority to make any decisions which have a material impact on the firm's Audit practice without the agreement of the Head of Audit or the Chief Executive, and such agreement is to be provided in writing. If it is unclear if the matter	5.3	Ensuring that the Operations strategy is appropriately aligned to the relevant UK and Global strategy and ensure effective connection to the corresponding Global teams to ensure a global approach.		
4.2	Notice of Meetings	5.1	The Operations Executive responsibilities shall be determined by the ExCo from time to time and, in any event, shall include the following responsibilities:	5.2.2	Developing (on behalf of the ExCo and for approval by the ExCo and the Board as appropriate) the strategy for enterprise-wide technology and business support services (KBS and EWT) and firm-wide location/offshoring strategy; and				
4.2.1	Unless otherwise agreed, notice of each meeting confirming the location, time and date shall be forwarded to each member of the Operations Executive and any other attendees required to attend by the Chair of the Committee.	5	Responsibilities	5.2.3	Performance and Operations				
5.3.1	Actively managing and monitoring the operational and financial performance of the firm against targets, objectives, and key performance indicators (set by the Board or ExCo where appropriate) including oversight (on behalf of the Chief Executive and the ExCo) of delivery against these targets, objectives and KPIs by individual ExCo members in line with their individual accountabilities. This								

Appendix 14: Operations Executive

Continued

Executive Committee – Terms of Reference

For the year ended 30 September 2024

will include all operational matters (including managing overheads and monitoring performance, within the Board approved budget and 3 Year Business Plan);	5.3.7 Overseeing execution of any divestments approved by the ExCo within the investment framework approved by the Board.	5.4.6 Overseeing the implementation of inclusion and diversity plans and pay gap for employees and making recommendations to the ExCo (or as the case may be, the Audit Executive) for their approval or recommendation to the Board or People Committee; and	5.5.6 Setting policy (within the scope of its delegation from the ExCo) as relates to people, finance, technology, sales and marketing, operations and procurement;
5.3.2 Supporting the ExCo in its responsibility to ensure the achievement of the approved budgets and UK 3 year Business Plan;	5.4 People and Culture	5.4.1 Reviewing the: i) timing of and level of partner pay; and ii) partner business cases (from an affordability perspective).	5.5.7 Administering Corporate Affairs including internal and external communications; and
5.3.3 Reviewing and challenging organisational finance and group budgets and overseeing the business planning process, making recommendations to the ExCo for approval;	5.4.2 Working with the ExCo and Audit Executive to execute on the people strategy including review and changes to salary and bonus levels for employees based on affordability;	5.4.7 Creating and implementing the Global People Survey (GPS), reviewing the outcome, and ensuring the issues that it raises are addressed.	5.5.8 Managing and monitoring compliance with the firm's health and wellbeing protocols.
5.3.4 Managing the firm's working capital position through the setting and monitoring of lock up targets;	5.4.3 Working with the ExCo and Audit Executive to optimise the calibration, allocation, prioritisation, and adequacy of the firm's resources;	5.5 KPMG Business Services (KBS) and Enterprise-wide Technology (EWT)	5.6 Risk 5.6.1 Working closely with the Risk Executive, and specifically the CRO to identify and review operations and technology risks and help put controls in place to monitor and control such exposures;
5.3.5 Overseeing the operational effectiveness of offshore services (including reviewing quality and effectiveness) of the relevant delivery centre network;	5.4.4 Overseeing firm-wide HR processes and policies, including recruitment and retention, learning and development and making recommendations to the ExCo (or as the case may be, the Audit Executive) for its approval;	5.5.1 Oversight of the IT services and business support services and ensuring they operate effectively, allowing high-quality delivery through the firm; escalating matters to the ExCo as required;	5.6.2 Oversight of the policies and procedures in place to ensure the firm's systems are compliant with the General Data Protection Regulation;
5.3.6 In collaboration with the Investment Committee, overseeing the development and delivery of the investment portfolio associated with the 3 Year Business Plan. This will include monitoring risks and mitigation plans through the delivery phase of investments and developing and monitoring key metrics to measure return on investment and lessons learned; and	5.4.5 Monitoring people policies and processes and regularly reviewing and making changes (or, recommending to the Audit Executive, where relevant) if thought appropriate and necessary;	5.5.2 Managing the firm's property portfolio and its facilities and overseeing the continued evolution of new ways of working; 5.5.3 Managing the firm's taxes and tax exposure; 5.5.4 Challenging the firm's Budget and Long-Term Plan; 5.5.5 Working with the Audit Executive and the Risk Executive to execute the technology strategy;	5.6.3 Regular review of compliance statistics against the firm's operational policies; 5.6.4 Discussing and receiving regular updates from Internal Audit on management actions, and progress against these;

Appendix 14: Operations Executive

Continued

Operations Executive – Terms of Reference

For the year ended 30 September 2024

- 5.6.5 Liaising with the Risk Executive in its responsibility to ensure the firm's insurance policies are appropriate in their terms and coverage; and
- 5.6.6 Identifying risk exposure issues arising in operations and acting on early warning and deviations from the business plan and/or budget, reviewing the adequacy of interventions and monitoring the effectiveness of remedial actions.
- 5.6.7 The Operations Executive may form working groups to accomplish the above outcomes and shall escalate appropriate issues and decisions to the ExCo and Audit Executive and, if necessary, the Board/Board Committees (eg, People Committee).
- 5.7 Other Matters
 - 5.7.1 The Operations Executive, as well as dealing with the above responsibilities, will also deal with the items on the annual work plan and anything else delegated to it by the ExCo.

6 Reporting

- 6.1 The Chair of the Operations Executive shall report formally to the ExCo on matters dealt with in the Operations Executive in as much detail as the ExCo requires.
- 6.2 The Operations Executive will decide what information, and in what form, it would like provided to it and make sure this is created and received by the members at regular intervals as agreed by the Operations Executive.
- 6.3 The Operations Executive shall, at the direction of the Chief Executive or another chair of another leadership group, share information and decisions as appropriate with the ExCo, the Risk Executive, the Audit Executive, Board, or the Board committees (as relevant).

7 Governance and Resources

- 7.1 The Committee shall, via the Secretary to the Committee, make available to new members of the Committee a suitable induction process and, for existing members, ongoing training as discussed and agreed by the Committee.

- 7.2 The Committee shall conduct an annual self-assessment of its activities under these Terms of Reference and report any conclusions and recommendations to the ExCo and, as part of this assessment, shall consider whether or not it receives adequate and appropriate support in fulfilment of its role and whether or not its annual plan of work is manageable.

- 7.3 The Operations Executive will have an annual work plan to help it address all of its responsibilities above. This work plan is a live document and will be updated to reflect matters of priority and items that need to be addressed.

- 7.4 The members will receive an agenda and any other appropriate or supporting information 3 days in advance of each meeting. The Secretary will keep minutes of its proceedings in the secure Operations Executive team space and will log actions in the standard Board and Executive Committee Jira-based action tracker. The Secretary will provide links to the minutes, papers, and the actions tracker as appropriate and on a timely basis to all members, record any changes in the membership and maintain appropriate records of decisions.

- 7.5 Minutes are submitted for formal approval to the Operations Executive at the next meeting.

8 Terms of Reference

The Operations Executive shall annually review its Terms of Reference and may recommend to the ExCo any amendments to its terms of reference.

Appendix 15: Risk Executive

Role

The Risk Executive provides the Executive Committee with appropriate oversight, governance and outcomes in relation to (i) risk management and (ii) reputation issues (including, but not limited to, legal, regulatory and conduct issues). The Risk Executive also supports the Operations Executive to manage operational, financial and people risk by providing oversight of the key risks in those areas.

The Risk Executive makes decisions, oversees implementation and provides guidance and assurance to the Executive Committee and the Board that the firm is acting within its agreed risk appetite and is achieving its strategic outcomes in relation to the following matters:

- Meeting or exceeding all relevant legal, regulatory, ethics and independence and compliance requirements.
- Improving relationships and building trust with regulators, clients and other stakeholders.
- Effectively monitoring and addressing threats and challenges to the Firm's brand and reputation.

The Risk Executive remains unchanged. However, as at 1 October 2024, it provides support to the Management Committee (previously the Operations Executive) to manage operational, financial and people risk by providing oversight of the key risks in those areas.

Members



John Bennett
Audit Head of Risk
KPMG in the UK



Neil Barnicoat
General Counsel
KPMG in the UK



Chris Heardl
Group Chief Operating and Financial Officer
KPMG in the UK



John Luke
Audit Head of Risk
KPMG in the UK



Andy Pyle
Deal Advisory Risk Management Partner
KPMG in the UK



Paul Heywood
Tax & Legal Risk Management Partner
KPMG in the UK



Simon Pilkington
Consulting Risk Management Partner
KPMG in the UK



John Costello
Deputy Chief Risk Officer and Head of Regions
KPMG in the UK



Andy Samsonoff
Chief Information Security Officer & Technology Risk Partner
KPMG in the UK

Appendix 15: Risk Executive

Continued

Risk Executive – Terms of Reference

For the year ended 30 September 2024

1 Purpose

1.1 The role of the Risk Executive shall be to provide the Executive Committee ("the ExCo") with appropriate oversight, governance and outcomes in relation to (i) risk management and (ii) reputation issues (including, but not limited to, legal, regulatory and conduct issues). The Risk Executive will also support the Operations Executive to manage operational, financial and people risk by providing oversight of the key risks in those areas.

1.2 The Risk Executive shall make decisions, oversee implementation and provide guidance and assurance to the ExCo and the UK LLP Board (the "Board") that the UK Firm is acting within its agreed risk appetite and is achieving its strategic outcomes in relation to the below matters, including: meeting or exceeding all relevant legal, regulatory, ethics and independence and compliance requirements; improving relationships and building trust with regulators, clients and other stakeholders; and effectively monitoring and addressing threats and challenges to the firm's brand and reputation.

2 Authority and Delegation (including working groups)

2.1 The Risk Executive is a sub-committee of the ExCo from which it derives its authority and to which it regularly reports. The ExCo derives its authority from the Board. The Risk Executive has authority to review and investigate any matters within its Terms of

Reference and to obtain such information as it may require from any member, officer or employee of KPMG in relation to such.

2.2 In order to discharge specific tasks and activities, including for analysis, consultations and escalations as appropriate, the Risk Executive has established the following Working Groups: Client Engagement Acceptance and Continuance (CEAC) Committee, Ethics Working Group, Information Governance Oversight Committee and the Policies, Controls and Compliance Working Group. Such working groups may be comprised of representatives of the Risk Executive and other individuals (including KPMG partners, officers and employees) with relevant expertise. Delegations to, and the terms of reference of, the Working Groups will be approved by the Risk Executive and reviewed on an annual basis.

