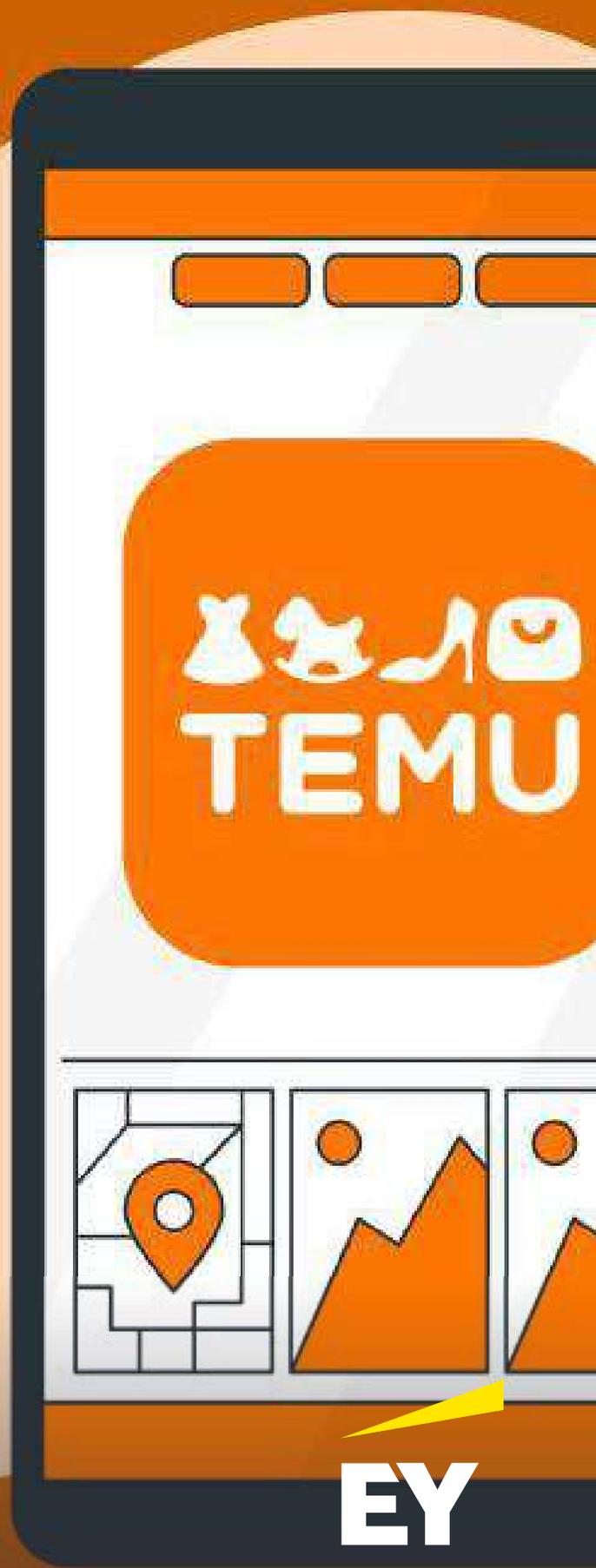


# Independent Audit on TEMU

Reporting Package  
Digital Services Act



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Independent Audit on TEMU  
Digital Services Act

For the Period of 3 October 2024 to 30 June 2025

With Assurance Report of *Independent Auditor* regarding  
Regulation (EU) 2022/2065, the Digital Services Act (DSA)

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**Whaleco Technology Limited**

Registered in Ireland under number 723548

Registered Address:

First Floor, 25 St. Stephen's Green

Dublin 2, Ireland

**Report of Management of Whaleco Technology Limited  
on TEMU's Compliance  
with the Digital Services Act**

**30 September 2025**

We, as members of management of Whaleco Technology Limited on behalf of itself and on behalf of its affiliated entities (collectively, the "Company"), are responsible for TEMU (the "audited service"), designated as a Very Large Online Platform ("VLOP") by the European Commission, pursuant to Regulation (EU) 2022/2065 of the European Parliament and of the Council of 19 October 2022 (the "Digital Services Act" or "DSA" or "Act"), complying with all obligations and commitments in the aggregate, as well as with each applicable individual obligation and commitment, referred to in Article 37(1) (a) of the Digital Services Act (together the "DSA Specified Requirements") during the period from 3 October 2024 through 30 June 2025 (the "DSA Examination Period"). Unless referenced otherwise, each applicable obligation and commitment is defined at the sub-article level. We also are responsible for establishing and maintaining effective internal control over compliance with the Specified Requirements.

We have performed an evaluation of the Company's compliance with the DSA Specified Requirements, including those described below, during the DSA Examination Period.

Based on our evaluation, we assert that, except for the effects of the matter(s) giving rise to the modification as described in Attachment A, TEMU complied with the applicable DSA Specified Requirements in the aggregate, as well as with each applicable individual DSA Specified Requirements during the DSA Examination Period, as set out in Chapter III of the DSA, in all material respects (the "DSA Assertion").

We, as members of management of the Company, are responsible for preparing this report, including the completeness, accuracy and method of presentation of this report. As such, we are responsible for:

- Determining the applicability of each obligation and commitment of the DSA during the DSA Examination Period (see Attachment A)
- Complying with the DSA Specified Requirements by designing, implementing, and maintaining the audited service's system and manual processes (and related controls) to comply with the DSA
- Selecting the DSA Specified Requirements, and making interpretations, defining ambiguous terms and developing benchmarks, as needed, to implement the DSA Specified Requirements
- Evaluating and monitoring the audited service's compliance with the DSA Specified Requirements
- Our DSA Assertion of compliance with the DSA Specified Requirements
- Having a reasonable basis for our DSA Assertion
- Preparing our audit implementation report referred to in Article 37 (6) of the DSA, including the completeness, accuracy, and method of presentation.
- Evaluating the subject matter in relation to the Specified Requirements and for determining compliance;
- Making the audit report public, at the latest, three months after the receipt of the report (in redacted form, where applicable).

Furthermore, our responsibility includes maintaining adequate records and making estimates that are relevant to the preparation of our DSA Assertion and our evaluation of the audited service's system and manual processes (and related controls) in place to achieve compliance.

Director of Whaleco Technology Limited  
Address: 25 St Stephen's Green Dublin 2, Dublin, Ireland  
Name of Authorized Representative: [CONFIDENTIAL]  
Position: Director

[CONFIDENTIAL] 30.9.2025

Signature

Management of Whaleco Technology Limited  
Address: 25 St Stephen's Green Dublin 2, Dublin, Ireland  
Name of Authorized Representative: [CONFIDENTIAL]  
Position: Head of the DSA Compliance Function

[CONFIDENTIAL] 30.9.2025

Signature

Attachment A - Listing of DSA sub articles, designating management's determinations

Listing of management's determination of compliance

Section 1	Section 2	Section 3	Section 4	Section 5
11.1	16.1	20.1	30.1	34.1
11.2	16.2	20.3	30.2	34.2
11.3	16.4	20.4	30.3	34.3
12.1	16.5	20.5	30.4	35.1
12.2	16.6	20.6	30.5	36.1
14.1	17.1	21.1	30.6	37.2
14.2	17.3	21.2	30.7	38.1
14.4	17.4	22.1	31.1	40.12
14.5	18.1	23.1	31.2	41.1
14.6	18.2	23.2	31.3	41.2
15.1		23.3	32.1	41.3
		23.4	32.2	41.4
		24.1		41.5
		24.2		41.6
		24.3		41.7
		24.5		42.1
		25.1		42.2
		27.1		42.3
		27.2		
		27.3		

Audited Service Legend	
	In compliance
	Articles under investigation
	Partial compliance

Not Applicable Sub Article Summary

Section 1	Section 2	Section 3	Section 4	Section 5
13.1	16.3	19.1	29.1	33.1-33.6
13.2	17.2	19.2	29.2	35.2
13.3	17.5	20.2		35.3
13.4		21.3		36.2-36.11
13.5		21.4		37.1
14.3		21.5		37.3-37.6
15.2		21.6		37.7
15.3		21.7		39.1-39.3
		21.8		40.1
		21.9		40.2
		22.2		40.3-40.7
		22.3		40.8-40.11
		22.4		40.13
		22.5		42.4
		22.6		42.5
		22.7		43.1-43.7
		22.8		44.1
		24.4		44.2
		24.6		45.1-45.4
		25.2		46.1-46.4
		25.3		47.1-47.3
		26.1-26.3		48.1-48.5
		28.1-28.2		
		28.3-28.4		

Audited Service Legend	
	Not an auditable obligation
	Not applicable until EC takes action
	Condition does not exist for the sub article to be applicable
	Not applicable for initial Examination Period

Rationale for Designations of “N/A - Condition does not exist for the sub article to be applicable”

Sub Article	Rationale
13.1 - 13.2, 13.4	The audited provider has an establishment in the European Union ('EU'). Therefore, the condition does not exist for these sub-articles.
14.3	Although minors use the audited service, the service is not primarily directed at minors or predominantly used by them. Therefore, the condition does not exist for this sub-article.
21.5	During the Examination Period, there have been no disputes between the audited service and the recipient of the service brought before out-of-court dispute settlement bodies. Therefore, the condition does not exist for this sub-article.
22.6	The audited provider does not have information indicating that a trusted flagger has submitted a significant number of insufficiently precise, inaccurate or inadequately substantiated notices through the mechanisms referred to in Article 16. Therefore, the condition does not exist for this sub-article.
26.1 - 26.3	The audited provider does not operate such businesses (e.g. on-platform ads). Therefore, this condition does not exist for these sub-articles.
28.1-28.2	This sub-article is only applicable if an intermediary service is primarily directed at minors or is predominantly used by them. The audited provider is not primarily directed at minors or predominantly used by them. Therefore, the condition does not exist for these sub-articles.
39.1-39.3	The audited provider does not operate such businesses (e.g. on-platform ads). Therefore, the condition does not exist for this sub article.
40.1, 40.3 - 40.7	Delegated Act referred to in Article 40 (13) supplementing the DSA regulation has been implemented at the end of the examination period. Therefore, the condition does not exist for these sub-articles.

## Assurance Report of Independent Auditor - Digital Services Act

To the **Board of Directors and Management** of  
Whaleco Technology Limited

### Scope

We were engaged by Whaleco Technology Limited on behalf of itself and on behalf of its affiliated entities (collectively, the "Company" or "audited provider"), to perform an assurance engagement to examine management's assertion (the "DSA Assertion"), included in the attached Report of Management of Whaleco Technology Limited on TEMU's Compliance with the Digital Services Act, regarding TEMU's (the "audited service") compliance with all obligations and commitments in the aggregate, as well as with each applicable individual obligation and commitment, referred to in Article 37(1) (a) of the Regulation (EU) 2022/2065 of the European Parliament and of the Council (the "Digital Services Act" or "DSA") (together the "DSA Specified Requirements") for the period from 3 October 2024 through 30 June 2025 (the "DSA Examination Period"), and opine on the audited service's compliance with the DSA Specified Requirements. Unless referenced otherwise, each applicable obligation and commitment is defined at the sub-article level.

We did not perform assurance procedures on the audited service's compliance with codes of conduct and crisis protocols (referred to in Article 37(1) (b) of the DSA and Annex I of the Commission Delegated Regulation (EU) 2024/436 supplementing Regulation (EU) 2022/2065 (the "Delegated Regulations")) because the requirement for the audited service to comply with such articles did not exist during the DSA Examination Period.

Additionally, the information included in the audited provider's separately provided audit implementation report is presented by the audited provider to provide additional information. Such information has not been subjected to the procedures applied in our examination, and accordingly, we do not express an opinion, conclusion, nor any form of assurance on it.

### (Qualified) Negative opinion

In our opinion, except for the effects of the matters described in the Basis for (Qualified) Negative Opinion Section of our report, Temu complied with the applicable Specified Requirements during the DSA Examination Period as set out in Chapter III of the DSA, in all material respects.

### Basis for (Qualified) Negative opinion

Based on the procedures performed, we have expressed our conclusions for a total of 63 Specified Requirements. Our examination disclosed conditions that, in the aggregate, resulted in material noncompliance of certain DSA Specified Requirements applicable to TEMU during the DSA Examination Period.

- 4 Specified Requirements that were partially complied with and that resulted in a 'Negative' conclusion:
  - Article 14(1)
  - Article 14(6)
  - Article 23(4)
  - Article 41(6)

Moreover, we were unable to form an opinion on the following 8 Specified Requirements. Those are identified and described in Appendix 1 for Specified Requirements with an indicator of 'Disclaimer'.