2.3 The Risk Executive shall escalate appropriate issues and decisions to the ExCo and, if necessary, the Board or Board Committees.

3 Constitution

3.1 Chairperson

3.1.1 The Risk Executive will be chaired by the Chief Risk Officer. In the absence of the Chair, or an appointed deputy, the remaining members present shall elect one of themselves to chair the meeting.

3.2 Membership

3.2.1 Membership shall be ratified by the ExCo and shall include the following, or delegates acceptable to the Chair:

- Chief Risk Officer (Chair)
- General Counsel
- Chief Operating Officer
- COO – Risk & Legal
- Ethics Partner
- Head of Tax and Legal Risk
- Head of Audit Risk
- Head of Consulting Risk
- Head of Deals Risk.

3.3 Standing Invites

3.3.1 The following individuals are in attendance at the meeting but are not voting members:

- Head of Regulatory Affairs
- Head of KBS Risk
- Head of Regional Risk
- Head of Corporate Affairs (or their delegate)
- Chief Information Security Officer.

3.3.2 The Chief Executive will have a standing invitation to the Risk Executive and can attend when they wish.

3.4 Other attendees

3.4.1 Other individuals shall be asked to attend meetings as required at the discretion of the Chair.

3.5 Participation

3.5.1 Participation shall usually be in person, but as agreed with the Chair of the Risk Executive, a person/member may participate by telephone or via the Teams facility and be deemed to be present and/or constitute part of the Risk Executive for that meeting.

3.6 Duration of appointments

3.6.1 Unless otherwise determined by the ExCo, the duration of appointments of members of the Committee will be for a continuous term.

3.7 Secretary

3.7.1 A Committee Secretary shall be appointed to support the Committee from the Board Governance team.

3.7.2 The Secretary shall attend all meetings and will be responsible for recording the proceedings and decisions of the Committee meetings and the minutes shall be made available to all members and attendees, as appropriate.

Appendix 15: Risk Executive

Continued

Risk Executive – Terms of Reference

For the year ended 30 September 2024

4 Proceedings of Meetings

4.1 Frequency of Meetings

4.1.1 The Risk Executive shall meet at least monthly (or more often, at the discretion of the Chair) and shall provide regular reports and relevant qualitative and quantitative management information to the Board, Executive Committee, and the Board Risk Committee (as relevant).

4.2 Notice of Meetings

4.2.1 Unless otherwise agreed, notice of each meeting confirming the location, time and date shall be forwarded to each member of the Risk Executive and any other attendees required to attend.

4.3 Ad hoc meetings

4.3.1 Ad hoc meetings of the Risk Executive, other than those regularly scheduled, shall be convened by the Secretary at the request of any of the Risk Executive members, if they consider it necessary.

4.3.2 Additional ad hoc meetings can be set up where required by any member of the Risk Executive, with approval from the Chair, to consider particular circumstances.

4.4 Quorum

4.4.1 The majority of members may form a quorum. A duly convened meeting of the Risk Executive at which quorum is present shall be competent to exercise all or any of the authorities, powers and discretions vested in or exercisable by the Risk Executive.

4.5 Decisions

4.5.1 While making decisions the Risk Executive will take into consideration the Board approved Strategy and Risk Appetite, any instructions given to it by the ExCo to which it reports and in accordance with the Decision Matrix as approved from time to time by the ExCo.

4.5.2 The Risk Executive shall reach decisions by simple majority of those members voting on the matter in question. If the number for and against is equal the Chair of the Risk Executive shall have the casting vote or escalate the matter to the ExCo.

4.5.3 Any decision evidenced in writing or by electronic or voice recognition means, by such member or members of the Risk Executive as would have been necessary to pass such decision had all members of the Risk Executive been present

at a meeting to consider such resolution, shall be valid and effective as if it had been passed at a meeting of the Risk Executive duly convened and held, provided that notice and details of the proposed decision have been given in advance to each member of the Risk Executive.

5 Responsibilities

5.1 The Risk Executive's responsibilities shall be determined by the ExCo from time to time and, in any event, shall include the following responsibilities:

5.2 Risk Management (including compliance)

5.2.1 Risk management

- Approving the firm's Enterprise-Wide Risk Management Framework;
- Horizon scanning for emerging internal and external risks (including changes in the Enterprise-Wide Risk Management Framework);
- Performing deep dives into any new or emerging risks;
- Providing oversight of the firm's Information Security Programme;
- Providing oversight to ensure that the firm is operating within the Board's approved Risk Appetite;

- Reviewing the risk and control process ('RACA') and the watchlists received from Capabilities;
- Approving the principal risk statements for the Annual Report;
- Overseeing the adequacy of the risk training curriculum;
- Approval of new or any material changes to risk policies; and
- Considering on an annual basis the adequacy of the controls in place to manage each of the Level One risks.

5.2.2 Compliance

- Approving on an annual basis the firm's overall programme of compliance activity;
- Considering the results from the firm's key compliance programmes (including RCP, QPR and GCR), the adequacy of the proposed actions and monitoring to ensure that action plans are implemented in line with plans;
- Considering any breaches of laws or regulations (including of the FRC's Ethical Standard);
- Considering any themes arising from the annual quality & risk metrics process;

Appendix 15: Risk Executive

Continued

Risk Executive – Terms of Reference

For the year ended 30 September 2024

- Ensuring that the firm is compliant with the requirements of ISQM1;
- Ensuring that the firm implements all new KPMG International risk management policies, procedures, and any other requirements on a timely basis; and
- Ensuring that the firm is compliant with all KPMG International, regulatory and external accreditation requirements with respect to information security.

5.2.3 Reputation issues

- a) Litigation and regulatory action
 - Provide oversight to ensure that lessons learned from material litigation and regulatory actions are proactively considered and where necessary actions are taken to address findings;
 - Consider on an annual basis the adequacy of insurance coverage for all key professional risk insurances (PII, D&O & cyber) and make recommendations to the Board Risk Committee; and
- b) Regulatory affairs
 - Monitor the status of relationships with all key regulators;
 - Approve annual stakeholder engagement plan for all key regulators; and
 - Receive regular reporting to ensure that all key regulatory commitments are met.
- c) Conduct
 - Consider the results from the annual partner conduct verification process to ensure that all risks or warnings with regards to the fitness and propriety of all partners are being mitigated or handled appropriately and that any themes emerging are addressed;
 - Consider the six-monthly report from the Ombudsman on the operation of the Speak Up Hotline; and
- d) Other
 - Consider quarterly reporting on conduct issues to ensure that any hotspots or firm-wide emerging themes are identified and addressed.

6.3 The Risk Executive shall, at the direction of the Chair or another chair of another leadership group, share information and decisions as appropriate with the ExCo, the Operations Executive, the Board or the Board committees (as relevant).

7 Governance and Resources

7.1 The Risk Executive shall, via the Secretary to the Committee, make available to new members of the Committee a suitable induction process and, for existing members, ongoing training as discussed and agreed by the Committee.

7.2 The Risk Executive will have an annual work plan to help it address all of its responsibilities above. This work plan is a live document and will constantly be updated to reflect matters of priority and items that need to be addressed.

7.3 The members will receive an agenda and any other appropriate or supporting information one week in advance of each meeting and the Secretary will keep minutes of its proceedings and an action list, circulate those minutes/action list as appropriate, record any changes in the membership and maintain appropriate records of decisions.

7.4 Minutes of meetings and the action list shall be made available promptly to all members and those that need them to undertake any action by the Risk Executive.

Appendix 15: Risk Executive

Continued

Risk Executive – Terms of Reference

For the year ended 30 September 2024

7.5 The Risk Executive shall conduct an annual assessment of its activities under these terms of reference and report any conclusions or recommendations to the ExCo and, as part of that assessment, shall consider whether or not it receives adequate and appropriate support in fulfilment of its role and whether or not its annual work plan is manageable.

8 Terms of Reference

The Risk Executive shall annually review its Terms of Reference and may recommend to the ExCo any amendments to its terms of reference.

Appendix 16: Audit Executive

Role

The Audit Executive manages the day-to-day activities of the Audit practice of the firm through developing and implementing strategy, operational plans, policies, procedures and budgets; driving and monitoring operating and financial performance; promoting and role-modelling a strong culture that supports audit quality; assessing and controlling risk; and prioritising and allocating resources.

The Audit Executive makes decisions, oversees implementation and reports to the Board (through the Executive Committee) and to the Audit Board, providing assurance that the firm is acting within its agreed risk appetite and is achieving its strategic outcomes in relation to Audit.

Members



Catherine Burnet
Head of Audit
KPMG in the UK



John Bennett
Audit Head of Risk
KPMG in the UK



Chris Heardl⁴⁵
Group Chief Operating and Financial Officer
KPMG in the UK



Mick Davies
Chief Operating Officer, Audit
KPMG in the UK



Emily Jefferis
Head of Audit Quality
KPMG in the UK



Salim Tharani
Audit PGL, Financial Services
KPMG in the UK



Simon Haydn-Jones
Audit PGL, Corporate, Listed and Regulated (CLR)
KPMG in the UK



Aimie Keki
Audit PGL, KPMG Private Enterprise (KPE)
KPMG in the UK



John Luke
Audit Head of Risk
KPMG in the UK



Matt Campbell
Chief Technology Officer
KPMG in the UK



Jill Loughran
Head of People, Audit
KPMG in the UK



Suvro Dutta⁴⁶
Head of Assurance and Accounting
KPMG in the UK



Fleur Nieboer⁴⁷
Head of Accounting, Advisory & Assurance
KPMG in the UK

⁴⁵ Chris Heardl resigned from the Audit Executive with effect from 22 July 2024.

⁴⁶ Suvro Dutta resigned from the Audit Executive with effect from 1 January 2024.

⁴⁷ Fleur Nieboer was appointed on 1 January 2024.

Appendix 16: Audit Executive

Continued

Audit Executive – Terms of Reference

For the year ended 30 September 2024

1 Purpose

1.1 The purpose of the Audit Executive is to manage the day-to-day activities of the Audit practice of the firm through:

- Developing and implementing strategy, operational plans, policies, procedures and budgets;
- Driving and monitoring operating and financial performance;
- Promoting and role-modelling a strong culture that supports audit quality;
- Assessing and controlling risk; and
- Prioritising and allocating resources.

1.2 In fulfilling its purpose, the Audit Executive shall give due consideration to:

- The firm's obligations and commitments as a member firm of the KPMG global network;
- Balancing the interests of various stakeholders (employees, partners, audited entities, regulators and the public at large);
- Upholding the integrity, brand and reputation of KPMG; and
- Planning the Audit practice's future development.

1.3 In fulfilling its responsibilities (set out in section 5) the Audit Executive ensures that the firm discharges its public interest responsibilities in relation to Audit, in particular, prioritising audit quality and the application of Ethical Standards and the ICAEW's Code of Ethics, and compliance

with regulation (including the FRC's Principles of Operational Separation).

2 Authority and Delegation (including Working Groups)

2.1 The Audit Executive is a sub-committee of the Executive Committee from which it derives its authority and to which it regularly reports. The Executive Committee derives its authority from the Board.

2.2 The Audit Executive also reports to the Audit Board, which derives its authority from the Board to oversee the KPMG Audit practice.

2.3 The Audit Executive has delegated authority from the Executive Committee in respect of functions and powers set out in these Terms of Reference and the responsibilities set out above.

2.4 The Audit Executive has authority to review and investigate any matter within its Terms of Reference and to obtain such information as it may require from any member, officer or employee of KPMG in relation to such.

2.5 Working groups of the Audit Executive may be established by the Audit Executive for specific tasks and activities, including for analysis, consultations and escalations as appropriate. Such working groups may be comprised of representatives of the Audit Executive and other individuals (including KPMG partners, officers and employees) with relevant expertise. Only members of the Audit Executive however will be able to make decisions on matters.

2.6 Delegations to, and the terms of reference of, the working groups will be approved by the Audit Executive and reviewed on an annual basis.

3 Constitution

3.1 Chair

3.1.1 The Audit Executive will be chaired by the Head of Audit. In the absence of the Chair, or an appointed deputy, the remaining members present shall elect one of themselves to chair the meeting.

3.1.2 In the event that the Chair, or the Chair of the meeting of the Audit Executive, declares a conflict of interest, or the Audit Executive decides that such individual has a conflict of interest, then an appointed deputy shall chair the meeting or the relevant part of the meeting. If the appointed deputy is also not available to chair the meeting or the relevant part of the meeting, then the members of the Audit Executive shall nominate a Chair from amongst themselves.

3.1.3 Each member of the committee shall satisfy all independence checks before their membership is confirmed on the committee.

3.2 Membership

3.2.1 Membership shall be ratified by the Executive Committee and shall include the following, or delegates acceptable to the Chair subject to independence clearance:

- Head of Audit (Chair)
- Chief Operating and Finance Officer
- Chief Risk Officer
- COO for Audit
- CRO for Audit
- Head of People for Audit
- Head of Audit Quality
- PGL of KPE Audit (including PS)
- PGL of FS Audit
- PGL of CLR Audit
- UK Head of Assurance and Accounting
- Chief Technology Officer for Audit.

3.2.2 Any other members may be appointed by the Chair and ratified by the Executive Committee.

Appendix 16: Audit Executive

Continued

Audit Executive – Terms of Reference

For the year ended 30 September 2024

3.3 Standing attendees

- 3.3.1 The following individuals will have a standing invitation to the Audit Executive and can attend when they wish:
 - Chief Executive
 - Head of Corporate Affairs (in relation to Reputational Matters)
 - Head of Governance/Board Secretary.

3.4 Other attendees

- 3.4.1 Other individuals shall be asked to attend meetings as required at the discretion of the Chair.

3.5 Duration of appointments

- 3.5.1 Unless otherwise determined by the Executive Committee, the duration of appointments will be for a continuous term.

3.6 Secretary

- 3.6.1 A Committee Secretary shall be appointed to the Audit Executive by the Head of Governance/Board Secretary.
- 3.6.2 The Secretary shall attend all meetings and will be responsible for circulating documents in advance of the meetings and actions and documenting decisions.

4 Proceedings of the Meetings

4.1 Frequency

- 4.1.1 The Audit Executive shall meet at least monthly (or more, at the discretion of the Chair) and shall provide regular reports and relevant qualitative and quantitative management information to the Board, Executive Committee, Audit Board, the Board People Committee and Board Risk Committee (as relevant).

4.2 Notice of meetings

- 4.2.1 Unless otherwise agreed, notice of each meeting confirming the location, time and date shall be forwarded to each member of the Audit Executive and any other attendees required to attend.

4.3 Ad hoc Meetings

- 4.3.1 Ad hoc meetings, other than those regularly scheduled, shall be summoned by the Secretary at the request of any of its members, if they consider it necessary.

4.4 Quorum

- 4.4.1 Any four members may form a quorum. A duly convened meeting of the Audit Executive at which quorum is present shall be competent to exercise all or any of the authorities, powers and discretions vested in or exercisable by the Audit Executive.

4.5 Participation

- 4.5.1 Participation shall usually be in person but, as agreed with the Chair of the Audit Executive, a member/attendee may participate in a meeting of the Audit Executive from separate locations by means of conference technology or other communications equipment enabling those present to hear and speak to each other and shall be deemed to be present in person at such meeting for all purposes and shall be counted towards a quorum accordingly.

4.6 Conflict of Interest

- 4.6.1 If a member of the Audit Executive finds themselves with a conflict of interest in relation to a particular subject, they shall immediately disclose this to the Chair, and where appropriate, recuse themselves from any deliberation or vote of the Audit Executive on the matter in question.

4.7 Decisions

- 4.7.1 The Audit Executive shall make decisions, oversee implementation and report to the Board (through the Executive Committee) and to the Audit Board, providing assurance that the firm is acting within its agreed risk appetite and is achieving its strategic outcomes in relation to Audit.

- 4.7.2 The Audit Executive will only make decisions which involve the Audit practice of the firm.

- 4.7.3 While making decisions the Audit Executive will take into consideration the Board approved Strategy and Risk Appetite, and any instructions given to it by the Executive Committee to which it reports. The Audit Executive shall reach decisions by simple majority of those members voting on the matter in question. If the number for and against is equal the Chair of the Audit Executive shall have the casting vote or may escalate the matter to the Executive Committee.

- 4.7.4 Any decision evidenced in writing or by electronic or voice recognition means, by such member or members of the Audit Executive as would have been necessary to pass such decision had all members of the Audit Executive

Appendix 16: Audit Executive

Continued

Audit Executive – Terms of Reference

For the year ended 30 September 2024

<p>been present at a meeting to consider such resolution, shall be valid and effective as if it had been passed at a meeting of the Audit Executive duly convened provided that notice and details of the proposed decision have been given in advance to each member of the Audit Executive.</p>	<p>5.2.5 Evaluating and deciding, in appropriate liaison with other capabilities, which opportunities or key targets to pursue; and</p> <p>5.2.6 Reviewing the pipeline of confirmed and prospective audit appointments.</p>	<p>5.3.6 Implementing the changes in operational procedures required by the FRC's Principles of Operational Separation or by the Global Audit Quality Transformation Programme and any other changes required by the Global organisation; and</p>	<p>Committee or the Board, within the firm's investment framework, subject to oversight from the Audit Board; and</p>
<p>5 Responsibilities</p>	<p>5.3 Audit Quality</p>	<p>5.3.7 Achieving the targets set by our external regulatory reviewers (i.e. AQR, QAD, and PCAOB) and the Firm's internal Quality Performance Reviews.</p>	<p>5.5 People & Culture</p>
<p>5.1 The Audit Executive's responsibilities shall be determined by the Executive Committee and from time to time and, in any event, shall include the following responsibilities:</p>	<p>5.3.1 Developing the strategy for Audit, which shall take into account recommendations from the Audit Board, so that it prioritises the delivery of high-quality audits;</p> <p>5.3.2 Maintaining audit quality in audit service delivery across coverage areas and regionally and together with the CRO deal with matters that arise in relation to audit quality;</p> <p>5.3.3 Developing a culture to drive a focus on Audit Quality, and ensuring audit quality is a key consideration in all aspects of recruitment, promotion and reward matters;</p> <p>5.3.4 Embedding the Single Quality Plan and periodically reviewing the need for further changes;</p> <p>5.3.5 Continuing to refine the materials, training and guidance for the Audit practice in order to respond proactively to changes in regulations and in response to internal and external review findings;</p>	<p>5.4 Performance</p> <p>5.4.1 Developing and ensuring delivery of the 3 year Business Plan and budget for the Audit practice, consistent with the Board approved Audit strategy;</p> <p>5.4.2 Using technology to develop new processes to support and improve the delivery of audits;</p> <p>5.4.3 Together with the Operations Executive discuss and agree operational matters for Audit (within budget and consistent with the 3-year Business Plan) including recruitment, promotions, salary and bonuses for Audit staff;</p> <p>5.4.4 Working with the Operations Executive to evaluate and approve investment proposals in Audit (within the Investment Framework and including technology), seeking approval from the Executive</p>	<p>5.4.5 Monitoring stakeholder feedback, win rates and revenue targets.</p> <p>5.5.1 Overseeing the delivery of the firm's People Strategy insofar as it relates to the Audit practice;</p> <p>5.5.2 Managing overall Audit partner numbers consistent with the Board approved 3- year Business Plan and budget, subject to oversight from the Audit Board and its Remuneration Committee;</p> <p>5.5.3 Managing, supporting and empowering Audit staff;</p> <p>5.5.4 Ensuring all lateral hires are integrated well into the business and become effective as quickly as possible;</p> <p>5.5.5 Implementing and monitoring delivery of Inclusion, Diversity and Equity (IDE) plans and gender and ethnicity pay gap targets in the Audit practice;</p> <p>5.5.6 Delivering on the firm's desired cultural, ethical and behavioural objectives in relation to supporting audit quality; and</p> <p>5.5.7 Considering the future of the audit profession.</p>

Appendix 16: Audit Executive

Continued

Audit Executive – Terms of Reference

For the year ended 30 September 2024

5.6 Risk

- 5.6.1 Together with the Risk Executive, developing the firm's Audit quality and risk frameworks and complying with the Global and UK Audit quality and risk frameworks;
- 5.6.2 Overseeing the implementation of the Enterprise-Wide Risk Management Framework in Audit, approved by the Board to adopt an appropriate quality, risk and controls framework and embed proper process and disciplines into all aspects of operations and service delivery to achieve audit quality targets;
- 5.6.3 Monitoring and assessment of Audit risks;
- 5.6.4 Overseeing the quality in Audit delivery across coverage areas and regionally including appropriate capability and capacity to provide the audit services; and
- 5.6.5 Ensuring everyone across Audit is trained in and adheres to the firm's quality and risk management frameworks, escalating issues and imposing sanctions for non-compliance.
- 5.6.6 As well as dealing with the above responsibilities, the Audit Executive shall also attend to items on the annual work plan and anything else delegated to it by the Executive Committee or the Audit Board.