- Article 27(1)
- Article 27(2)
- Article 27(3)
- Article 34(1)
- Article 34(2)
- Article 35(1)
- Article 38
- Article 40(12).

Furthermore, 59 Specified Requirements resulted in a 'Positive' or a 'Positive with comments' conclusion.

## Whaleco Technology Limited's responsibilities

The management of the audited provider is responsible for:

- Determining the applicability of each of the DSA's obligations and commitments during the DSA Examination Period
- Complying with the DSA Specified Requirements by designing, implementing, and maintaining the audited service's system and manual processes (and related controls) to comply with the DSA
- Selecting the DSA Specified Requirements, and making interpretations, defining ambiguous terms and developing benchmarks, as needed, to implement the DSA Specified Requirements
- Evaluating and monitoring the audited service's compliance with the DSA Specified Requirements
- Its DSA Assertion of compliance with the DSA Specified Requirements
- Having a reasonable basis for its DSA Assertion
- Preparing its audit implementation report referred to in Article 37 (6) of the DSA, including the completeness, accuracy, and method of presentation.
- Evaluating the subject matter in relation to the Specified Requirements and for determining compliance;
- Making the audit report public, at the latest, three months after the receipt of the report (in redacted form, where applicable).

This responsibility includes establishing and maintaining internal controls, maintaining adequate records and making estimates that are relevant to the preparation of its DSA Assertion and evaluation of its audited service's system and manual processes (and related controls) in place, such that it is free from material misstatement, whether due to fraud or error.

## Our responsibilities and procedures performed

Our responsibility is to:

- Plan and perform our procedures to obtain reasonable assurance about whether, in all material respects, the audited service complies with each of the DSA Specified Requirements
- Form an independent opinion on whether the audited service is in compliance with the DSA Specified Requirements, based on the procedures we have performed and the evidence we have obtained and
- Express our modified opinion to the audited provider

For additional responsibilities of the Company and Ernst & Young S.A., see Appendix 4 for the engagement statement of work executed on 23 March 2025.

We conducted our examination in accordance with the *International Standard for Assurance Engagements Other Than Audits or Reviews of Historical Financial Information* ("ISAE 3000 (Revised)"), applicable aspects of the Delegated Regulations and the terms of reference for this examination as agreed with Whaleco Technology Limited on 23 March 2025. Those standards require that we plan and perform our examination to obtain reasonable assurance about whether Whaleco Technology Limited complied, in all material respects, with the DSA Specified Requirements referenced above. The nature, timing, and extent of the procedures selected depend on our judgment, including an assessment of the risks of material noncompliance, whether due to fraud or error. We believe that the evidence we have obtained is sufficient and appropriate to provide a reasonable basis for our modified opinion.

Our examination included the following procedures, among others

- Obtaining an understanding of the characteristics of the services provided by the audited provider
- Evaluating the appropriateness of the DSA Specified Requirements applied and their consistent application, including evaluating the reasonableness of estimates made by the audited provider
- Obtaining an understanding of the systems and processes implemented to comply with the DSA, including obtaining an understanding of the internal control environment relevant to our examination and testing the internal control environment to the extent needed to obtain evidence of the Company's compliance with the DSA Specified Requirements, but not for the purpose of expressing an opinion on the effectiveness of the audited provider's internal control
- Identifying and assessing the risks whether the compliance with the DSA Specified Requirements is incomplete or inaccurate, whether due to fraud or error, and designing and performing further assurance procedures responsive to those risks, and

- Obtaining assurance evidence that is sufficient and appropriate to provide a basis for our modified opinion.

We collected evidence throughout the period from 23 March 2025 through 30 September 2025 to assess the audited service's compliance with the DSA Specified Requirements during the DSA Examination Period.

### **Our independence and quality management**

We are required to be independent of Whaleco Technology Limited and, in accordance with Article 37 (3), if applicable, any legal person connected to Whaleco Technology Limited, and to meet our other ethical responsibilities, as applicable for examination engagements. We have maintained our independence and confirm that we have met the requirements of the Code of Ethics for Professional Accountants issued by the International Ethics Standards Board for Accountants as adopted by the Commission de Surveillance du Secteur Financier (CSSF) in Luxembourg.

We also apply the International Standard on Quality Management 1, *Quality Management for Firms that Perform Audits or Reviews of Financial Statements, or Other Assurance or Related Services engagements*, which requires that we design, implement and operate a system of quality management including policies or procedures regarding compliance with ethical requirements, professional standards and applicable legal and regulatory requirements.

Furthermore, our attestation that the auditing organization complies with the obligations laid down in Article 37 (3), point (a), (b), and (c) is included in Appendix 6.

### **Description of additional information on each of the applicable audit obligations and commitments**

The audit conclusion; audit criteria, materiality thresholds, audit procedures, justification of any changes to the audit procedures during the audit, methodologies and results, including any test and substantive analytical procedures; justification of the choice of those procedures and methodologies, overview and description of information relied upon as audit evidence; explanation of how the reasonable level of assurance was achieved; notable changes to the systems and functionalities audited; identification of any specific element which could not be audited (if applicable) or audit conclusion not reached; and other relevant observations and findings associated with our audit of the obligations and commitments is included in Appendix 1 and Appendix 2. Additionally, our summary of audit risk analysis pursuant to Article 9 of the Delegated Regulations, including assessment of inherent, control, and detection risk for each DSA obligation is included in Appendix 5. See the summary in Appendix 1 for the audit obligations and commitments not subjected to audit since they were not applicable during the DSA Examination Period.

### **Inherent limitations**

The services in the digital sector and the types of practices relating to these services can change quickly and to a significant extent. Therefore, projections of any evaluation to future periods are subject to the risk that the entity's compliance with the DSA Specified Requirements may become inadequate because of changes in conditions or that the degree of compliance with the policies or procedures may deteriorate.

The audited service is subject to measurement uncertainties resulting from limitations inherent in the nature of the audited service and the methods used in determining such systems and processes implemented to comply with the DSA Specified Requirements. The selection of different but acceptable measurement techniques, including benchmarks, can result in materially different measurements. The precision of different measurement techniques may also vary.

Our examination was limited to certain aspects of the audited service's algorithmic systems, to the extent needed to obtain evidence of the audited service's compliance with the relevant DSA Specified Requirements as required by Regulation (EU) 2022/2065. This did not include all of the algorithmic systems that TEMU operates, nor all aspects of the algorithmic systems for which we performed audit procedures. Furthermore, algorithms may not consistently operate in accordance with their intended purpose or at an appropriate level of precision. Because of their nature and inherent limitations, algorithms may introduce biases of the human programmer resulting in repeated errors or a favoring of certain results or outputs by the model. Accordingly, we do not express an opinion, conclusion, nor any form of assurance on the design, operation, and monitoring of the algorithmic systems.

The performance of risk assessments, including the identification of systemic risks, is inherently judgmental. Risk assessments are often conducted at a specific point in time and may not capture the dynamic nature of risks. Because the identification of systematic risks relies on known risks and expert judgment, the identification of systemic risks may not account for new or unprecedented events for which there is limited or no historical information.

Emphasis of certain matters

Applying the DSA Specified Requirements requires the audited service to develop benchmarks and make interpretations of obligations and commitments, including certain terminology. Benchmarks and interpretations for which we deemed would be needed for report users to make decisions are described in Appendix 1 for applicable obligations and commitments.

We are also not responsible for the audited provider's interpretations of, or compliance with, laws, statutes, and regulations (outside of the DSA Specified requirements) applicable to the audited provider in the jurisdictions within which the audited provider operates. Accordingly, we do not express an opinion or other form of assurance on the audited provider's compliance or legal determinations.

Our examination was limited to understanding and assessing certain internal controls. Because of their nature and inherent limitations, controls may not prevent, or detect and correct, all errors or fraud that may be considered relevant. Furthermore, the projection of any evaluations of effectiveness to future periods is subject to the risk that internal controls may become inadequate because of changes in conditions, that the degree of compliance with such internal controls may deteriorate, or that changes made to the system or internal controls, or the failure to make needed changes to the system or internal controls, may alter the validity of such evaluations.

#### **Conclusions on each applicable individual commitment and obligation**

For conclusions on each obligation and commitment, see Appendix 1.

#### **Restricted Use and Purpose**

This report is intended solely for the information and use of Whaleco Technology Limited, the European Commission and the applicable Digital Services Coordinator of establishment as mandated under DSA Article 42(4), (collectively, the "Specified Parties") for assessing the audited provider's compliance with the DSA Specified Requirements, and is not intended to be, and should not be, used by anyone other than these Specified Parties including users of the service, who are not identified as Specified Parties but who may have access to this report as required by law or regulation, or for other purposes.

Ernst & Young S.A.  
Société Anonyme  
Cabinet de revision Agréé

**[CONFIDENTIAL]**

Luxembourg, 30 September 2025

**Appendix 1 – Description of additional information on each of the applicable audit obligations and commitments (documentation and results of any tests performed by the auditing organization, including as regards algorithmic systems of the audited provider), including summaries of conclusions reached**

Refer to Appendix 2 for an overview of the methodology and approach of procedures performed; our evaluation and use of the audited provider’s legal interpretation, operational benchmarks and definitions (i.e., “audited provider’s developed supplemental criteria”); the impact of notable changes to the systems and functionalities audited during the DSA Examination Period; and our use of sampling.

**Audit Conclusions of Applicable DSA Sub Articles**

Section 1	Section 2	Section 3	Section 4	Section 5
11.1	16.1	20.1	30.1	34.1
11.2	16.2	20.3	30.2	34.2
11.3	16.4	20.4	30.3	34.3
12.1	16.5	20.5	30.4	35.1
12.2	16.6	20.6	30.5	36.1
14.1	17.1	21.1	30.6	37.2
14.2	17.3	21.2	30.7	38.1
14.4	17.4	22.1	31.1	40.12
14.5	18.1	23.1	31.2	41.1
14.6	18.2	23.2	31.3	41.2
15.1		23.3	32.1	41.3
		23.4	32.2	41.4
		24.1		41.5
		24.2		41.6
		24.3		41.7
		24.5		42.1
		25.1		42.2
		27.1		42.3
		27.2		
		27.3		

Color Legend	
Positive	“Unqualified”
Positive with comments	“Unqualified”
Disclaimer of opinion	Articles under investigation
Negative	Partial Non-compliance (“except for”)



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Not Applicable Sub Article Summary

Section 1	Section 2	Section 3	Section 4	Section 5
13.1	16.3	19.1	29.1	33.1-33.6
13.2	17.2	19.2	29.2	35.2
13.3	17.5	20.2		35.3
13.4		21.3		36.2-36.11
13.5		21.4		37.1
14.3		21.5		37.3-37.6
15.2		21.6		37.7
15.3		21.7		39.1-39.3
		21.8		40.1
		21.9		40.2
		22.2		40.3-40.7
		22.3		40.8-40.11
		22.4		40.13
		22.5		42.4
		22.6		42.5
		22.7		43.1-43.7
		22.8		44.1
		24.4		44.2
		24.6		45.1-45.4
		25.2		46.1-46.4
		25.3		47.1-47.3
		26.1-26.3		48.1-48.5
		28.1-28.2		
		28.3-28.4		

Color Legend	
	Not an auditable obligation
	Not applicable until EC takes action
	Condition does not exist for the sub article to be applicable
	Not applicable for Initial Examination Period

Rationale for Designations of “N/A - Condition does not exist for the sub article to be applicable”

Sub Article	Rationale
13.1 - 13.2, 13.4	The audited provider has an establishment in the European Union ('EU'). Therefore, the condition does not exist for these sub-articles.
14.3	Although minors use the audited service, the service is not primarily directed at minors or predominantly used by them. Therefore, the condition does not exist for this sub-article.
21.5	During the Examination Period, there have been no disputes between the audited service and the recipient of the service brought before out-of-court dispute settlement bodies. Therefore, the condition does not exist for this sub-article.
22.6	The audited provider does not have information indicating that a trusted flagger has submitted a significant number of insufficiently precise, inaccurate or inadequately substantiated notices through the mechanisms referred to in Article 16. Therefore, the condition does not exist for this sub-article.
26.1 - 26.3	The audited provider does not operate such businesses (e.g. on-platform ads). Therefore, this condition does not exist for these sub-articles.
28.1-28.2	This sub-article is only applicable if an intermediary service is primarily directed at minors or is predominantly used by them. The audited provider is not primarily directed at minors or predominantly used by them. Therefore, the condition does not exist for this sub article.
39.1-39.3	The audited provider does not operate such businesses (e.g. on-platform ads). Therefore, the condition does not exist for this sub article.
40.1, 40.3 - 40.7	Delegated Act referred to in Article 40 (13) supplementing the DSA regulation has been implemented at the end of the examination period.  Therefore, the condition does not exist for these sub-articles.