6 Responsibilities

- 6.1.1 The Chair of the Audit Executive shall report formally to the Executive Committee and Audit Board on matters dealt with in the Audit Executive in as much detail as the Executive Committee and Audit Board requires.
- 6.1.2 The Audit Executive will decide what information, and in what form, it would like provided to it and make sure this is created and received by the members at regular intervals as agreed by the Audit Executive.
- 6.1.3 The Audit Executive shall, at the direction of the Chair or another Chair of another leadership group, share information and decisions as appropriate with the Executive Committee, the Audit Board, Executive groups, the Board or the Board's committees (as relevant).

7 Governance

- 7.1.1 The Audit Executive shall conduct an annual assessment of its activities under these Terms of Reference and report any conclusions or recommendations to the Executive Committee and Audit Board, as part of that assessment, and shall consider whether or not it receives adequate and appropriate support in fulfilment of its role and whether or not its annual work plan is manageable.

7.1.2

The Audit Executive will have an annual work plan to help it address all of its responsibilities above. This work plan is a live document and will constantly be updated to reflect matters of priority and items that need to be addressed.

7.1.3

Ordinarily, the members will receive an agenda and any other appropriate or supporting information one week in advance of each meeting and the Secretary will keep minutes of its proceedings and an action list, circulate those minutes/action list as appropriate, record any changes in the membership and maintain appropriate records of decisions.

7.1.4

Minutes of meetings and the action list shall be circulated promptly to all members and those that need them to undertake any action by the Audit Executive. Minutes are submitted for formal approval to the Audit Executive at the next meeting.

8 Terms of reference

The Audit Executive shall annually review its Terms of Reference and may recommend to the Executive Committee any amendments to its terms of reference.

Appendix 17: Public Interest Committee

Role

In accordance with the Audit Firm Governance Code (AFGC), the firm has a Public Interest Committee (PIC). This PIC comprises entirely of Independent Non-Executives (INEs).

The key responsibilities of the PIC are to provide comment, challenge and recommendations relevant to the public interest in the context of KPMG's UK business. Specifically, they provide independent oversight of the firm's policies and processes for the core objectives defined within the AFGC:

- Promoting Audit Quality (in liaison with the Audit Board)
- Securing the firm's reputation more broadly (including its non-audit business)
- Reducing the risk of firm failure
- Fulfilling the multi-disciplinary firm's public interest responsibilities.

Within the governance of KPMG in the UK, it is important for the INEs to remain in a position of independence from the leadership decision-making of the firm and outside its chain of command. As such, although they may vote on recommendations as a PIC, they do not carry votes on the Board or its other Committees. Notwithstanding this, the INEs have access and a full opportunity to question and challenge KPMG in the UK at both the Board and Board Committee level. They are also able to comment on the activities of KPMG in the UK to external stakeholders, including our regulators, in an objective and dispassionate way in furtherance of their public interest role.

The Public Interest Committee comprises at least three INEs – as at 30 September 2024, the PIC comprised three INEs. The Chair of the PIC is an INE appointed by the Chair (in consultation with the Group Chair) and approved by the Board. The INEs of the PIC are appointed for a term of up to three years, with the option for this to be renewed by the Board for an additional two terms of three years each, subject to a maximum of nine years in aggregate.

Members



Jonathan Evans
Independent Non-Executive & Chair of the
Public Interest Committee
KPMG in the UK



Anne Bulford
Independent
Non-Executive
KPMG in the UK



Kathleen O'Donovan
Audit Non-Executive
KPMG in the UK

Appendix 17: Public Interest Committee

Continued

Report on the Public Interest Committee's activities during the year

For the year ended 30 September 2024

Areas of oversight

The Public Interest Committee has overseen the impact of the firm's activities on its public interest responsibilities through consideration of:

- The firm's strategy, including proposals and updates in relation to the merger of the UK and Switzerland member firms as well as key business developments such as the use of artificial intelligence and the creation of One Advisory (bringing our Consulting and Deal Advisory businesses together as one team).
- The firm's risk management and internal controls framework and compliance with regulations, including its implementation of the International Standard of Quality Management (ISQM1).
- The monitoring of financial performance of the business and budgets. This included firm-wide and cross-business operations and the firm's compliance with the FRC's Principles for Operational Separation.
- The firm's people policies and the impact of initiatives and procedures for training, IDE and remuneration. This included oversight of the partner balanced scorecard.
- The firm's culture, including overseeing initiatives taken by the firm and progress against key performance indicators to ensure that the appropriate culture exists throughout the organisation.

- Compliance with the firm's [Code of Conduct](#). This included regular private updates from the Head of Ethics and Independence, including the number of cases reported to the firm's independently run Speak Up whistleblowing hotline and ensuring appropriate ethical standards and behaviour.
- Any matters relevant to the public interest with respect to the multi-disciplinary services provided by the firm or others within the professional service industry, including updates on audit quality, the lessons learned and any actions taken from regulatory investigations and tribunals.
- The impact of wider network issues beyond the UK firm, which included updates from the Global CEO, the Global Head of Audit and the Global Head of Risk and Regulatory.
- The firm's engagement with its stakeholders, including investors, audit committee chairs and regulators.

In numbers

- During the reporting period, the Public Interest Committee held three formal meetings.



Looking ahead to FY25

- Continue to engage with the Audit Non-Executives and their oversight of the Audit practice.
- Monitor the progress made in relation to the merger of KPMG UK and KPMG Switzerland, and the impact on governance arrangements.
- Monitor the firm's progress in relation to commitments made to regulators, as well as any developments from UK and overseas regulators.
- Oversee the execution of the firm's Culture Ambition and Ethical Health Plan.
- Monitor how the firm manages operational and financial resilience.
- Engage with the global network and continue to inform the UK firm's consideration of network risk.
- Monitor the firm's use of AI and the impact of developments in technology.
- Monitor the firm's responses to the Audit and Corporate Governance reforms.

Appendix 17: Public Interest Committee

Continued

Public Interest Committee – Terms of Reference

For the year ended 30 September 2024

1 Background and Purpose

- 1.1 The Revised 2022 Audit Firm Governance Code ("the AFGC") provides a benchmark of good governance practice against which firms which audit listed companies can report and sets out responsibilities for Independent Non-Executives (the "INEs").
- 1.2 The Financial Reporting Council's 2020 Principles for Operational Separation of the Audit Business in large audit firms, such as KPMG LLP, set out arrangements to be implemented by such firms in pursuit of two public interest objectives, namely the improvement of audit quality and audit market resilience.
- 1.3 The Public Interest Committee ("the PIC") is KPMG LLP's public interest body as contemplated by the AFGC and also aims to provide an effective and efficient mechanism for the discharge of some of the responsibilities of the INEs set out in the AFGC and a forum for oversight of the firm's appropriate implementation of the Principles for Operational Separation in the public interest.
- 1.4 The PIC, including through the involvement of the INEs, has an oversight role in respect of the firm's policies and processes for:
 - Fulfilling the multi-disciplinary firm's public interest responsibilities;
 - Promoting audit quality (in liaison with the Audit Board)⁴⁸;

- Helping the firm secure its reputation more broadly, including in its non-audit businesses; and
- Reducing the risk of firm failure and ensuring its resilience and sustainability.

- 1.5 The INEs provide constructive challenge and specialist advice with a focus on the public interest in firm-wide operations and activities, forming their own views on where the public interest lies.

2 Authority

- 2.1 The PIC is a Committee established by KPMG LLP.
- 2.2 The PIC has delegated authority from the LLP in respect of the functions and powers set out in these Terms of Reference.
- 2.3 The Terms of Reference are approved by the Board of KPMG LLP.
- 2.4 The PIC has authority to investigate any matter within its Terms of Reference and to obtain such information as it may require from any partner, officer or employee.

3 Constitution

- 3.1 Chairperson
 - 3.1.1 The Chair of the PIC will be an Independent Non-Executive appointed by the Chair and approved by the Board.

- 3.1.2 In the absence of the Chair of the PIC, the remaining Independent Non-Executive members present shall elect one of themselves to chair the meeting.

- 3.1.3 In the event that the Chair of the Committee declares a conflict of interest, or the Committee decides that such individual has a conflict of interest, then the remaining members of the Committee shall appoint an individual from amongst themselves to chair the meeting or the relevant section of the meeting.

3.2 Membership

- 3.2.1 The PIC comprises at least three INEs.
- 3.2.2 Any or all members of the PIC may be removed at any time by the vote of at least 75 percent of the Board. The relevant member will be entitled to make representations in writing in connection with the voting on such resolution.

3.3 Duration of appointments

- 3.3.1 The Independent Non-Executives of the PIC shall be appointed for a term of up to three years, with the option for this to be renewed by the Board for an additional two terms of three

years each, subject to a maximum of nine years in aggregate. Appointments and renewals shall be recommended to the Board by the Nominations Committee.

3.4 Secretary

- 3.4.1 The Board Secretary or their nominee shall act as Secretary to the PIC and attend all meetings.
- 3.4.2 The Secretary shall record the proceedings and decisions of PIC meetings and the minutes shall be circulated to all members and attendees, as appropriate, taking into account any conflicts of interest that may exist.

4 Proceedings of Meetings

- 4.1 Frequency of Meetings
 - 4.1.1 The PIC shall meet at least four times a year and otherwise as required.
 - 4.1.2 Meetings of the PIC may be called by the Chair of the PIC at any time to consider any matters falling within these Terms of Reference.
- 4.2 Quorum
 - 4.2.1 Any two Independent Non-Executive members of the PIC may form a quorum.

⁴⁸ Until such time as any future revisions to the AFGC are published by the FRC, in the context of its Principles for Operational Separation, the PIC will continue to have an oversight role in respect of the firm's policies and processes for promoting audit quality; the PIC will undertake this role in close liaison with the Audit Board.