Section 1 – Provisions applicable to all providers of intermediary services

Obligation:	Audit criteria:	Materiality threshold:
11.1	<p>Throughout the period, in all material respects:</p> <ol style="list-style-type: none"> <li>1. A single point of contact was designated.</li> <li>2. The Member States' authorities, the Commission and the Board were able to communicate directly by electronic means with the single point of contact.</li> </ol> <p><b>The following are certain operational benchmark(s) defined by the audited service:</b></p> <p>“Directly”: The email addresses displayed on Temu's online interface allow Member States' authorities, the Commission and the Board as referred to in Article 11 of the Digital Services Act ("DSA" or the "Act") to communicate directly with Temu.</p> <p>“Single point of contact”: one mechanism to contact the audited service for help.</p>	<p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>

**Audit procedures, results and information relied upon:**

In order to evaluate the audited provider's compliance with this Specified Requirement, EY performed substantive procedures, although control(s) existed, as outlined below.

1. Inquired with management and conducted a walkthrough to gain an understanding of the single point of contact and inspected the public facing website whereat Member States' authorities, the Commission and the European Board for Digital Services can contact the service provider pursuant to Article 11. It was noted that a single point of contact has been designated for Member States' authorities, the Commission and the European Board for Digital Services for purposes of the DSA.
2. Inspected communication in which the audited service informed the Commission about the email address to communicate with their single point of contact.
3. Inspected the public facing website whereat Member States' authorities, the Commission and the European Board for Digital Services can contact the service provider, thus confirming that there is a means for the Member States' authorities, the Commission and the European Board for Digital Services to contact the single point of contact directly and electronically.
4. Verified that the email address to communicate with the single point of contact designated by the audited service was implemented from the beginning of the compliance period.
5. We inspected and observed that the email address inbox was monitored and was used to communicate directly with Member States' authorities, the Commission and the Board during the Examination Period.
6. We confirmed, after the Examination Period, that there were no significant changes in the design or operation of the systems and processes in the period between testing and the end of the Examination Period.

**Changes to the audit procedures during the audit:**

None.

**Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:**

There were no material deviations identified in the performance of the above procedures, unless denoted below. The results of the audit procedures were deemed sufficient to obtain reasonable assurance.

**Positive** - In our opinion, the audited service complied with this Specified Requirement during the Examination Period, in all material respects.

**Recommendations on specific measures:**

Not applicable.

**Recommended timeframe to implement specific measures:**

Not applicable.

<p><b>Obligation:</b></p> <p>11.2</p>	<p><b>Audit criteria:</b></p> <p>Throughout the period, in all material respects:</p> <p>Information necessary for users to easily identify and communicate with the single point of contact was:</p> <ul style="list-style-type: none"> <li>▶ Publicly available</li> <li>▶ Easily accessible</li> <li>▶ Up to date.</li> </ul> <p><b>The following are certain operational benchmark(s) defined by the audited service:</b></p> <p>“Easily accessible”: The information of point of contact is publicly available on Temu's Digital Services Act page, which is accessible from the Help menu available within the footer on the website. Thus, such information is one click from Temu’s landing page.</p> <p>“Easily identifiable”: The point of contact is directly displayed and no masking or verification mechanism is set to prevent users from viewing.</p> <p>“Single point of contact”: one mechanism to contact the audited service for help.</p>	<p><b>Materiality threshold:</b></p> <p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
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**Audit procedures, results and information relied upon:**

In order to evaluate the audited provider’s compliance with this Specified Requirement, EY performed substantive procedures, although control(s) existed as outlined below.

1. Inquired with management and conducted a walkthrough to gain an understanding of the single point of contact and inspected the public facing website whereat Member States' authorities, the Commission and the European Board for Digital Services can contact the service provider pursuant to Article 11. It was noted that a single point of contact has been designated for Member States' authorities, the Commission and the European Board for Digital Services for purposes of the DSA.
2. Inspected the public facing website whereat Member States' authorities, the Commission and the European Board for Digital Services can contact the service provider pursuant to Article 11, noting that the audited service designated a single point of contact that is publicly accessible without needing to log into the service.
3. Inspected communication in which the audited service informed the Commission about the email address to communicate with their single point of contact.
4. We confirmed, after the Examination Period, that there were no significant changes in the design or operation of the systems and processes in the period between testing and the end of the Examination Period.

**Changes to the audit procedures during the audit:**

None.

**Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:**

There were no material deviations identified in the performance of the above procedures, unless denoted below. The results of the audit procedures were deemed sufficient to obtain reasonable assurance.

**Positive** - In our opinion, the audited service complied with this Specified Requirement during the Examination Period in all material respects.

<p><b>Recommendations on specific measures:</b></p> <p>Not applicable.</p>	<p><b>Recommended timeframe to implement specific measures:</b></p> <p>Not applicable.</p>
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<p><b>Obligation:</b></p> <p>11.3</p>	<p><b>Audit criteria:</b></p> <p>Throughout the period, in all material respects, the official language or languages of the member state was:</p> <ul style="list-style-type: none"> <li>▶ Specified within public information</li> <li>▶ Broadly understood by the largest possible number of Union citizens</li> <li>▶ Used to communicate with the single point of contact</li> <li>▶ Include at least one of the official language(s) of the Member State in which the provider had its main establishment or where its legal representative resided.</li> </ul> <p><b>The following are certain operational benchmark(s) defined by the audited service:</b></p> <p>“Single point of contact”: one mechanism to contact the audited service for help</p>	<p><b>Materiality threshold:</b></p> <p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
<p><b>Audit procedures, results and information relied upon:</b></p> <p>In order to evaluate the audited provider’s compliance with this Specified Requirement, EY performed substantive procedures, although control(s) existed, as outlined below.</p> <ol style="list-style-type: none"> <li>1. Conducted a walkthrough, inquired with management and inspected the public facing website whereat Member States' authorities, the Commission and the European Board for Digital Services can contact the service provider. The single point of contact is presented in English, which is an official language of Ireland (where the provider has its main establishment) and is broadly understood by Union citizens as stated by the official European Union website.</li> <li>2. Inspected the single point of contact webpage at the end of the Examination Period and determined there were no changes since we previously performed our procedures.</li> <li>3. We confirmed, after the Examination Period, that there were no significant changes in the design or operation of the systems and processes in the period between testing and the end of the Examination Period.</li> </ol> <p><b>Changes to the audit procedures during the audit:</b></p> <p>None.</p> <p><b>Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:</b></p> <p>There were no material deviations identified in the performance of the above procedures, unless denoted below. The results of the audit procedures were deemed sufficient to obtain reasonable assurance.</p> <p><b>Positive</b> - In our opinion, the audited service complied with this Specified Requirement during the Examination Period in all material respects.</p>		
<p><b>Recommendations on specific measures:</b></p> <p>Not applicable.</p>	<p><b>Recommended timeframe to implement specific measures:</b></p> <p>Not applicable.</p>	

<p><b>Obligation:</b></p> <p>12.1</p>	<p><b>Audit criteria:</b></p> <p>Throughout the period, in all material respects a point of contact was designated to users of the services that meets the following criteria:</p> <ul style="list-style-type: none"> <li>▶ Single point of contact (one place on website) exists</li> <li>▶ Ability to communicate directly with provider by electronic means and in a user-friendly manner</li> <li>▶ Permitting recipients of the service to choose the means of communication, which shall not solely rely on automated tools.</li> </ul> <p><b>The following are certain operational benchmark(s) defined by the audited service:</b></p> <p>“Directly and rapidly”: Email displayed on Temu's online interface allows users (i.e., recipients of the service) to communicate directly and rapidly with Temu without intermediaries or excessive waiting or postponement.</p> <p>“User friendly”: easily understandable and accessible to users.</p> <p>“Allowing recipients of the service to choose the means of communication”: the recipients of the service have a choice in communication means that includes at least one option that does not solely rely on automated means</p> <p>“Single point of contact”: one mechanism to contact the audited service for help</p>	<p><b>Materiality threshold:</b></p> <p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
<p><b>Audit procedures, results and information relied upon:</b></p> <p>In order to evaluate the audited provider’s compliance with this Specified Requirement, EY performed substantive procedures, although control(s) existed, as outlined below</p> <ol style="list-style-type: none"> <li>1. Inquired with management and conducted a walkthrough to gain an understanding of the single point of contact and means of communication.</li> <li>2. Inspected communication in which the audited service informed the Commission about the email address users may use to communicate with their single point of contact.</li> <li>3. Inspected the user journey flow provided by the audited service and independently reperformed the user journey flow on the service's web page and any other applicable user interface(s) during the Examination Period from an EU IP address and sought help through each available communication option, and determined that there was a single point of contact designated for direct and rapid communication, the point of contact was conducted via electronic means and in a user-friendly manner, and the point of contact means did not rely solely on automated tools.</li> <li>4. We confirmed, after the Examination Period, that there were no significant changes in the design or operation of the systems and processes in the period between testing and the end of the Examination Period</li> </ol> <p><b>Changes to the audit procedures during the audit:</b></p> <p>None.</p> <p><b>Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:</b></p> <p>There were no material deviations identified in the performance of the above procedures, unless denoted</p>		

<p>below. The results of the audit procedures were deemed sufficient to obtain reasonable assurance.</p> <p><b>Positive</b> - In our opinion, the audited service complied with this Specified Requirement during the Examination Period in all material respects.</p>	
<p><b>Recommendations on specific measures:</b> Not applicable.</p>	<p><b>Recommended timeframe to implement specific measures:</b> Not applicable.</p>

<p><b>Obligation:</b> 12.2</p>	<p><b>Audit criteria:</b> Throughout the period, in all material respects the information needed for recipients of the services to identify their single point(s) of contact was:</p> <ul style="list-style-type: none"> <li>▶ Publicly available</li> <li>▶ Easily identifiable</li> <li>▶ Easily accessible</li> <li>▶ Kept up to date.</li> </ul> <p><b>The following are certain operational benchmark(s) defined by the audited service:</b></p> <p>“Easily accessible”: The information of point of contact is publicly available on Temu's Digital Services Act page, which is accessible from the Help menu available within the footer on the website. Thus, such information is one click from Temu’s landing page.</p> <p>“Easily identifiable”: The point of contact is directly displayed and no masking or verification mechanism is set to prevent users from viewing.</p> <p>“Single point of contact”: one mechanism to contact the audited service for help.</p>	<p><b>Materiality threshold:</b> If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
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**Audit procedures, results and information relied upon:**

In order to evaluate the audited provider’s compliance with this Specified Requirement, EY performed substantive procedures, although control(s) existed, as outlined below

1. Inquired with management and conducted a walkthrough to gain an understanding of the single point of contact and communication means.
2. Inspected the user journey flow provided by the audited services and independently reperformed the user journey flow on the service's web page and any other applicable user interface(s) during the Examination Period to determine that the single point of contact is publicly available, is easily identifiable and is easily accessible. Independently reperformed the user journey flow from an EU IP address and determined that the single point of contact is up to date.
3. We confirmed, after the Examination Period, that there were no significant changes in the design or operation of the systems and processes in the period between testing and the end of the Examination Period.

**Changes to the audit procedures during the audit:**

None.

**Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:**

There were no material deviations identified in the performance of the above procedures, unless denoted below. The results of the audit procedures were deemed sufficient to obtain reasonable assurance.

**Positive** - In our opinion, the audited service complied with this Specified Requirement during the Examination Period in all material respects.

**Recommendations on specific measures:**

Not applicable.

**Recommended timeframe to implement specific measures:**

Not applicable.

Obligation:	Audit criteria:	Materiality threshold:
14.1	<p>Throughout the period, in all material respects the provider included information on any restrictions that they imposed in relation to the use of their service (Terms and Conditions ('T&amp;Cs')) in respect of information provided by the recipients of the service, in their T&amp;Cs. Through the examination period, the T&amp;Cs included:</p> <ul style="list-style-type: none"> <li>▶ Information on any policies, procedures, measures and tools used for the purpose of content moderation, including algorithmic decision-making and human review</li> <li>▶ Rules of procedure of their internal complaint handling system and enforcement of the T&amp;Cs in recital.</li> </ul> <p>The information specified above should be set out in a manner which meets the following criteria:</p> <ul style="list-style-type: none"> <li>▶ Clear, plain, intelligible, user-friendly and unambiguous language</li> <li>▶ Shall be publicly available</li> <li>▶ Easily accessible</li> <li>▶ In a machine-readable format.</li> </ul> <p><b>The following are certain operational benchmark(s) defined by the audited service:</b></p> <p>“Clear, plain, intelligible, unambiguous, user-friendly language”: In a manner that is succinct, straightforward, and easily understandable by the average user.</p> <p>“Easily accessible”: For the users, the Terms of Use is displayed in the footer of Temu's landing page and accessible within one step from every page. For the EU sellers, the Seller EU Services Agreement is available once they have been logged in.</p> <p>“Terms and Conditions”: Terms of Use applicable to users of Temu EU sites and the Seller EU Services Agreement applicable to EU sellers.</p>	<p><b>Materiality threshold:</b></p> <p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>

**Audit procedures, results and information relied upon:**

In order to evaluate the audited provider’s compliance with this Specified Requirement, EY performed substantive procedures although control(s) existed, as outlined below.

1. Conducted a walkthrough and inquired with management to gain an understanding of the policies and controls in place to determine how the audited service made available to the recipients of service an easily accessible and machine-readable terms and conditions (T&Cs) written in a clear, plain intelligible, user-friendly, and unambiguous language and containing information regarding conditions for, and any restrictions on, the use of the service. Also, inquired with management to determine how the information contained in the T&Cs included algorithmic decision-making and human review as well as the rules of procedure for their internal complaint handling system.
2. Reviewed the design of the policies and controls in place to evaluate the audited service’s compliance with this Specified Requirement.
3. Inspected Terms of Use and Temu Seller EU Services Agreement and determined that:
  - a) The Terms of Use included information on restrictions imposed in relation to the use of Temu services in clear, plain, intelligible, user-friendly and unambiguous language;
  - b) The Terms of Use were publicly available to the general public, whereas Temu Seller EU Services Agreement was not publicly available during the Examination Period;
  - c) The Terms of Use were easily accessible to the general public and had been provided in a machine-readable format, whereas the Temu Seller EU Services Agreement was accessible to sellers through the seller center in a machine-readable format.
4. We confirmed, after the Examination Period, that there were no significant changes in the design or operation of the systems and processes in the period between testing and the end of the Examination Period.

**Changes to the audit procedures during the audit:**

None.

**Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:**

The result of the audit procedures was deemed sufficient to obtain reasonable assurance.

**Negative** - In our opinion, except for the effects of the material noncompliance described in the following paragraph, the audited service complied with this Specified Requirement during the Examination Period, in all material respects.

While the audited service has appropriately maintained clear, user-friendly and unambiguous language in its publicly available Terms of Use with periodic review controls embedded in the Standard Operating Procedure, the audited service did not make the Temu Seller EU Services Agreement (“SSA”) fully open and available to the general public. Instead, it is provided only to individuals or entities during and after the completion of the seller onboarding process, as its purpose is to establish a service relationship with EU sellers rather than to address consumers.

Moreover, the SSA does not include information on procedures, measures and tools used for the content moderation, including algorithmic decision-making and human review.

**Recommendations on specific measures:**

We recommend that the audited service make the Temu Seller EU Services Agreement publicly available, and includes information on procedures, measures and tools used for the content moderation, including algorithmic decision-making and human review in the Temu Seller EU Services Agreement.

**Recommended timeframe to implement specific measures:**

1 October 2025 - 31 December 2025

<p><b>Obligation:</b></p> <p>14.2</p>	<p><b>Audit criteria:</b></p> <p>Throughout the period the provider informed recipients of any significant change to the T&amp;Cs of the service, including such changes that could directly impact the ability of the recipients to make use of the service, through appropriate means.</p> <p><b>The following are certain operational benchmark(s) defined by the audited service:</b></p> <p>“Terms and Conditions”: Terms of Use applicable to users of Temu EU sites and the Seller EU Services Agreement applicable to EU sellers.</p> <p>“Significant change”: The changes made to the Terms of Use that could affect the user’s rights and/or obligations, particularly with regards to the fundamental service aspects. For instance and considering the examples in Recital 45 of the DSA, this could involve changes related to restrictions on which content is allowed on the platform. Temu issues notifications to EU-based traders every time there is a change to the Temu Seller EU Services Agreement.</p>	<p><b>Materiality threshold:</b></p> <p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
<p><b>Audit procedures, results and information relied upon:</b></p> <p>In order to evaluate the audited provider’s compliance with this Specified Requirement, we primarily evaluated the design and operation of controls, as outlined below.</p> <ol style="list-style-type: none"> <li>1. Conducted a walkthrough and inquired with management to gain an understanding of the policies and controls in place to determine how the audited service informs recipients of any significant change to the terms and conditions (T&amp;Cs) of the service.</li> <li>2. Reviewed the design of the policies and controls in place to evaluate the audited service’s compliance with this Specified Requirement.</li> <li>3. Inspected a sample of changes made to in-scope T&amp;Cs during the Examination Period, in accordance with the sampling approach described in Appendix 2, and determined that sample changes were appropriately addressed for significance in accordance with the audited service’s internal policy and that the audited service informed recipients of the service of significant changes to T&amp;Cs, in all material aspects.</li> <li>4. Inspected the code configuration of the audited service’s system and determined it is configured to inform the recipients of the services of any significant change to the terms and conditions (T&amp;Cs) of the service.</li> <li>5. Inspected relevant IT controls, including controls related to change management, logical access and IT operation for the relevant systems in the production environment and determined that the controls were in place throughout the Examination Period to address key IT risks.</li> <li>6. We confirmed, after the Examination Period, that there were no significant changes in the design or operation of the systems and processes in the period between testing and the end of the Examination Period.</li> </ol> <p><b>Changes to the audit procedures during the audit:</b></p> <p>None.</p>		

<p><b>Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:</b></p> <p>There were no material deviations identified in the performance of the above procedures, unless denoted below. The results of the audit procedures were deemed sufficient to obtain reasonable assurance.</p> <p><b>Positive</b> - In our opinion, the audited service complied with this Specified Requirement during the Examination Period in all material respects.</p>	
<p><b>Recommendations on specific measures:</b></p> <p>Not applicable.</p>	<p><b>Recommended timeframe to implement specific measures:</b></p> <p>Not applicable.</p>

<p><b>Obligation:</b></p> <p>14.4</p>	<p><b>Audit criteria:</b></p> <p>Throughout the period, in all material respects the provider acted in a diligent, objective and proportionate manner in applying and enforcing the restrictions referred to in 14.1, with due regard to the rights and legitimate interests of all parties involved, including the fundamental rights, of the recipients of the service, such as the freedom of expression, freedom and pluralism of the media, and other fundamental rights and freedoms as enshrined in the Charter of Fundamental Rights of the EU.</p> <p><b>The following are certain operational benchmark(s) defined by the audited service:</b></p> <p>“Terms and Conditions”: Terms of Use applicable to users of Temu EU sites and the Seller EU Services Agreement applicable to EU sellers.</p> <p>“Diligent, objective and proportionate manner”: the audited service bases content decisions on policies that are non-arbitrary and objective, e.g. taking into account fundamental rights.</p>	<p><b>Materiality threshold:</b></p> <p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
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**Audit procedures, results and information relied upon:**

In order to evaluate the audited provider’s compliance with this Specified Requirement, we evaluated the design and operation of control(s) and performed substantive procedures, as outlined below.

1. Conducted a walkthrough and inquired with management to gain an understanding of how the audited service acts in a diligent, objective and proportionate manner in applying and enforcing restrictions referred to in Article 14.1.
2. Reviewed the design of the policies and controls in place to evaluate the audited service’s compliance with this Specified Requirement.
3. Inquired with Management throughout the Examination Period and confirmed the audited service acts in a diligent, objective and proportionate manner in applying and enforcing the restrictions referred to in 14.1, with due regard to the rights and legitimate interests of all parties involved, including the fundamental rights of the recipients of the service, such as freedom of expression, freedom and pluralism of the media, and other fundamental rights as enshrined in the Charter.
4. Inspected the Year 1 Risk Assessment Report (RAR) documentation retained pursuant to Article 34 to determine how the audited service executed the RAR to ensure diligent, objective and proportionate application and enforcement of terms and conditions, by assessing with respect to the audited service, the risk of various prohibited content. Per inspection of the RAR documentation retained, determined that it entailed an assessment as to the effectiveness of enforcement measures where such content is prohibited by the terms and conditions, in addition to an assessment of the specific risk statements that specifically consider the diligent, objective and proportionate application and enforcement of the terms and conditions.
5. Since the obligations within this sub-article are additionally built into the obligations referred to in other articles applicable to the audited service, assessed the associated processes and controls for the other content moderation articles and determined that these specific obligations under Article 14.4 were met.
6. Inspected a sample of instances, in accordance with the sampling approach described in Appendix 2, and determined that sample-based quality assurance check is conducted to ensure content reviewers to act in a diligent, objective, and proportionate manner in applying and enforcing the restrictions to referred to in 14.1.
7. We confirmed, after the Examination Period, that there were no significant changes in the design or operation of the systems and processes in the period between testing and the end of the Examination Period.

**Changes to the audit procedures during the audit:**

None.

**Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:**

There were no material deviations identified in the performance of the above procedures, unless denoted below. The results of the audit procedures were deemed sufficient to obtain reasonable assurance.

**Positive** - In our opinion, the audited service complied with this Specified Requirement during the Examination Period in all material respects.

**Recommendations on specific measures:**

Not applicable.

**Recommended timeframe to implement specific measures:**

Not applicable.

<p><b>Obligation:</b></p> <p>14.5</p>	<p><b>Audit criteria:</b></p> <p>Throughout the period, in all material respects:</p> <ol style="list-style-type: none"> <li>1. The provider provided a summary of the main elements of the T&amp;Cs of the services, including the possibility of easily opting out from optional clauses, to the recipients of such services.</li> <li>2. The summary was: <ul style="list-style-type: none"> <li>▶ Concise</li> <li>▶ Easily accessible</li> <li>▶ Machine readable.</li> </ul> </li> <li>3. The summary included available remedies and redress mechanisms, in clear and unambiguous language.</li> </ol> <p><b>The following are certain operational benchmark(s) defined by the audited service:</b></p> <p>“Easily accessible”: For the users, the Terms of Use is displayed in the footer of Temu's landing page and accessible within one step from every page. For the EU sellers, the Seller EU Services Agreement is available once they have been logged in.</p> <p>“Clear and unambiguous”: In a manner that is succinct, straightforward, and easily understandable by the average user.</p> <p>“Terms and Conditions”: Terms of Use applicable to users of Temu EU sites and the Seller EU Services Agreement applicable to EU sellers.</p>	<p><b>Materiality threshold:</b></p> <p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
<p><b>Audit procedures, results and information relied upon:</b></p> <p>In order to evaluate the audited provider’s compliance with this Specified Requirement, we performed substantive procedures although control(s) existed, as outlined below.</p> <ol style="list-style-type: none"> <li>1. Conducted a walkthrough and inquired with management to gain an understanding of how the audited service made available to the recipients of service a concise, easily-accessible, and machine-readable summary of terms and conditions (T&amp;Cs) that included the main elements of the T&amp;Cs, including the available remedies and redress mechanisms.</li> <li>2. Reviewed the design of the policies and controls in place to evaluate the audited service’s compliance with the Specified Requirement.</li> <li>3. Inspected the summary of Terms of Use and Temu Seller EU Services Agreement to determine that the language used is understandable and effectively communicates the available remedies and redress mechanisms to the users, and determined that they are in concise, clear and unambiguous language.</li> <li>4. Inspected the summary of Terms of Use and Temu Seller EU Services Agreement website to determine that the summary of T&amp;Cs is easily accessible, requiring minimal navigation from the service’s main page.</li> <li>5. Inspected the summary of Terms of Use and Temu Seller EU Services Agreement provided on the DSA webpage, to determine is in a machine-readable format.</li> <li>6. We confirmed, after the Examination Period, that there were no significant changes in the design or operation of the systems and processes in the period between testing and the end of the Examination Period.</li> </ol>		

<p><b>Changes to the audit procedures during the audit:</b></p> <p>None.</p> <p><b>Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:</b></p> <p>There were no material deviations identified in the performance of the above procedures, unless denoted below. The results of the audit procedures were deemed sufficient to obtain reasonable assurance.</p> <p><b>Positive</b> - In our opinion, the audited service complied with this Specified Requirement during the Examination Period in all material respects.</p>	
<p><b>Recommendations on specific measures:</b></p> <p>Not applicable.</p>	<p><b>Recommended timeframe to implement specific measures:</b></p> <p>Not applicable.</p>

<p><b>Obligation:</b></p> <p>14.6</p>	<p><b>Audit criteria:</b></p> <p>The provider published its T&amp;Cs in the official languages of all the Member States in which it offers its services.</p> <p><b>The following are certain operational benchmark(s) defined by the audited service:</b></p> <p>“Terms and Conditions”: Terms of Use applicable to users of Temu EU sites and the Seller EU Services Agreement applicable to EU sellers.</p> <p>“Official languages”: At least one official language of every Member State in which we offer our services.</p>	<p><b>Materiality threshold:</b></p> <p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
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**Audit procedures, results and information relied upon:**

In order to evaluate the audited provider’s compliance with this Specified Requirement, we performed substantive procedures although control(s) existed, as outlined below.