Appendix 17: Public Interest Committee

Continued

Public Interest Committee – Terms of Reference

For the year ended 30 September 2024

<p>4.2.2 A duly convened meeting of the PIC at which a quorum is present shall be competent to exercise all or any of the authorities, powers and discretions vested in or exercisable by the PIC.</p> <p>4.2.3 The members of the PIC may participate in a meeting of the PIC from separate locations by means of conference telephone or other communication equipment which allows those participating to hear each other and be heard, and shall be entitled to vote or be counted in the quorum accordingly.</p> <p>4.3 Attendees</p> <p>4.3.1 Only PIC members have the right to attend PIC meetings.</p> <p>4.3.2 The following are anticipated to attend PIC meetings on a regular basis:</p> <ul style="list-style-type: none"> a) Chair of the Board b) Chief Risk Officer c) Head of Regulatory Affairs d) Chair of Audit Board e) Ethics Partner f) General Counsel g) Board Secretary or nominee. 	<p>4.3.3 The following attend the PIC on a periodic basis in liaison with the Chair of the PIC:</p> <ul style="list-style-type: none"> a) Chief Executive b) Chief Operating and Financial Officer c) Chief People Officer d) Head of Audit. <p>4.3.4 Any partner, officer or employee of the LLP may attend at the invitation of the Chair of the PIC and they may collectively or individually be requested to withdraw from meetings of the PIC if required to do so by the Chair of the PIC.</p> <p>4.4 Conflicts of interest of individual PIC members. If a member of the PIC finds themselves with a conflict of interest, they shall immediately disclose this to the Chair of the PIC and the Chair.</p>	<p>been present at a meeting to consider such resolution, shall be valid and effective as if it had been passed at a meeting of the PIC duly convened and held, provided that notice and details of the proposed resolution have been given in advance to each member of the PIC.</p> <p>6 Oversight Responsibilities</p> <p>6.1 The PIC is responsible for ensuring that the INEs deliver the requirements stated of their role in the Audit Firm Governance Code.⁴⁹</p> <p>6.2 The PIC will review the impact of the firm's activities on its public interest responsibilities through consideration of</p> <ul style="list-style-type: none"> – the firm's strategy; – the firm's risk management and internal controls frameworks and compliance with regulations; – the firm's assessment of principal risks including those that would threaten the business model, future performance, solvency or liquidity, and insofar as they relate to the sustainability of the Audit practice, liaise with the Audit Board accordingly; – the firm's financial performance, investments, capital and insurance arrangements; – the firm's operational policies and procedures including client management processes and global network initiatives; <p>6.3 The PIC will be consulted during the development and modification of the firm's strategy, and may make recommendations prior to their approval by the Board.</p> <p>6.4 With respect to changes in regulation and any regulatory matters which may significantly impact the firm, the PIC will be consulted so as to provide input to any deliberations or decisions of the Board related to them.</p>
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⁴⁹ See Appendix to these Terms of Reference – relevant sections from Audit Firm Governance Code.

Appendix 17: Public Interest Committee

Continued

Public Interest Committee – Terms of Reference

For the year ended 30 September 2024

6.5 The PIC will independently and in conjunction with the firm's leadership and the independent Audit Non-Executives (members of the Audit Board) engage with regulators, investors and other stakeholders to enhance stakeholder confidence in the public interest aspect of the firm. In this context, the INEs will meet at least once a year with representatives of the FRC.

6.6 The PIC shall make recommendations to the LLP Board with respect to material communications to regulators and KPMG's responses to relevant consultations.

6.7 As part of the PIC's wider oversight role, individual INEs frequently attend the Board and Board Committees so as to support their role as contemplated by the AFGC to:

- i) monitor the activities of the wider firm and global network for their potential to affect audit quality and the resilience of the Audit practice (liaising with the Audit Board as necessary); and
- ii) ensure the firm takes account of the public interest in its wider decision making.

6.8 In relation to each of the matters set out in paragraph 6, the PIC will liaise with the Audit Board which has public interest oversight responsibilities with respect to the Audit practice (and on which the PIC may reasonably rely). In this context, the Chair of the PIC will liaise with the Chair of the Audit Board regarding the Audit practice, audit quality, reputational

risks in Audit, the impact of the non-Audit businesses of the firm upon audit quality, and the resilience of the practice.

7 Reporting

7.1 The INEs' principal points of contacts are the Chair, Chief Executive and Chief Risk Officer.

7.2 The INEs shall also have regular contact with the Ethics Partner.

7.3 The Chair of the PIC will provide a report to the Board on the PIC's activities after each quarterly meeting.

7.4 The Chair of the PIC shall compile a report of the work of the PIC in discharging its responsibilities for inclusion in the Transparency Report, including a description of significant issues dealt with by the PIC. The PIC will agree a statement of how the Board, the Audit Board and INEs have worked during the year detailing specific PIC activities and stakeholder engagement to fulfil the AFGC's purpose, for inclusion in the Transparency Report.

7.5 The PIC shall work and liaise as necessary with the Audit Board and other committees of the Board to which the INEs shall have a standing invitation.

7.6 The INEs shall alert the Regulator as soon as possible if they have concerns in the following circumstances:

- 7.6.1 the INE believes the firm is acting contrary to the public interest; or

7.6.2 the INE believes the firm is endangering the objectives of the AFGC; or

7.6.3 the INE initiates the procedure for fundamental disagreements.

8 Governance and Resources

8.1 The firm shall, through the Secretary to the PIC, make available to new members of the PIC a suitable induction process and, for existing members, ongoing training as discussed and agreed by the PIC.

8.2 The PIC shall conduct an annual self-assessment of its activities under these Terms of Reference and shall conduct an externally facilitated evaluation every three years. The PIC shall report any conclusions and recommendations to the Board and, as part of this assessment, shall consider whether or not it receives adequate and appropriate support in fulfilment of its role and whether or not its annual plan of work is manageable. The Chair of the PIC, supported by the Secretary to the PIC, shall be responsible for acting on the results of the self-assessment and embedding the recommendations from the externally facilitated evaluation.

8.3 The PIC shall in its decision making give due regard to any relevant legal or regulatory requirements, and associated best practice guidance, as well as to the risk and reputation implications of its decisions (liaising where relevant with other Committees).

8.4 The firm shall provide access to sufficient resources to the PIC and INEs in order for them to carry out their duties and they shall have the power to engage independent counsel and other professional advisers and to invite them to attend meetings.

8.5 The PIC shall be consulted with regard to any dispute between the Audit Board and the LLP Board concerning a decision to include any report in the firm's Transparency Report relating to a disagreement between the Audit Board and the LLP Board. Any INE who sits on the Audit Board may recuse themselves from such consultation (but shall not be obliged so to do). This mechanism shall not limit the ability of the INEs or the Audit Non-Executives to disclose such disagreements to the FRC or, in the event of resignation by an INE, to disclose such disagreements in a public statement as contemplated by the AFGC.

9 Terms of Reference

The PIC shall annually review its Terms of Reference and may recommend to the Board any amendments to its Terms of Reference.

Appendix 17: Public Interest Committee

Continued

Public Interest Committee – Terms of Reference

For the year ended 30 September 2024

Appendix: INE/PIC Role

Extracts from the 2022 Audit Firm Governance Code

Leadership Principles

- C A firm's Management should demonstrate its commitment to the public interest through their pursuit of the purpose of this Code and regular dialogue with the INEs. Management should embrace the input and challenge from the INEs (and ANEs).
- E The Management of a firm should ensure that members of its governance structures, including owners, INEs and ANEs, are supplied with information in a timely manner and in a form and of a quality appropriate to enable them to discharge their duties.

Provisions

- A.7 There should be a formal annual evaluation of the performance of the Board and any committees, plus the public interest body. A firm should consider having a regular externally-facilitated board evaluation at least every three years.
- A.8 Management should ensure that, wherever possible and so far as the law allows, members of governance structures and INEs and ANEs have access to the same information as is available to Management.

People, Values and Behaviour

Provisions

- B.11 A firm should have a code of conduct which it discloses on its website and requires everyone in the firm to apply. The Board and INEs should oversee compliance with it.
- B.15 A firm should assess and monitor culture. It should conduct a regular review of the effectiveness of the firm's systems for the promotion and embedding of an appropriate cultures underpinned by sound values and behaviour across the firm, and in audit in particular. INEs should be involved in this review and where a firm has implemented operational separation the ANEs should be involved in the review as it relates to the audit practice. Where it is not satisfied that policy, practices or behaviour throughout the business are aligned with the purpose of this Code, it should take corrective action.
- B.16 A firm should establish mechanisms for delivering meaningful engagement with its people. This should include arrangements for people to raise concerns in confidence and anonymously and to report, without fear, concerns about the firm's culture, commitment to quality work, the public interest and/or professional judgement and values. The INEs should be satisfied that there is an effective whistleblowing policy and procedure in place and should monitor issues raised under that process.

- B.17 INEs should be involved in reviewing people management policies and procedures, including remuneration and incentive structures, recruitment and promotion processes, training and development activities, and diversity and inclusion, to ensure that the public interest is protected. They should monitor the firm's success at attracting and managing talent, particularly in the audit practice. Where operational separation is in place the ANEs should be involved in this process.

- B.18 INEs and ANEs should use a range of data and engagement mechanisms to understand the views of colleagues throughout the firm and to communicate about their own roles and the purpose of this Code. One INE should be designated as having primary responsibility for engaging with the firm's people.

Operations and Resilience

Provisions

- C.22 A firm should develop robust datasets and effective management information to support monitoring of the effectiveness of its activities, including by INEs (and ANEs), and its ability to furnish the regulator with information.
- C.24 A firm should monitor its risk management and internal control systems, and, at least annually, conduct a review of their effectiveness. INEs should be involved

in the review which should cover all significant controls, including financial, operational and compliance controls and risk management systems.

- C.25 A firm should carry out a robust assessment of the principal risks facing it, including those that would threaten its business model, future performance, solvency or liquidity. This should reference specifically the sustainability of the audit practice in the UK. INEs (and in firms with operational separation, ANEs) should be involved in this assessment.

INES and ANEs

Principles

- M A firm should appoint INEs to the governance structure who through their involvement collectively enhance the firm's performance in meeting the purpose of this Code. INEs should be positioned so that they can observe, challenge and influence decision-making in the firm.

- N INEs (and ANEs) should provide constructive challenge and specialist advice with a focus on the public interest. They should assess and promote the public interest in firm operations and activities as they relate to the purpose of this Code, forming their own views on where the public interest lies.

Appendix 17: Public Interest Committee

Continued

Public Interest Committee – Terms of Reference

For the year ended 30 September 2024

O INEs (and ANEs) should maintain and demonstrate objectivity and an independent mindset throughout their tenure. Collectively they should enhance public confidence by virtue of their independence, number, stature, diverse skillsets, backgrounds, experience and expertise. They should have a combination of relevant skills, knowledge and experience, including of audit and a regulated sector. They owe a duty of care to the firm and should command the respect of the firm's owners.