1. Conducted a walkthrough and inquired with management to gain an understanding as to how the audited service published their terms and conditions in the official languages of all the Member States in which they offer their services.
2. Reviewed the design of the policies and controls in place to evaluate the audited service’s compliance with this Specified Requirement.

Inspected the in-scope Terms and Conditions on the audited service’s webpage for all EU Member States in which the audited service offers its services, and determined that:

- (a) The Terms of Use were published in at least one of the official languages of each EU Member States; and
  - (b) Temu Seller EU Services Agreement was available in the official languages of the EU Member States where the local seller onboarding had been launched during the Examination Period, with the exception of Romanian.
3. We confirmed, after the Examination Period, that there were no significant changes in the design or operation of the systems and processes in the period between testing and the end of the Examination Period.

**Changes to the audit procedures during the audit:**

None.

**Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:**

The results of the audit procedures were deemed sufficient to obtain reasonable assurance.

**Negative** - In our opinion, except for the effects of the material noncompliance described in the following paragraph, the audited service complied with this Specified Requirement during the Examination Period, in all material respects.

The Temu Seller EU Services Agreement was not available in Romanian, even though local seller onboarding had been launched in that country during the Examination Period.

**Recommendations on specific measures:**

We recommend that the audited service clearly specify on its online interface the Member States in which Temu allows local seller onboarding, and ensure that the Temu Seller EU Services Agreement is made available in the Member States' official languages during the onboarding process.

**Recommended timeframe to implement specific measures:**

1 October 2025 - 31 December 2025

Obligation:	Audit criteria:	Materiality threshold:
15.1	<p>Throughout the period, in all material respects:</p> <ol style="list-style-type: none"> <li>1. The provider published at least one publicly available transparency report on content moderation in which it engages.</li> <li>2. The published transparency report(s) meet the following criteria: <ul style="list-style-type: none"> <li>▶ In a machine-readable format</li> <li>▶ Easily accessible</li> <li>▶ Clear and easily comprehensible.</li> </ul> </li> <li>3. The provider has included in the published transparency reports, information enumerated in points (a) to (e) of Article 15.1 in the published transparency reports, summarized as follows: <ol style="list-style-type: none"> <li>a) Information/metrics on orders received from Member States' authorities (including Article 9 and 10 orders) which are categorized by: <ol style="list-style-type: none"> <li>i. Type of alleged illegal content concerned</li> <li>ii. The number of notices submitted by trusted flaggers, and any action taken pursuant to the notices by differentiating whether the action was taken on the basis of the law or the T&amp;Cs of the provider</li> <li>iii. Median time needed:</li> </ol> </li> <li>b) Information/metrics on notices submitted in accordance with Article 16 (for hosting services only)</li> <li>c) Information/metrics on content moderation at the provider's own initiative</li> <li>d) Information/metrics on complaints received through internal complaint handling systems</li> <li>e) Information/metrics on the use of automated means for content moderation.</li> </ol> </li> <li>4. The published transparency report(s) include(s) the measures taken as a result of the application and enforcement of the provider's T&amp;Cs.</li> </ol> <p><b>The following are certain operational benchmark(s) defined by the audited service:</b></p> <p>"Easily accessible": Transparency report is accessible on a specific page (i.e., the Transparency Report Page), which is 2 clicks from the main landing page of Temu website.</p> <p>"Clear and easily comprehensible": Presented in English with a machine readable format for users to easily access and download.</p>	<p><b>Materiality threshold:</b></p> <p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>

**Audit procedures, results and information relied upon:**

In order to evaluate the audited provider's compliance with this Specified Requirement, EY primarily evaluated the design and operation of control(s), as outlined below.

1. Conducted a walkthrough to understand the processes and controls in place to meet the Specified Requirements.
2. Reviewed the design of the policies and controls in place to evaluate the audited service's compliance with this Specified Requirement.
3. Inspected the DSA webpage to determine that Temu's DSA Transparency Report was available and accessible. EY inspected the transparency reports and determined that:
  - a) Two reports were published: in November 2024 and in February 2025
  - b) They were in a machine-readable format
  - c) They were easily accessible
  - d) They were clear and easily comprehensible
4. Inspected reports published in November 2024 and February 2025 and determined that they contained information required by the DSA, specifically:
  - a) Inspected the November 2024 and February 2025 DSA Transparency Reports, to determine that the reports included; the numbers of orders received categorized by the type of illegal content concerned; the Member State issuing the order; and the median time to give effect to the order.
  - b) Inspected the November 2024 and February 2025 DSA Transparency Reports to determine that the numbers of notices submitted were included in the reports, and the numbers of notices submitted are categorized by:
    - i. Type of alleged illegal content concerned
    - ii. Notices submitted by trusted flaggers
    - iii. Actions taken pursuant to the notices by differentiating whether the action was taken on the basis of the law or the T&Cs of the provider
    - iv. Median time needed.
  - c) Inspected the November 2024 and February 2025 DSA Transparency Reports, to determine that reports included: the information about content moderation including the use of automated tools, the measures taken to provide training, as well as content moderation measures taken categorized by type of restriction applied.
  - d) Inspected the November 2024 and February 2025 DSA Transparency Reports to determine that the reports included the number of complaints in accordance with Article 20.
  - e) Inspected the November 2024 and February 2025 DSA Transparency Reports to determine that the reports included information about use of automation for content moderation was included.
5. Reviewed a random selection, for both transparency reports, and re-performed the validation steps; we identified that the metrics as included in the transparency reports were complete and accurate.
6. Inspected relevant IT controls, including controls related to change management, logical access and IT operation for the relevant systems in the production environment and determined that the controls were in place throughout the Examination Period to address key IT risks.
7. Inspected the related emails for approvals and confirmed that all of the metrics published in the February 2025 DSA Transparency Report have been validated by stakeholders, including a verification of the SQL code used to extract in-scope data from the correct data sources. Validated that all approving stakeholders were appropriate based on their job functions/titles.

**Changes to the audit procedures during the audit:**

None.

**Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:**

There were no material deviations identified in the performance of the above procedures, unless denoted below. The results of the audit procedures were deemed sufficient to obtain reasonable assurance.

**Positive** - In our opinion, the audited service complied with this Specified Requirement during the Examination Period in all material respects.

**Recommendations on specific measures:**

Not applicable.

**Recommended timeframe to implement specific measures:**

Not applicable.

Section 2 – Additional provisions applicable to providers of hosting services, including online platforms

<p><b>Obligation:</b> 16.1</p>	<p><b>Audit criteria:</b></p> <p>Throughout the period, in all material respects:</p> <ol style="list-style-type: none"> <li>1. Provider put in place a mechanism to allow an individual/entity to notify them of information that the individual/entity considers to be illegal content.</li> <li>2. The mechanism(s): <ul style="list-style-type: none"> <li>▶ Is easy to access</li> <li>▶ Is user-friendly</li> <li>▶ allows for submission of notices exclusively by electronic means.</li> </ul> </li> </ol> <p><b>The following are certain operational benchmark(s) defined by the audited service:</b></p> <p>“Easy to access”: The 'Report this Item' and 'Report Review' buttons are easily accessible from the specific product listing page, and the IP Portal can be easily accessed from the footer of the Temu landing page and any specific product listing page.</p> <p>“User friendly”: i) easy to access; ii) is a webform that provides instructions; iii) provides a breakdown of categories; and/or iv) provides free text to facilitate capture of explanations.</p>	<p><b>Materiality threshold:</b></p> <p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
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**Audit procedures, results and information relied upon:**

In order to evaluate the audited provider's compliance with this Specified Requirement, we evaluated the design and operation of controls and performed substantive procedures, as outlined below.

1. Conducted a walkthrough and inquired with management to gain an understanding as to how the online mechanism implemented facilitates the submission of illegal content during the Examination Period.
2. Reviewed the design of the policies and controls in place to evaluate the audited service's compliance with this Specified Requirement.
3. Inspected the audited service's public facing website to ensure it includes access for individuals or entities to notify the audited service of illegal content electronically. We verified that the mechanism is easy to access, user-friendly, and allows for submission of notices exclusively by electronic means.
4. Inspected the audited service's list of internal definitions and verified that the audited service considers the definition of "illegal content" as following: 'Illegal content' means any information that, in itself or in relation to an activity, including the sale of products or the provision of services, is not in compliance with Union law or the law of any Member State which is in compliance with Union law, irrespective of the precise subject matter or nature of that law.
5. Inspected relevant IT controls, including controls related to change management, logical access and IT operation for the relevant systems in the production environment and determined that the controls were in place throughout the Examination Period to address key IT risks.
6. We confirmed, after the Examination Period, that there were no significant changes in the design or operation of the systems and processes in the period between testing and the end of the Examination Period.

**Changes to the audit procedures during the audit:**

None.

**Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:**

There were no material deviations identified in the performance of the above procedures, unless denoted below. The results of the audit procedures were deemed sufficient to obtain reasonable assurance.

**Positive** - In our opinion, the audited service complied with the Specified Requirement during the Examination Period, in all material aspects.

<p><b>Recommendations on specific measures:</b></p> <p>Not applicable.</p>	<p><b>Recommended timeframe to implement specific measures:</b></p> <p>Not applicable.</p>
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<p><b>Obligation:</b> 16.2</p>	<p><b>Audit criteria:</b></p> <p>Throughout the period, in all material respects: The mechanisms referred to in 16.1 facilitated the submission of sufficiently precise and adequately substantiated notices containing the following:</p> <ul style="list-style-type: none"> <li>▶ A sufficiently substantiated explanation of the reasons why the individual or entity alleges the information in question to be illegal content</li> <li>▶ A clear indication of the exact electronic location of that information, such as the exact URL or URLs, and, where necessary, additional information enabling the identification of the illegal content adapted to the type of content and to the specific type of hosting service</li> <li>▶ The name and email address of the individual or entity submitting the notice, except in the case of information considered to involve one of the offences referred to in Articles 3 to 7 of Directive 2011/93/EU</li> <li>▶ A statement confirming the bona fide belief of the individual or entity submitting the notice that the information and allegations contained therein are accurate and complete.</li> </ul> <p><b>The following are certain operational benchmark(s) defined by the audited service:</b></p> <p>“Sufficiently precise and adequately substantiated”:</p> <ul style="list-style-type: none"> <li>(i) contains a list of the categories for illegal content;</li> <li>(ii) requires users to provide explanation of the reasons of why the content is illegal;</li> <li>(iii) requires users to provide a statement that the notice and the allegations contained therein are accurate and complete;</li> <li>(iv) requires users to clearly indicate the exact electronic location (URL or URLs) of the alleged infringing content when submitting notices via the IP Portal.</li> </ul>	<p><b>Materiality threshold:</b></p> <p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
<p><b>Audit procedures, results and information relied upon:</b></p> <p>In order to evaluate the audited provider’s compliance with this Specified Requirement, we primarily evaluated the design and operation of control(s), as outlined below.</p> <ol style="list-style-type: none"> <li>1. Conducted a walkthrough and inquired with management to gain an understanding as to how the online mechanism implemented facilitates the submission of illegal content during the Examination Period and how it facilitates the submission of sufficiently precise and adequately substantiated notices.</li> <li>2. Reviewed the design of the policies and controls in place to evaluate the audited service’s compliance with this Specified Requirement.</li> <li>3. Inspected the notice webform to submit notices of illegal content on the report portal and determined that it facilitated the submission of sufficiently precise and adequately substantiated notices containing the following: <ul style="list-style-type: none"> <li>a) A sufficiently substantiated explanation of the reasons why the individual or entity alleges the information in question to be illegal content</li> </ul> </li> </ol>		

- b) A clear indication of the exact electronic location of that information, such as the exact URL or URLs, and, where necessary, additional information enabling the identification of the illegal content adapted to the type of content and to the specific type of hosting service
  - c) The name and email address of the individual or entity submitting the notice, except in the case of information considered to involve one of the offences referred to in Articles 3 to 7 of Directive 2011/93/EU
  - d) A statement confirming the bona fide belief of the individual or entity submitting the notice that the information and allegations contained therein are accurate and complete.
4. Inspected relevant IT controls, including controls related to change management, logical access and IT operations for the relevant systems in the production environment and determined that the controls were in place throughout the Examination Period to address key IT risks.
5. We confirmed, after the Examination Period, that there were no significant changes in the design or operation of the systems and processes in the period between testing and the end of the Examination Period.

**Changes to the audit procedures during the audit:**

None.

**Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:**

There were no material deviations identified in the performance of the above procedures, unless denoted below. The results of the audit procedures were deemed sufficient to obtain reasonable assurance.

**Positive** - In our opinion, the audited service complied with the Specified Requirement during the Examination Period, in all material aspects.

<p><b>Recommendations on specific measures:</b></p> <p>Not applicable.</p>	<p><b>Recommended timeframe to implement specific measures:</b></p> <p>Not applicable.</p>
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<p><b>Obligation:</b> 16.4</p>	<p><b>Audit criteria:</b></p> <p>Throughout the period, in all material respects: Where a notice contained the electronic contact information of the individual or entity that submitted it, the provider of hosting services sent a confirmation of receipt of the notice to that individual or entity without undue delay.</p> <p><b>The following are certain operational benchmark(s) defined by the audited service:</b></p> <p>“Without undue delay”: Sent automatically when the notice is submitted; undue delay would be where this notification fails to automatically present.</p>	<p><b>Materiality threshold:</b></p> <p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
<p><b>Audit procedures, results and information relied upon:</b></p> <p>In order to evaluate the audited provider’s compliance with this Specified Requirement, we primarily evaluated the design and operation of controls, as outlined below.</p> <ol style="list-style-type: none"> <li>1. Conducted a walkthrough and inquired with management to gain an understanding as to how the online mechanism implemented facilitates the submission of illegal content during the Examination Period and how the confirmation of receipt is sent to the individual or entity without undue delay.</li> <li>2. Reviewed the design of the policies and controls in place to evaluate the audited service’s compliance with this Specified Requirement.</li> <li>3. Inspected, for each of the following dedicated notice intake mechanisms the processes and technical functionalities for confirming receipt of a notice: “Report this Item”, “Report this Review” and “IP Portal”. Inspected the code configuration of the system to determine a confirmation of receipt was automatically sent to the reporter once the report form was submitted without undue delay.</li> <li>4. Inspected relevant IT controls, including controls related to change management, logical access and IT operations for the relevant systems in the production environment and determined that the controls were in place throughout the Examination Period to address key IT risks.</li> <li>5. We confirmed, after the Examination Period, that there were no significant changes in the design or operation of the systems and processes in the period between testing and the end of the Examination Period.</li> </ol> <p><b>Changes to the audit procedures during the audit:</b></p> <p>None.</p> <p><b>Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:</b></p> <p>There were no material deviations identified in the performance of the above procedures, unless denoted below. The results of the audit procedures were deemed sufficient to obtain reasonable assurance.</p> <p><b>Positive</b> - In our opinion, the audited service complied with the Specified Requirement during the Examination Period, in all material aspects.</p>		
<p><b>Recommendations on specific measures:</b></p> <p>Not applicable.</p>	<p><b>Recommended timeframe to implement specific measures:</b></p> <p>Not applicable.</p>	

<p><b>Obligation:</b> 16.5</p>	<p><b>Audit criteria:</b></p> <p>Throughout the period, in all material respects:</p> <ol style="list-style-type: none"> <li>The provider notified the individual or entity of its decision: <ul style="list-style-type: none"> <li>▶ Without undue delay</li> <li>▶ And provided information on the possibilities for redress.</li> </ul> </li> </ol> <p><b>The following are certain operational benchmark(s) defined by the audited service:</b></p> <p>“Without undue delay”: Sent automatically when decisions are confirmed, unless there is a basis for delay in special circumstances</p>	<p><b>Materiality threshold:</b></p> <p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
<p><b>Audit procedures, results and information relied upon:</b></p> <p>In order to evaluate the audited provider’s compliance with this Specified Requirement, we evaluated the design and operation of controls and performed substantive procedures, as outlined below.</p> <ol style="list-style-type: none"> <li>Conducted a walkthrough and inquired with management to gain an understanding as to how the individual or entity is notified of the audited service’s decision without undue delay and information on redress possibilities in respect of that decision.</li> <li>Reviewed the design of the policies and controls in place to evaluate the audited service’s compliance with this Specified Requirement.</li> <li>Inspected the email configurations in the system to determine that the automated responses are configured appropriately per the purpose of the emails. In addition, inspected email templates to determine that emails containing the appropriate information, including options for redress are sent to the individual or entity that submitted the notice.</li> <li>Selected a sample of notices, in accordance with the sampling approach described in Appendix 2, to determine the individual or entity was notified of the audited service’s decision without undue delay and included possibilities for redress.</li> <li>Inspected relevant IT controls, including controls related to change management, logical access and IT operations for the relevant systems in the production environment and determined that the controls were in place throughout the Examination Period to address key IT risks.</li> <li>We confirmed, after the Examination Period, that there were no significant changes in the design or operation of the systems and processes in the period between testing and the end of the Examination Period.</li> </ol> <p><b>Changes to the audit procedures during the audit:</b></p> <p>Based on our understanding of the process subsequent to planning, changed audit procedures to test the Specified Requirements substantively instead of solely relying on controls.</p> <p><b>Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:</b></p> <p>There were no material deviations identified in the performance of the above procedures, unless denoted below. The results of the audit procedures were deemed sufficient to obtain reasonable assurance.</p> <p><b>Positive</b> - In our opinion, the audited service complied with this Specified Requirement during the Examination Period in all material respects.</p>		



<p><b>Recommendations on specific measures:</b></p> <p>Not applicable.</p>	<p><b>Recommended timeframe to implement specific measures:</b></p> <p>Not applicable.</p>
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<p><b>Obligation:</b> 16.6</p>	<p><b>Audit criteria:</b></p> <p>Throughout the period, in all material respects:</p> <ol style="list-style-type: none"> <li>1. The provider processed any notices they received and made decisions on the information in a timely, diligent, non-arbitrary, and objective manner.</li> <li>2. For any notices processed by electronic means, the notices sent to individuals or entities indicated that automated means were used for processing or decision-making.</li> </ol> <p><b>The following are certain operational benchmark(s) defined by the audited service:</b></p> <p>“Timely”: Notices are processed within [CONFIDENTIAL] unless special circumstances require an in-depth analysis.</p> <p>“Automated means”: A process carried out entirely without human input or intervention.</p> <p>“Diligent, non arbitrary and objective manner”: Handle notices in a diligent, non-arbitrary, and objective manner as detailed in applicable standard operating procedures.</p>	<p><b>Materiality threshold:</b></p> <p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
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**Audit procedures, results and information relied upon:**

In order to evaluate the audited provider’s compliance with this Specified Requirement, we evaluated the design and operation of controls and performed substantive procedures, as outlined below.

1. Conducted a walkthrough and inquired with management to gain an understanding as to how the audited service processes the notice and for any notices processed or decided upon by automated means, that information is included in the decision sent to individuals or entities.
2. Reviewed the design of the policies and controls in place to evaluate the audited service’s compliance with this Specified Requirement.
3. Inspected the audited service’s internal notice and action mechanism policy and determined that it defined a process for relevant team members to review the notice form submitted by the recipient of the audited service in a timely, non-discriminatory, diligent, and non-arbitrary manner.
4. Selected a sample of notices, in accordance with the sampling approach described in Appendix 2, and tested if the notice was processed in a timely, diligent, non-arbitrary, and objective manner.
5. Inspected relevant IT controls, including controls related to change management, logical access and IT operations for the relevant systems in the production environment and determined that the controls were in place throughout the Examination Period to address key IT risks.
6. We confirmed, after the Examination Period, that there were no significant changes in the design or operation of the systems and processes in the period between testing and the end of the Examination Period.

**Changes to the audit procedures during the audit:**

Based on our understanding of the process subsequent to planning, changed audit procedures to test the Specified Requirements substantively instead of solely relying on controls.

**Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:**

There were no material deviations identified in the performance of the above procedures, unless denoted below. The results of the audit procedures were deemed sufficient to obtain reasonable assurance.

**Positive** - In our opinion, the audited service complied with this Specified Requirement during the Examination Period in all material respects.

<p><b>Recommendations on specific measures:</b> Not applicable.</p>	<p><b>Recommended timeframe to implement specific measures:</b> Not applicable.</p>
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<p><b>Obligation:</b></p> <p>17.1</p>	<p><b>Audit criteria:</b></p> <p>Throughout the period, in all material respects, where electronic contact details are known to the provider, and where the content is not deceptive high-volume commercial content, a clear and specific statement of reason was provided to recipients of the service for any of the following restrictions imposed when content was determined to be illegal or incompatible with T&amp;Cs:</p> <ul style="list-style-type: none"> <li>▶ Any restrictions of the visibility of specific items of information provided by the recipient of the service, including removal of content, disabling access to content, or demoting content</li> <li>▶ Suspension, termination or other restriction of monetary payments</li> <li>▶ Suspension or termination of services (whole or in part)</li> <li>▶ Suspension or termination of the user's account.</li> </ul> <p><b>The following are certain operational benchmark(s) defined by the audited service:</b></p> <p>“Clear and specific”: A statement of reasons is ‘clear, specific, easily comprehensible, precise and as specific as reasonably possible under the circumstances’ where it provides the following information: i) the decision; ii) the fact and reason for the decision; iii) whether the decision was made by automated means; and iv) rights of appeal and redress.</p>	<p><b>Materiality threshold:</b></p> <p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
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**Audit procedures, results and information relied upon:**

In order to evaluate the audited provider’s compliance with this Specified Requirement, EY primarily evaluated the design and operation of controls as outlined below.

1. Conducted a walkthrough to understand the processes and controls in place to meet the Specified Requirements.
2. Reviewed the design of the policies and processes in place to evaluate the audited service’s compliance with the Specified Requirements.
3. Inspected, for a sample of recipients of the service, selected in accordance with the sampling approach described in Appendix 2, that the audited service provided a clear and specific Statement of Reason (SOR) for any of the restrictions imposed when content was determined to be illegal or incompatible with T&Cs.
4. Inspected the code configuration of the system to determine that the system sends a clear and specific SOR automatically upon the audited service taking restrictive action(s) referred to in Article 17.1 when content was determined to be illegal or incompatible with T&Cs.
5. Inspected relevant IT controls, including controls related to change management, logical access and IT operation for the relevant systems in the production environment and determined that the controls were in place throughout the Examination Period to address key IT risks.
6. We confirmed, after the Examination Period, that there were no significant changes in the design or operation of the systems and processes in the period between testing and the end of the Examination Period.

**Changes to the audit procedures during the audit:**

None.

**Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:**

There were no material deviations identified in the performance of the above procedures, unless denoted below. The results of the audit procedures were deemed sufficient to obtain reasonable assurance.

**Positive** - In our opinion, the audited service complied with this Specified Requirement during the Examination Period, in all material respects.

**Recommendations on specific measures:**

Not applicable.

**Recommended timeframe to implement specific measures:**

Not applicable.