P INEs (and ANEs) should have sufficient time to meet their responsibilities. INEs (and ANEs) should have rights consistent with discharging their responsibilities effectively, including a right of access to relevant information and people to the extent permitted by law or regulation, and a right, individually or collectively, to report a fundamental disagreement regarding the firm to its owners and, where ultimately this cannot be resolved and the independent non-executive resigns, to report this resignation publicly.

Q INEs (and ANEs) should have an open dialogue with the regulator.

Provisions

- 29 INEs should number at least three, be in the majority on a body chaired by an INE that oversees public interest matters and be embedded in other relevant governance structures within the firm as members or formal attendees with participation rights. If a firm considers that having three INEs is unnecessary given its size or the number of public interest entities it audits, it should explain this in its transparency report and ensure a minimum of two at all times. At least one INE should have competence in accounting and/or auditing, gained for example from a role on an audit committee, in a company's finance function or at an audit firm.
- 30 INEs should meet regularly as a private group to discuss matters relating to their remit. Where a firm adopts an international approach to its management and/or governance it should have at least three INEs with specific responsibility and relevant experience to focus on the UK business and to take part in governance arrangements for this jurisdiction. The firm should disclose on its website the terms of reference and composition of any governance structures whose membership includes INEs, whether in the UK or another jurisdiction.
- 31 INEs should have full visibility of the entirety of the business. They should assess the impact of firm strategy, culture, senior appointments, financial performance

and position, operational policies and procedures including client management processes, and global network initiatives on the firm and the audit practice in particular. They should pay particular attention to and report in the transparency report on how they have worked to address: risks to audit quality; the public interest in a firm's activities and how it is taken into account; and risks to the operational and financial resilience of the firm.

- 32 A firm should establish a nomination committee, with participation from at least one INE, to lead the process for appointments and re-appointments of INEs (and ANEs), to conduct a regular assessment of gaps in the diversity of their skills and experience and to ensure a succession plan is in place. The nomination committee should assess the time commitment for the role and, when making new appointments, should take into account other demands on INEs' (and ANEs') time. Prior to appointment, significant commitments should be disclosed with an indication of the time involved. Additional external appointments should not be undertaken without prior consultation with the nomination committee.
- 33 A firm should provide access for INEs to relevant information on the activities of the global network such that they can monitor the impact of the network on the operations and resilience of the UK firm and the public interest in the UK.
- 34 INEs should have regular contact with the Ethics Partner, who should under the ethical standards have direct access to them.
- 35 INEs should have dialogue with audit committees and investors to build their understanding of the user experience of audit and to develop a collective view of the way in which their firm operates in practice.
- 36 Firms should agree with each INE (and ANE) a contract for services setting out their rights and duties. INEs (and ANEs) should be appointed for specific terms and have a maximum tenure of nine years in total.
- 37 The firm should provide each INE (and ANE) with the resources necessary to undertake their duties including appropriate induction, training and development, indemnity insurance and access to independent professional advice at the firm's expense where an INE or ANE judges such advice necessary to discharge their duties.
- 38 The firm should establish, and disclose on its website, well defined and clear escalation procedures compatible with Principle P for dealing with any fundamental disagreement that cannot otherwise be resolved between the INEs (and / or ANEs) and members of the firm's Management and/or governance structures.

Appendix 17: Public Interest Committee

Continued

Public Interest Committee – Terms of Reference

For the year ended 30 September 2024

	Operational Separation	Provisions
	Principles	
39	<p>An INE (and/or ANE) should alert the regulator as soon as possible to their concerns in the following circumstances:</p> <ul style="list-style-type: none"> – the INE or ANE believes the firm is acting contrary to the public interest; or – the INE or ANE believes the firm is endangering the objectives of this Code; or – the INE or ANE initiates the procedure for fundamental disagreements. 	<p>R Where a firm applies the Principles for Operational Separation, has established an Audit Board with a majority of ANEs and is subject to regulatory monitoring of these arrangements, ANEs will fulfil the responsibilities of INEs under this Code in so far as these relate to the audit practice. A firm's INEs will focus on representing the public interest in high quality audit at the firm-wide level as well as on the public interest in firm activities in non-audit parts of the business and the risks posed by these non-audit activities to the audit practice. In fulfilling their role ANEs should follow the Principles set out in section D as applied to the audit practice.</p> <p>S INEs should rely on ANEs to provide independent oversight of audit quality plans, audit strategy and remuneration in the audit practice. ANEs should rely on the INEs to monitor activities at the firm-wide and network levels for their potential impact on the audit practice.</p>
40	<p>A firm should disclose in its annual transparency report:</p> <ol style="list-style-type: none"> a) information about the appointment, retirement and resignation of INEs (and ANEs); their remuneration; their duties and the arrangements by which they discharge those duties; and the obligations of the firm to support them. The firm should report on why it has chosen to position its INEs in the way it has; and b) its criteria for assessing whether INEs (and ANEs) are: <ul style="list-style-type: none"> i) independent from the firm and its owners; and ii) independent from its audited entities. 	<p>41 ANEs should have the same obligations regarding time commitment, independence and objectivity as INEs. They should focus their attention on the audit practice in accordance with the Principles for Operational Separation. The Audit Board should have the authority to act independently of the firm-wide public interest body.</p> <p>42 INEs should participate in governance structures operating across the entirety of the firm and pursue the purpose of this Code at the firm-wide level. They should: <ol style="list-style-type: none"> i) monitor the activities of the wider firm and global network for their potential to affect audit quality and the resilience of the audit practice; and ii) ensure the firm takes account of the public interest in its wider decision making. </p> <p>43 INEs and ANEs should maintain open dialogue, consult on matters of public interest and share information with one another to the extent this is relevant for the Audit Board's oversight of the audit practice and/or the effective discharge of the INEs' responsibilities at the firm-wide level. They should inform one another in the event they invoke the procedure for fundamental disagreements.</p>

Appendix 18: Audit Board

Role

The Audit Board oversees the Audit practice, in terms of its operations, processes and controls. This includes overseeing the strategy and internal investment needs of the Audit practice in furtherance of audit quality, inputting to the firm's response to audit-related regulation and monitoring the discharge of KPMG's public interest obligations to investors and other key stakeholders, such as regulators and audited entities.

The Audit Board also makes recommendations to the Board on the adequacy of the firm's approach for meeting the principal objectives in the Audit Firm Governance Code as they relate to the Audit practice. It reviews the firm's responsiveness to challenges in the audit profession specifically in relation to audit quality, actual or perceived conflicts of interest, independence, the attractiveness of the audit profession, and regulatory objectives including the Principles for Operational Separation.

The Chair of the Audit Board also attends meetings of the Board.

The Audit Board remains unchanged as at 30 September 2024.

Members



Claire Ighodaro
Audit Non-Executive
KPMG in the UK



Kathleen O'Donovan⁵⁰
Audit Non-Executive
KPMG in the UK



Melanie Hind
Audit Non-Executive
KPMG in the UK



Jonathan Downer
Nominated Board
Member
KPMG in the UK



Anthony Lobo⁵¹
Elected Member
KPMG in the UK

⁵⁰ Kathleen O'Donovan is both an ANE and an INE.

⁵¹ Anthony Lobo retired from the Partnership in 30 September 2024.

Appendix 18: Audit Board

Continued

Report on the Audit Board's activities during the year

For the year ended 30 September 2024

Areas of oversight

During the year under review, the Audit Board maintained its oversight of the following key priorities within the Audit practice:

Monitoring Audit Quality

- Monitoring the adequacy of the firm's policies and procedures which underpin Audit Quality, including the commitment of individuals within the Audit practice to perform audits of the highest standard in the public interest, and making recommendations to the LLP Board as appropriate.
- Reviewing the firm's performance in relation to both internal and external regulatory assessments and overseeing root cause analysis and lessons learned from inspections, assessments, investigations or legacy matters as outlined in the Public Report and Single Quality Plan.
- Overseeing the firm's Quality Management System in relation to the Audit practice.

Monitoring culture

- Overseeing the culture programme and its embeddedness within the Audit practice and receiving updates on the results of the Audit practice's people survey results and associated action plan.

Conflict of Interest and Independence

- Receiving reports from the Head of Ethics and Independence regarding ethics and independence matters arising within the Audit business.
- Overseeing the firm's protocols for dealing with actual, potential or apparent conflicts of interest or independence.

Strategy and Investments

- Reviewing and challenging the Audit practice's strategy (and its implementation) to ensure its alignment with the pursuit of regulatory objectives.
- Overseeing the implementation of the Principles for Operational Separation of Audit Practices.
- Reviewing the performance of the Audit practice, including the adequacy and quality of resources, overseas delivery centres and its ability to attract and retain talent.
- Receiving updates on the Audit practice's technology investments and developments.
- Understanding of global audit strategy and the impact on the UK audit strategy.

Risk Management and Regulation

- Reviewing data to ensure that the Audit business is being supervised in accordance with the established risk tolerance, including the annual risk review and the audit regulatory compliance plan.
- Discussing the firm's assessment of key risks, including those that could jeopardise the Audit practice's operational framework, future performance and resilience.
- Receiving updates on regulatory changes and key consultations the firm has responded to which relate to the Audit business.

In numbers

During the reporting period, the Audit Board held a total of eight meetings, including two ad hoc meetings.



Appendix 18: Audit Board

Continued

Report on the Audit Board's activities during the year (continued)

For the year ended 30 September 2024

The Audit Board Remuneration Committee

Role

The Remuneration Committee ("RemCo") is chaired by an ANE and all members of the RemCo are ANEs. The Committee's role is to oversee the policy and processes for Audit partner remuneration, as well as to oversee the criteria and selection processes for both Audit partner promotion and the designation of Responsible Individual (RI) status.

Activities during the year ended 30 September 2024

During the year, the RemCo focused on several key areas related to the Partner and RI promotion process and outcomes. These included:

- Overseeing the process of performance management and remuneration of Audit partners and RIs.
- Reviewing Audit Quality Monitoring reports to ensure alignment with performance standards.
- Ensuring a strong link between audit quality, performance and remuneration by establishing principles for the remuneration of Audit partners and RIs.
- Focusing on succession planning to ensure continuity of leadership.
- Monitoring the RI appointment process.

Overseeing the process of Partner and RI balanced scorecard implementation oversight.

The RemCo met on three occasions during the reporting period.