Obligation:	Audit criteria:	Materiality threshold:
17.3	<p>Throughout the period, in all material respects:</p> <p>The statements of reason issued by the provider contained the following:</p> <ul style="list-style-type: none"> <li>▶ Information on whether the decision entailed either the removal of, the disabling of access to, the demotion of or the restriction of the visibility of the information, or imposed other measures referred to in 17.1, and where relevant, the territorial scope of the decision and its duration</li> <li>▶ Facts and circumstances relied on in taking the decision</li> <li>▶ Information on whether the decision was taken pursuant to a notice submitted under Article 16 or based on voluntary own-initiative investigations (where relevant) and, where strictly necessary, the identity of the notifier</li> <li>▶ Information on the use of automated means in taking the decision, including information on whether the decision was taken in respect of content detected or identified using automated means</li> <li>▶ For allegedly illegal content, a reference to the legal ground relied on and explanation of why the information is considered to be illegal content on that ground</li> <li>▶ For alleged incompatibility of the information with the T&amp;Cs of the hosting services, a reference to the contractual ground relied on and explanations as to why the information was considered to be incompatible with that ground</li> <li>▶ Clear and user-friendly information on the possibilities of redress available to the recipient, where applicable, through internal complaint-handling mechanisms, out-of-court dispute settlement, and judicial redress.</li> </ul> <p>The statement of reason was clear and easily comprehensible; and as precise and specific as reasonably possible under the given circumstances.</p> <p><b>The following are certain operational benchmark(s) defined by the audited service:</b></p> <p>“Clear, easily comprehensible and precise and specific”: A statement of reasons is ‘clear, specific, easily comprehensible, precise and as specific as reasonably possible under the circumstances’ where it provides the following information in respect to the decision: i) the decision; ii) the fact and reason for the decision; iii) whether the decision was made by automated means; and iv) rights of appeal and redress.</p>	<p><b>Materiality threshold:</b></p> <p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>

**Audit procedures, results and information relied upon:**

In order to evaluate the audited provider’s compliance with this Specified Requirement, EY primarily evaluated the design and operation of controls, as outlined below.

1. Conducted a walkthrough to understand the processes and controls in place to meet the Specified Requirements.
2. Reviewed the design of the policies and processes in place to evaluate the audited service’s compliance with the Specified Requirements.
3. Inspected the emails or in-site messages configurations and emails or in-site messages templates in the system to determine that the SOR is generated automatically with clear and specific information referred to in Article 17.3.
4. Inspected, for a sample of recipients of the service, selected in accordance with the sampling approach described in Appendix 2, that the SOR provided by the audited service contained the relevant information described in Article 17.3
5. Inspected the code configuration of system to determine that the system sends a clear and specific SOR automatically upon the audited service taking restrictive action(s) referred to in Article 17.1 when content was determined to be illegal or incompatible with T&Cs.
6. Inspected relevant IT controls, including controls related to change management, logical access and IT operation for the relevant systems in the production environment and determined that the controls were in place throughout the Examination Period to address key IT risks.
7. We confirmed, after the Examination Period, that there were no significant changes in the design or operation of the systems and processes in the period between testing and the end of the Examination Period.

**Changes to the audit procedures during the audit:**

None.

**Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:**

There were no material deviations identified in the performance of the above procedures, unless denoted below. The results of the audit procedures were deemed sufficient to obtain reasonable assurance.

**Positive** - In our opinion, the audited service complied with this Specified Requirement during the Examination Period, in all material respects.

<p><b>Recommendations on specific measures:</b> Not applicable.</p>	<p><b>Recommended timeframe to implement specific measures:</b> Not applicable.</p>
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<p><b>Obligation:</b></p> <p>17.4</p>	<p><b>Audit criteria:</b></p> <p>Throughout the period, in all material respects: The statement of reason provided by the provider was clear and easily comprehensible; and as precise and specific as reasonably possible under the given circumstances. The information shall, in particular, be such as to reasonably allow the recipient of the service concerned to effectively exercise the possibilities for redress referred to in of paragraph 3, point (f).</p> <p><b>The following are certain operational benchmark(s) defined by the audited service:</b></p> <p>“Clear, easily comprehensible and precise and specific”: A statement of reasons is ‘clear, specific, easily comprehensible, precise and as specific as reasonably possible under the circumstances’ where it provides the following information in respect to the decision: i) the decision; ii) the fact and reason for the decision; iii) whether the decision was made by automated means; and iv) rights of appeal and redress.</p>	<p><b>Materiality threshold:</b></p> <p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
<p><b>Audit procedures, results and information relied upon:</b></p> <p>In order to evaluate the audited provider’s compliance with this Specified Requirement, EY primarily evaluated the design and operation of controls, as outlined below.</p> <ol style="list-style-type: none"> <li>1. Conducted a walkthrough to understand the processes and controls in place to meet the Specified Requirements.</li> <li>2. Assessed that the design of the policies and processes in place was appropriate to comply with the Specified Requirements.</li> <li>3. Inspected, for a sample of recipients of the service, selected in accordance with the sampling approach described in Appendix 2, that the SOR provided by the audited service contained the relevant information described in Article 17.3 and was clear, easily comprehensible, precise and specific as reasonably possible under the circumstances and to allow a user to effectively exercise the possibilities for redress referred to in Article 17.3(f).</li> <li>4. Inspected relevant IT controls, including controls related to change management, logical access and IT operation for the relevant systems in the production environment and determined that the controls were in place throughout the Examination Period to address key IT risks.</li> </ol> <p><b>Changes to the audit procedures during the audit:</b></p> <p>None.</p> <p><b>Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:</b></p> <p>There were no material deviations identified in the performance of the above procedures, unless denoted below. The results of the audit procedures were deemed sufficient to obtain reasonable assurance.</p> <p><b>Positive</b> - In our opinion, the audited service complied with this Specified Requirement during the Examination Period, in all material respects.</p>		
<p><b>Recommendations on specific measures:</b></p> <p>Not applicable.</p>	<p><b>Recommended timeframe to implement specific measures:</b></p> <p>Not applicable.</p>	



<p><b>Obligation:</b></p> <p>18.1</p>	<p><b>Audit criteria:</b></p> <p>Throughout the period, Law enforcement or judicial authorities of the Member State or Member States were promptly informed when the provider of hosting services became aware of any information giving rise to a suspicion that a criminal offence involving a threat to the life or safety of a person or persons has taken place, is taking place or is likely to take place.</p> <p><b>The following are certain operational benchmark(s) defined by the audited service:</b></p> <p>“Promptly”: Within [CONFIDENTIAL] following Temu's standard operating procedures concerning the notification of suspicions of criminal offenses.</p> <p>“Becomes aware”: The audited service becomes aware when relevant teams confirm the criminal threat is reportable after conducting an investigation.</p>	<p><b>Materiality threshold:</b></p> <p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
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**Audit procedures, results and information relied upon:**

In order to evaluate the audited provider's compliance with this Specified Requirement, EY primarily evaluated the design and operation of control(s), as outlined below.

1. Inquired with management and conducted a walkthrough to gain an understanding of the policies and controls in place concerning suspicion that a criminal offense involving a threat to the life or safety of a person or persons; procedures and processes for identifying the appropriate law enforcement or judicial authorities of the Member State or Member States concerned; and notifying them of its suspicions and controls in place.
2. Reviewed the design of the policies and processes in place to evaluate the audited service's compliance with the Specified Requirements
3. Conducted a walkthrough of the process in place and verified [CONFIDENTIAL] was identified during the Examination Period. Inspected the corresponding notifications, email correspondence and supporting documentation associated with this instance and determined the Member-State law enforcement authorities were promptly notified of the content that gave rise to the suspicion of threat(s) to life or safety using established reporting mechanisms and in accordance with the audited service's established benchmark for promptly notifying the authorities. We verified discrepancy with internal procedures, as certain steps in the process were not adequately documented, which is not in compliance with the internal policy.
4. Reviewed the training minutes and confirmed that appropriate training was provided to the audited service's employees to ensure they understand the necessary steps to take when suspecting that a criminal offense involving a threat to the life or safety of a person or persons occurred.
5. We confirmed, after the Examination Period, that there were no significant changes in the design or operation of the systems and processes in the period between testing and the end of the Examination Period.

**Changes to the audit procedures during the audit:**

None.

**Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:**

There were no material deviations identified in the performance of the above procedures, unless denoted below. The results of the audit procedures were deemed sufficient to obtain reasonable assurance.

**Positive with Comments** - In our opinion, the audited service complied with this Specified Requirement during the Examination Period, in all material respects. See below *Recommendation on specific measures*.

**Recommendations on specific measures:**

We recommend that the audited service consistently adhere to its internal procedures, particularly in situations when a suspicion that a criminal offence involving a threat to the life or safety of a person or persons has taken place, is taking place or is likely to take place. The audited service needs to ensure that the procedure is always followed and that all required steps are properly documented.

**Recommended timeframe to implement specific measures:**

1 October 2025 - 31 December 2025

<p><b>Obligation:</b> 18.2</p>	<p><b>Audit criteria:</b> Throughout the period, in all material respects: Instances where the provider could not identify with reasonable certainty the Member State concerned, the law enforcement authorities of the Member State in which the provider is established or where its legal representative resides or is established, Europol, or both were informed.</p>	<p><b>Materiality threshold:</b> If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
<p><b>Audit procedures, results and information relied upon:</b> In order to evaluate the audited provider’s compliance with this Specified Requirement, EY primarily evaluated the design and operation of control(s), as outlined below.</p> <ol style="list-style-type: none"> <li>1. Inquired with management and conducted a walkthrough to gain an understanding of the policies concerning instances where the audited service could not identify with reasonable certainty the Member State concerned, how the law enforcement authorities of the Member State in which the provider is established or where its legal representative resides or is established are informed or how Europol is informed.</li> <li>2. Reviewed that the design of the policies and processes in place was appropriate to comply with the Specified Requirement.</li> <li>3. Conducted a walkthrough of the process in place and verified that no instance occurred where the audited service could not identify with reasonable certainty the Member State concerned. We inspected internal policies and verified a procedure is in place where the audited service informs the Europol in cases where they could not identify with reasonable certainty the Member State concerned.</li> <li>4. We confirmed, after the Examination Period, that there were no significant changes in the design or operation of the systems and processes in the period between testing and the end of the Examination Period.</li> </ol> <p><b>Changes to the audit procedures during the audit:</b> None.</p> <p><b>Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:</b> There were no material deviations identified in the performance of the above procedures, unless denoted below. The results of the audit procedures were deemed sufficient to obtain reasonable assurance.</p> <p><b>Positive</b> - In our opinion, the audited service complied with this Specified Requirement during the Examination Period in all material respects.</p>		
<p><b>Recommendations on specific measures:</b> Not applicable.</p>	<p><b>Recommended timeframe to implement specific measures:</b> Not applicable.</p>	

**Section 3 – Additional provisions applicable to providers of online platforms**

<p><b>Obligation:</b> 20.1</p>	<p><b>Audit criteria:</b></p> <p>Throughout the period, in all material respects:</p> <ol style="list-style-type: none"> <li>1. Providers of online platforms provided recipients of the service with access to an effective internal complaint-handling system that enables them to lodge complaints against the following decisions taken by the provider of the online platform: <ul style="list-style-type: none"> <li>▶ Whether or not to remove or disable access to or restrict visibility of the information</li> <li>▶ Whether or not to suspend or terminate the provision of the service, in whole or in part, to the recipients</li> <li>▶ Whether or not to suspend or terminate the recipients' account</li> <li>▶ Whether or not to suspend or terminate or otherwise restrict the ability to monetize information provided by the recipients.</li> </ul> </li> <li>2. Recipients of the service were provided access to lodge a complaint for at least 6 months following the decision(s) (starting on the day on which the recipient was informed about the decision pursuant to Art. 16.5 or Art. 17)</li> <li>3. The internal complaint-handling system allowed submissions of a complaint electronically and free of charge.</li> </ol>	<p><b>Materiality threshold:</b></p> <p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
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**Audit procedures, results and information relied upon:**

In order to evaluate the audited provider's compliance with this Specified Requirement, EY primarily evaluated the design and operation of control(s), as outlined below.

1. Inquired with management and conducted a walkthrough to gain an understanding of the process to allow recipients of the service, including individuals or entities that have submitted a notice, to submit a complaint and determined a mechanism is in place to ensure that individuals or entities have access to an effective internal complaint-handling system that enables them to lodge complaints against decisions taken by the provider of the online platform electronically and free of charge and for at least 6 months from the notice of the decision.
2. Reviewed that the design of the policies and processes in place was appropriate to comply with the Specified Requirement.
3. Validated as part of the testing of Article 16 and Article 17, that the audited service provided recipients of the service with access to an effective internal complaint-handling system which enables them to lodge complaints against the decisions as outlined in the Specified Requirements.
4. Inspected the appeal option indicated in the statement of reasons (SOR) sent by the audited service, or through links in Temu's Seller Center, or through links in the audited service's website, and determined that it includes access for individuals or entities to lodge complaints electronically and free of charge.
5. Inspected relevant IT controls, including controls related to change management, logical access and IT operations for the relevant systems in the production environment and determined that the controls were in place throughout the Examination Period to address key IT risks.
6. We confirmed, after the Examination Period, that there were no significant changes in the design or operation of the systems and processes in the period between testing and the end of the Examination Period.