Looking ahead to FY25

The Audit Board will:

- Continue its monitoring of the firm's efforts to enhance audit quality. This will involve considering the adequacy of the firm's policies and procedures supporting audit quality, as well as evaluating the effectiveness of the measures taken to address the underlying issues, including those aimed at strengthening the root cause analysis and remediation process.
- Gain insight of the interactions between the UK and Swiss Audit practices and ensure that the UK Audit practice maintains its commitment to the delivery of high-quality audits.
- Understand how the firm incorporates regulatory requirements into its processes and controls.
- Monitor the broader activities of the firm and its global network to assess their potential impact on audit quality and the resilience of the Audit practice.
- Monitor the resolution of legacy regulatory issues, ensuring that any corrective actions are effectively implemented. Furthermore, understand how the Audit practice will enhance risk management procedures to effectively navigate the complex and interconnected risk environment.
- Understand how the Audit practice will adapt to digital disruption and advancements in artificial intelligence (AI) and its management of the associated risks.

Appendix 18: Audit Board

Continued

Audit Board – Terms of Reference

For the year ended 30 September 2024

1 Purpose

1.1 The Audit Board is established as a permanent committee of KPMG LLP under the LLP Agreement. Its purpose is to provide independent oversight of the KPMG Audit practice ("KPMG Audit" or the "Audit practice"), providing independent oversight through its composition and involvement of external members including independent Audit Non-Executives. Its role involves overseeing the stewardship, accountability and leadership of the Audit practice providing clear sighted counsel on the implementation of the strategic direction of the Audit practice and alignment to its Vision, Values and Purpose. In doing so the Audit Board seeks to balance the interests of the various stakeholders to whom it is responsible in order for the Audit practice to have a successful and sustainable future, including with a focus on maintaining and improving Audit Quality.

1.2 The Audit Board oversees, monitors and provides independent challenge to KPMG Audit to ensure that the firm discharges its public interest obligations to investors and other key stakeholders such as regulators, as well as to those entities which it audits (audited entities), and to employees in the Audit practice. It is an oversight board; its responsibilities do not extend to making management or operational decisions, which are the responsibility of the Audit

Executive and, ultimately, the LLP Board, and nor does it form part of the system of internal quality control over the individual audits performed by KPMG Audit. It is not involved in regulatory enforcement matters with respect to individual audits performed by KPMG Audit.

1.3 The Audit Board oversees, reviews and makes recommendations to the LLP Board on the adequacy of the firm's approach for meeting the principal objectives in the Audit Firm Governance Code as they relate to the Audit practice:

- 1.3.1 to promote audit quality, including the firm's strategy, culture, investment and remuneration in support thereof;
- 1.3.2 to help the Audit practice secure its reputation more broadly, including with respect to actual or perceived conflicts of interest, ethics and Independence, the regulation of audit firms and the audit profession, including:
 - i) the regulatory objectives and principles of Operational Separation; and
 - ii) the Audit Firm Monitoring and Supervision regime; and

1.3.3 to reduce the risk of audit practice failure, including oversight of:

- i) a sustainably profitable, resilient and viable audit business; and
- ii) the attractiveness of the audit profession.

1.4 The Audit Non-Executives provide constructive challenge and specialist advice with a focus on the public interest in the Audit practice's operations and activities, forming their own views on where the public interest lies.

2 Authority

2.1 The Audit Board is established by the Board of KPMG LLP (the "LLP Board") from which it derives its authority to discharge those responsibilities set out in these Terms of Reference and to which it regularly reports, with a focus on improving audit quality and the interaction of the Audit practice with the rest of the firm in accordance with applicable regulatory principles for its operational separation within the firm.

2.2 The Audit Board has authority to review any matter within its Terms of Reference and to obtain such information as it may require for such purpose from any member of the LLP, officer or employee.

3 Constitution

3.1 Chair

3.1.1 The Chair of the Audit Board will be appointed by the Chair of the LLP Board upon recommendation of the Nominations Committee and ratified by the LLP Board. Such person shall be an independent Audit Non-Executive who shall not chair any other governance body within the firm.

3.1.2 In the absence of the Chair of the Audit Board, the remaining members present shall elect one of themselves to chair the meeting, provided that such person shall be an independent Audit Non-Executive.

3.1.3 If the Chair of the Audit Board declares a conflict of interest, or the Audit Board decides that such individual has a conflict of interest, then the members of the Audit Board shall appoint a member of the Audit Board to chair the meeting or the relevant section of the meeting, provided that such person shall be an independent Audit Non-Executive.

3.1.4 The Chair shall not be a member of the LLP Board or the Public Interest Committee but shall be entitled to attend meetings of both in a non-voting capacity.

Appendix 18: Audit Board

Continued

Audit Board – Terms of Reference

For the year ended 30 September 2024

3.2	Membership	Executive, if the Chair of the Audit Board so requires).	3.2.11	Members may be removed from the Audit Board at any time before the end of their term by the LLP Board.	3.4.2	The Secretary shall record the proceedings and decisions of the Audit Board meetings and the minutes shall be circulated to all members and attendees, as appropriate, taking into account any conflicts of interest that may exist.	
3.2.1	The Audit Board shall comprise:		3.2.12	Other attendees may be invited to attend meetings at the discretion of the Chair of the Audit Board.	4	Proceedings of Meetings	
i)	the Chair of the Audit Board (an independent Audit Non-Executive);	3.2.6	The Ethics Partner is entitled to attend any meeting of the Audit Board and shall have access to all agendas and papers of the Audit Board.	3.3	Duration of appointments	4.1	Frequency of Meetings
ii)	at least two other independent Audit Non-Executives; and	3.2.7	The Global Head of Audit shall be invited to attend each Audit Board meeting.	3.3.1	Unless otherwise determined by the LLP Board, the duration of appointments of independent Audit Non-Executives as members of the Audit Board shall be for a period of three years which may be extended by the LLP Board for an additional two terms of three years each, subject to a maximum nine years in aggregate.	4.1.1	The Audit Board shall meet at least six times per annum and otherwise as required.
iii)	at least two Elected or Nominated Board Members provided that at least one shall be an Elected Board Member and at least one shall have recent and relevant experience as a practising auditor.	3.2.8	Any Independent Non-Executive (member of the Public Interest Committee) may attend meetings of the Audit Board.	3.3.2	Unless otherwise determined by the LLP Board, the duration of appointments to the Audit Board of Elected and Nominated Members of the LLP Board and any co-opted members shall be for a period of up to three years which may be extended by the LLP Board for an additional period of two years.	4.1.2	Meetings of the Audit Board may be called by the Chair of the Audit Board at any time to consider any matters falling within these Terms of Reference.
3.2.2	The number of independent Audit Non-Executives shall always exceed the number of Elected and Nominated Board Members on the Audit Board.	3.2.9	Additional members of the Audit Board shall be appointed by the LLP Board on the joint recommendation of the Chair of the LLP Board and the Chair of the Audit Board, provided that any appointment of independent Audit Non-Executives shall also be on the recommendation of the Nominations Committee of the LLP Board.	3.4	Secretary	4.2	Quorum
3.2.3	At least one of the independent Audit Non-Executives shall have relevant experience of audit at an appropriate level of seniority, either as a former auditor or consumer of audit services.	3.2.10	Members can be co-opted onto the Audit Board (as determined by the Chair of the Audit Board) as the need arises to help fulfil the duties and obligations of the Audit Board. These appointments (including the duration) shall be made by the LLP Board on the recommendation of the Chair of the Audit Board.	3.4.1	The LLP Board Secretary or their nominee shall act as Secretary to the Audit Board and attend all meetings.	4.2.1	Any three members of the Audit Board may form a quorum, provided that a majority in attendance are independent Audit Non-Executives.
3.2.4	One of the independent Audit Non-Executives may be an Independent Non-Executive, or a member of the Public Interest Committee.					4.2.2	A duly convened meeting of the Audit Board at which a quorum is present shall be competent to exercise all or any of the authorities, powers and discretions vested in or exercisable by the Audit Board.
3.2.5	The Head of Audit shall be invited to attend each Audit Board meeting (subject to their not attending for scrutiny discussion relating to the Head of Audit or the Audit						

Appendix 18: Audit Board

Continued

Audit Board – Terms of Reference

For the year ended 30 September 2024

4.3 Attendees

4.3.1 Only the members of the Audit Board, other Elected or Nominated Members of the LLP Board, Independent Non-Executives and the Ethics Partner have the right to attend Audit Board meetings.

4.3.2 Members of KPMG Audit leadership responsible for audit quality and risk management may attend each meeting on invitation of the Chair of the Audit Board.

4.3.3 Any member, officer or employee of the LLP may attend at the invitation of the Audit Board Chair and they may collectively or individually be requested to withdraw from meetings of the Audit Board if required to do so by the Chair of the Audit Board.

4.4 Resolutions on recommendations and observations

4.4.1 The Audit Board shall reach decisions by a simple majority of those voting on the issue in question. If the number of votes for and against a certain proposal is equal, the Audit Board Chair shall have a casting vote.

4.4.2 Any resolution evidenced in writing or by electronic or voice recognition means, by such member or members of the Audit Board as would have been necessary to pass

such resolution had all members of the Audit Board been present at a meeting consider such resolution, shall be valid and effective as if it had been passed at a meeting of the Audit Board duly convened and held, provided that notice and details of the proposed resolution have been given in advance to each member of the Audit Board.

4.5 Conflicts of interest of individual Audit Board members

If a member of the Audit Board has a conflict of interest, they shall immediately disclose this to the Chair of the Audit Board and where appropriate recuse themselves from any deliberations or votes of the Audit Board concerning the relevant subject matter.

5 Responsibilities

The Audit Board shall under delegation by the LLP Board (which retains all relevant decisions and responsibility for the operations of the Audit practice and implementation of its strategy, policies and procedures) have the following responsibilities:

5.1 Monitoring Audit Quality

5.1.1 Monitor the appropriateness of the firm's policies and processes supporting audit quality including the focus of people in the Audit practice on the delivery of high-quality audits in the public interest

and make recommendations to the LLP Board accordingly;

5.1.2 Monitor the drivers that contribute to audit quality to assess if KPMG complies with, and how it performs relative to, standards expected by investors, regulators and other stakeholders, including partners and colleagues in the Audit practice, and make recommendations to the LLP Board accordingly;

5.1.3 Periodically review the firm's System of Quality Management (overseen by the Audit Committee) as it pertains to the Audit practice, with regard to the appropriateness and effectiveness of reporting lines, authorities and responsibilities;

5.1.4 Review the overall targets (i.e., not targets related to individual audit engagements) set by the Audit Executive for audit quality to ensure that they are robust and meet regulator expectations and make recommendations to the LLP Board accordingly;

5.1.5 Oversee the Audit Quality Framework, and challenge management to ensure that the framework is sufficient to drive good quality audits and meets the expectations of investors, regulators and other stakeholders including partners and colleagues in the Audit practice;

5.1.6 Review the performance of KPMG Audit and overall audit quality, including the adequacy and quality of resourcing; and

5.1.7 Monitor the efficacy of the continuous improvement initiatives (including root cause analysis) in connection with audit quality, and in particular the elements designed to meet targets set by the FRC for AQR results and monitor performance against the plan.

5.2 Monitoring culture and behaviours
Oversee culture and behaviours within the Audit practice and the extent to which they are supportive of the public interest, including their role in ensuring audit quality.

5.3 Conflicts of Interest and Independence

5.3.1 Monitor and make recommendations to the LLP Board in respect of the adequacy and effectiveness of KPMG Audit's arrangements for managing actual, potential or perceived conflicts of interest and independence;

5.3.2 Monitor and make recommendations to the LLP Board in respect of the effective management of actual, potential or perceived conflicts of interest internally within the firm or its governance and leadership that could adversely impact the delivery of audit quality by the Audit practice;

Appendix 18: Audit Board

Continued

Audit Board – Terms of Reference

For the year ended 30 September 2024

5.3.3	Receive and review a report at least twice a year from the Ethics Partner in respect of ethics and independence matters; and	iii) the Strategy's adequacy and responsiveness to challenges in the audit profession; and	5.6	Risk Management	5.8.2	Review the policies and procedures related to performance management, promotion and remuneration, to ensure that they are aligned to appropriate quality outcomes and the principles for Operational Separation.	
5.3.4	Review the criteria and decision-making processes of the Audit practice in terms of tendering for new audit work and make recommendations (including where required escalating public interest concerns) to the LLP Board which is the ultimate governance body with respect to tendering or retendering decisions.	iv) the Strategy's alignment to the firm's Vision, Values and Purpose;	5.4.2	Review and challenge the development by the Audit Executive of the operational plan designed to implement the Strategy;	5.6.1	Review and monitor the adequacy of the Audit practice's risk management framework, including the identification, management and reporting of risks and the appropriateness of its risk appetite (including in respect of accepting higher risk audits); and make recommendations to the Board Risk Committee in respect thereof;	
5.4	Audit Practice Strategy	5.4.3	Monitor that management is executing the Strategy as expected; and	5.6.2	Review information sufficient to satisfy itself that Audit is being managed within the agreed risk appetite; and	5.9	Remuneration Committee
5.4.1	Review and challenge the strategy of the Audit practice ("the Strategy") as developed (or modified) by the Audit Executive and, if not satisfied, raise concerns or objections to the LLP Board or make recommendations considering:	5.4.4	Monitor and make recommendations to the LLP Board in respect of material strategic and regulatory matters impacting the profession and the Audit business.	5.6.3	Consider the firm's assessment of principal risks including those that would threaten the Audit practice's business model, future performance and sustainability.	5.9.1	Establish a Remuneration Committee of the Audit Board, whose membership shall be exclusively independent Audit Non-Executives, and approve such committee's Terms of Reference. The Remuneration Committee shall oversee (including where relevant on a no-names basis):
	i) whether the strategy is designed to ensure appropriate levels of audit quality are achieved and maintained;	5.5	Investments	5.7	Engagement with Regulators	i)	the policy and processes for Audit partner remuneration and their implementation, in particular to ensure their consistency with regulatory objectives and requirements, as well as to support audit quality; and
	ii) the Strategy's consistency with the pursuit of the regulatory objectives and desired outcomes in the context of the operational separation of the Audit practice within the firm and the Audit Firm Governance Code;	5.5.1	Review and challenge the Audit Executive in respect of the development of the budget for investments in the Audit practice to deliver the Strategy and, if not satisfied, raise concerns to the LLP Board; and	5.8	Operational Separation	ii)	the criteria and selection processes for both Audit partner promotion and designation of Responsible Individual status.
		5.5.2	Monitor the implementation of key investments in Audit to fulfil the Strategy.	5.8.1	Oversee the operational and financial performance of KPMG Audit to ensure that it meets the FRC's principles for Operational Separation; and		
		5.5.3	For the avoidance of doubt the LLP Board approved Investment Framework applies to proposed investments in the Audit practice.				

Appendix 18: Audit Board

Continued

Audit Board – Terms of Reference

For the year ended 30 September 2024

<p>5.9.2 In its oversight capacity, the Remuneration Committee will monitor, assess and apply scrutiny to anonymised data with respect to the appropriate application of the respective policies and criteria for Audit partner remuneration and promotion.</p> <p>5.9.3 For the avoidance of doubt, the Remuneration Committee shall not be involved in any way in decision-making in respect of any specific promotion or any given partner's remuneration, which shall follow the firm-wide governance procedures established by the LLP Board.</p> <p>5.10 Audit Leadership</p> <p>5.10.1 Review candidates for appointment to the role of Head of Audit (including through interviews) and provide feedback as to whether or not the proposed candidates meet the attributes and qualities for that role to the Chief Executive and the People Committee, who have the relevant approval authorities with respect to such appointment; and</p> <p>5.10.2 Provide input to the People Committee on the performance of the Head of Audit each year.</p>	<p>5.10.3 The Audit Board may, where it has concerns, recommend to the KPMG LLP Board that the Head of Audit be removed from their post. The decision as to whether the Head of Audit is to be removed from their post will be made by the KPMG LLP Board and will be communicated to the Audit Board.</p> <p>5.11 Audit Investigations</p> <p>Monitor trends and lessons learned arising both from the firm's matters under case examination, review or investigation by the FRC, ICAEW, ICAS, PCAOB or other relevant regulator, and from regulatory enforcement outcomes involving other firms that are in the public domain.</p> <p>5.12 Stakeholder engagement</p> <p>The Audit Board will independently and in conjunction with the firm's leadership and the Independent Non-Executives (members of the PIC) engage with regulators, investors and other stakeholders to enhance stakeholder confidence in the public interest aspect of the firm. In this context, the ANEs will meet at least once a year with representatives of the FRC.</p> <p>6 General</p> <p>6.1 The Audit Board shall review the Audit Quality section of the Annual Report and make recommendations to the LLP Board on it.</p>	<p>6.2 The Audit Board shall make recommendations to the LLP Board with respect to material communications to regulators and KPMG's responses to relevant consultations.</p> <p>6.3 As part of the Audit Board's oversight role, individual ANEs are invited to attend Board Committees (and the Chair of the Audit Board is invited to attend the Board) to further pursue the purpose of the AFGC. As attendees, ANEs will:</p> <ul style="list-style-type: none"> i) monitor the activities of the wider firm and global network for their potential to affect audit quality and the resilience of the audit practice (liaising with the PIC as necessary); and ii) ensure the firm takes account of the public interest in its wider decision making. <p>6.4 In relation to each of the matters set out in section 5, the Audit Board will liaise with the Public Interest Committee ("PIC") which has public interest oversight responsibilities with respect to the whole firm (and on which the Audit Board may reasonably rely). In this context, the Chair of the Audit Board will liaise with the Chair of the PIC regarding the Audit practice, audit quality, reputational risks in Audit, the impact of the non-Audit businesses of the firm upon audit quality, and the resilience of the Audit practice.</p>	<p>6.5 The Audit Board shall assume no responsibility (as the Audit Board or individually as its members) for supervision nor have direct management responsibility for audits, quality control of audits or the setting of audit partners' remuneration.</p> <p>7 Reporting</p> <p>7.1 Minutes of each Audit Board meeting will be disclosed at the following meeting of the LLP Board. The Chair of the Audit Board shall report to the LLP Board after each meeting on matters within its duties and responsibilities.</p> <p>7.2 The Audit Board shall compile a report of the work of the Audit Board in discharging its responsibilities for inclusion in the Transparency Report, including a description of significant issues dealt with by the Audit Board.</p> <p>7.3 The Audit Board shall work and liaise as necessary with other Committees of the LLP Board and with the Public Interest Committee.</p> <p>7.4 The ANEs shall inform the Regulator as soon as possible if they have concerns in the following circumstances:</p> <ul style="list-style-type: none"> – the ANE believes the firm is acting contrary to the public interest; or – the ANE believes the firm is endangering the objectives of the AFGC; or – the ANE initiates the procedure for fundamental disagreements.
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Appendix 18: Audit Board

Continued

Audit Board – Terms of Reference

For the year ended 30 September 2024

8 Governance and Resources

- 8.1 The Audit Board shall, via the Secretary to the Audit Board, make available to new members of the Audit Board a suitable induction process and, for existing members, ongoing training as discussed and agreed by the Audit Board.
- 8.2 The Audit Board shall conduct an annual self-assessment of its activities under these Terms of Reference and shall conduct an externally facilitated Board evaluation every three years. The Audit Board shall report any conclusions and recommendations to the LLP Board and, as part of this assessment, shall consider whether or not it receives adequate and appropriate support in fulfilment of its role and whether or not its annual plan of work is manageable. The Chair of the Audit Board, supported by the Secretary to the Audit Board, shall be responsible for acting on the results of the self-assessment and embedding the recommendations from the externally facilitated evaluation.
- 8.3 The Audit Board shall in making recommendations and observations give due regard to any relevant legal or regulatory requirements, and associated best practice guidance, as well as to the risk and reputation implications of its decisions (liaising where relevant with other Committees).

8.4 The Audit Board shall have access to sufficient resources in order to carry out its duties and have the power to engage the firm's Internal Audit function as well as independent counsel and other professional advisers and to invite them to attend meetings.

8.5 In the event of any significant and serious disagreement between the Audit Board and the LLP Board with respect to any matters within the scope of the Audit Board's Purpose, Authority and Responsibilities as set out in these Terms of Reference, the LLP Board shall ensure that such disagreement shall be reported within the firm's next following annual Transparency Report. With regard to any dispute between the Audit Board and the LLP Board with respect to the decision to include such a report in the Transparency Report, the matter shall be the subject of consultation with the Public Interest Committee. Any INE who sits on the Audit Board may recuse themselves from such consultation (but shall not be obliged so to do). This mechanism shall not limit the ability of the ANEs to disclose such disagreements to the FRC or, in the event of resignation by an ANE, to disclose such disagreements in a public statement as contemplated by the AFGC.

9 Terms of Reference

The Audit Board shall annually review its Terms of Reference and may recommend to the LLP Board any amendments to its Terms of Reference.

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