**Changes to the audit procedures during the audit:**

None

**Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:**

There were no material deviations identified in the performance of the above procedures, unless denoted below. The results of the audit procedures were deemed sufficient to obtain reasonable assurance.

**Positive** - In our opinion, the audited service complied with this Specified Requirement during the Examination Period in all material respects.

<p><b>Recommendations on specific measures:</b> Not applicable.</p>	<p><b>Recommended timeframe to implement specific measures:</b> Not applicable.</p>
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<p><b>Obligation:</b> 20.3</p>	<p><b>Audit criteria:</b></p> <p>Throughout the period, in all material respects:</p> <p>The provider's internal complaint-handling system available to users of the service, met the following criteria:</p> <ul style="list-style-type: none"> <li>▶ Easy to access</li> <li>▶ User-friendly</li> <li>▶ Enabled and facilitated the submission of sufficiently precise and adequately substantiated complaints.</li> </ul> <p><b>The following are certain operational benchmark(s) defined by the audited service:</b></p> <p>"Easy to access and user-friendly": Accessible via a direct link provided in the statement of reasons or the decision notification email sent to the notifying parties or via the appeal button on the Temu Seller Central.</p> <p>"Sufficiently precise and adequately substantiated complaints": Sufficiently precise and adequately substantiated complaints are enabled where they:</p> <ul style="list-style-type: none"> <li>i). Identify the relevant content or account;</li> <li>ii). Identify the moderation decision of the subject of the complaint/appeal; and</li> <li>iii). Identify grounds of appeal and explanations</li> </ul>	<p><b>Materiality threshold:</b></p> <p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
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**Audit procedures, results and information relied upon:**

In order to evaluate the audited provider's compliance with this Specified Requirement, EY primarily evaluated the design and operation of control(s), as outlined below.

1. Inquired with management and conducted a walkthrough to gain an understanding of the process that allows recipients of the service to submit an appeal via the audited service's internal complaint-handling system to ensure it was easy to access, user-friendly and enabled and facilitated the submission of sufficiently precise and adequately substantiated complaints.
2. Reviewed that the design of the policies and processes in place was appropriate to comply with the Specified Requirement.
3. Inspected the appeal option indicated in the statement of reasons (SOR) sent by the audited service, or through links in Temu's Seller Center, or through links in the audited service's website, and determined that the internal complaint-handling system is easy to access, user-friendly, and enable and facilitate the submission of sufficiently precise and adequately substantiated complaints. In addition, also inspected the SOR sent to the recipients of the service under Article 17 and the notice decision under Article 16(5) and validated that each included either a link to the appeal form directly or a link to the appeal form within the Seller Center.
4. Inspected relevant IT controls, including controls related to change management, logical access and IT operations for the relevant systems in the production environment and determined that the controls were in place throughout the Examination Period to address key IT risks.
5. We confirmed, after the Examination Period, that there were no significant changes in the design or operation of the systems and processes in the period between testing and the end of the Examination Period.

**Changes to the audit procedures during the audit:**

None

**Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:**

There were no material deviations identified in the performance of the above procedures, unless denoted below. The results of the audit procedures were deemed sufficient to obtain reasonable assurance.

**Positive** - In our opinion, the audited service complied with this Specified Requirement during the Examination Period in all material respects.

**Recommendations on specific measures:**

Not applicable.

**Recommended timeframe to implement specific measures:**

Not applicable.



<p><b>Obligation:</b> 20.4</p>	<p><b>Audit criteria:</b></p> <p>Throughout the period, in all material respects:</p> <ol style="list-style-type: none"><li>1. The provider handled complaints submitted through the internal complaint-handling systems in a manner that was timely, non-discriminatory, diligent, and non-arbitrary.</li><li>2. For instances in which, after reviewing the complainant's appeal, the provider determined that the original decision was incorrectly made, the provider reversed its decision without undue delay.</li></ol> <p><b>The following are certain operational benchmark(s) defined by the audited service:</b></p> <p>“Timely”: On average, complaints or appeals are processed within [CONFIDENTIAL] unless special circumstances require an in-depth analysis.</p> <p>“Non-discriminatory, diligent, and non-arbitrary”: Handle complaints in a fair, thorough, and reasoned manner as detailed in applicable standard operating procedures.</p>	<p><b>Materiality threshold:</b></p> <p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
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**Audit procedures, results and information relied upon:**

In order to evaluate the audited provider’s compliance with this Specified Requirement, EY evaluated the design and operation of control(s) and performed substantive procedures, as outlined below.

1. Inquired with management and conducted a walkthrough to gain an understanding of how the audited service processes complaints in a timely, non-discriminatory, diligent and non-arbitrary manner, and the original decision is reversed without undue delay for successful appeals.
2. Reviewed that the design of the policies and processes in place was appropriate to comply with the Specified Requirement.
3. Inspected the audited service’s internal appeal review policy, and determined that it defined a process in place for relevant team members to review the appeal form submitted by the complainants in a timely, non-discriminatory, diligent, and non-arbitrary manner.
4. Selected a sample of complaints, in accordance with the sampling approach described in Appendix 2, and determined that the complaints were processed in a timely, non-discriminatory, diligent and non-arbitrary manner. For samples where, after reviewing the complainant’s appeal, the audited service determined the original decision was incorrectly made concluded that the original decision was reversed without undue delay.
5. Inspected relevant IT controls, including controls related to change management, logical and IT operations access for the relevant systems in the production environment and determined that the controls were in place throughout the Examination Period to address key IT risks.
6. We confirmed, after the Examination Period, that there were no significant changes in the design or operation of the systems and processes in the period between testing and the end of the Examination Period.

**Changes to the audit procedures during the audit:**

Based on our understanding of the process subsequent to planning, changed audit procedures to test the Specified Requirements substantively instead of solely relying on controls.

**Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:**

There were no material deviations identified in the performance of the above procedures, unless denoted below. The results of the audit procedures were deemed sufficient to obtain reasonable assurance.

**Positive** - In our opinion, the audited service complied with this Specified Requirement during the Examination Period in all material respects.

**Recommendations on specific measures:**

Not applicable.

**Recommended timeframe to implement specific measures:**

Not applicable.

<p><b>Obligation:</b> 20.5</p>	<p><b>Audit criteria:</b></p> <p>Throughout the period, in all material respects: The provider informed complainants of their decision regarding the complaints lodged pursuant to Article 21 without undue delay, including information related to the possibility of out-of-court dispute settlement or other redress possibilities.</p> <p><b>The following are certain operational benchmark(s) defined by the audited service:</b></p> <p>“Without undue delay”: Unless there is a basis for delay in special circumstances, decisions on appeals or complaints are sent within[CONFIDENTIAL]</p>	<p><b>Materiality threshold:</b></p> <p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
<p><b>Audit procedures, results and information relied upon:</b></p> <p>In order to evaluate the audited provider’s compliance with this Specified Requirement, EY evaluated the design and operation of control(s) and performed substantive procedures, as outlined below.</p> <ol style="list-style-type: none"> <li>1. Inquired with management and conducted a walkthrough to gain an understanding of how the audited service communicates their decision without undue delay and include information related to the possibility of out-of-court dispute settlement or other redress possibilities.</li> <li>2. Reviewed that the design of the policies and processes in place was appropriate to comply with the Specified Requirement.</li> <li>3. Inspected a sample decision sent to the complainant, sampled in accordance with the sampling approach described in Appendix 2, and determined the audited service informs complainants of its decision without undue delay and that the decision communication includes information that relates to the possibility of out-of-court dispute settlement or other redress possibilities.</li> <li>4. Inspected relevant IT controls, including controls related to change management, logical access and IT operation for the relevant systems in the production environment and determined that the controls were in place throughout the Examination Period to address key IT risks.</li> <li>5. We confirmed, after the Examination Period, that there were no significant changes in the design or operation of the systems and processes in the period between testing and the end of the Examination Period.</li> </ol> <p><b>Changes to the audit procedures during the audit:</b></p> <p>Based on our understanding of the process subsequent to planning, changed audit procedures to test the Specified Requirements substantively instead of solely relying on controls.</p> <p><b>Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:</b></p> <p>There were no material deviations identified in the performance of the above procedures, unless denoted below. The results of the audit procedures were deemed sufficient to obtain reasonable assurance.</p> <p><b>Positive</b> - In our opinion, the audited service complied with this Specified Requirement during the Examination Period in all material respects.</p>		
<p><b>Recommendations on specific measures:</b></p> <p>Not applicable.</p>	<p><b>Recommended timeframe to implement specific measures:</b></p> <p>Not applicable.</p>	

<p><b>Obligation:</b> 20.6</p>	<p><b>Audit criteria:</b></p> <p>Throughout the period, in all material respects:</p> <p>The provider ensured that decisions made per provision 20.1 were reviewed based upon:</p> <ul style="list-style-type: none"> <li>▶ The supervision of appropriately qualified staff and not solely on the basis of automated means.</li> </ul> <p><b>The following are certain operational benchmark(s) defined by the audited service:</b></p> <p>“Automated means”: A process carried out entirely without human input or intervention.</p>	<p><b>Materiality threshold:</b></p> <p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
<p><b>Audit procedures, results and information relied upon:</b></p> <p>In order to evaluate the audited provider’s compliance with this Specified Requirement, EY evaluated the design and operation of control(s) and performed substantive procedures, as outlined below.</p> <ol style="list-style-type: none"> <li>1. Inquired with management and conducted a walkthrough to gain an understanding of the decisions made under Article 20.5 are reviewed under the supervision of appropriately qualified staff and not solely on the basis of automated means.</li> <li>2. Reviewed that the design of the policies and processes in place was appropriate to comply with the Specified Requirement.</li> <li>3. Inspected the audited service’s internal appeal review policy, and determined that it defined a process for decisions under Article 20.5 to be reviewed and confirmed by human and not solely on the basis of automated means.</li> <li>4. Selected a sample of appeals, in accordance with the sampling approach described in Appendix 2, and determined based on review of the job titles/descriptions of the individuals performing the review of the appeal and the dedicated team the individuals belong to, that the appeals were handles under the supervision of qualified staff and not solely on the basis of automated means.</li> <li>5. Inspected relevant IT controls, including controls related to change management, logical and IT operations access for the relevant systems in the production environment and determined that the controls were in place throughout the Examination Period to address key IT risks.</li> <li>6. We confirmed, after the Examination Period, that there were no significant changes in the design or operation of the systems and processes in the period between testing and the end of the Examination Period.</li> </ol> <p><b>Changes to the audit procedures during the audit:</b></p> <p>Based on our understanding of the process subsequent to planning, changed audit procedures to test the Specified Requirements substantively instead of solely relying on controls.</p> <p><b>Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:</b></p> <p>There were no material deviations identified in the performance of the above procedures, unless denoted below. The results of the audit procedures were deemed sufficient to obtain reasonable assurance.</p> <p><b>Positive</b> - In our opinion, the audited service complied with this Specified Requirement during the Examination Period in all material respects.</p>		
<p><b>Recommendations on specific measures:</b></p> <p>Not applicable.</p>	<p><b>Recommended timeframe to implement specific measures:</b></p> <p>Not applicable.</p>	

<p><b>Obligation:</b> 21.1</p>	<p><b>Audit criteria:</b></p> <p>Throughout the period, in all material respects:</p> <ol style="list-style-type: none"> <li>1. Recipients of the service shall be entitled to select any out-of-court dispute settlement body that has been certified in accordance with paragraph 3 of this Article in order to resolve disputes relating to those decisions, including complaints that have not been resolved by means of the internal complaint-handling system referred to in that Article.</li> <li>2. The audited provider shall ensure that information to have access to an out-of-court dispute settlement is: <ul style="list-style-type: none"> <li>▶ Easily accessible on their online interface</li> <li>▶ Clear</li> <li>▶ User-friendly.</li> </ul> </li> <li>3. The first subparagraph is without prejudice to the right of the recipient of the service concerned to initiate, at any stage, proceedings to contest those decisions by the providers of online platforms before a court in accordance with the applicable law.</li> </ol> <p><b>The following are certain operational benchmark(s) defined by the audited service:</b></p> <p>“Easily Accessible”: The Information regarding the Out-of-court dispute settlement is publicly available on Temu’s Digital Services Act Help Page, which can be accessed via the Digital Services Act Page linked in the website footer. Thus, this information is accessible within two clicks from Temu’s landing page.</p> <p>“Clear and user-friendly”: i) Easy to access; ii) Provide instructions that are succinct, straightforward, and easily understandable by the average user.</p>	<p><b>Materiality threshold:</b></p> <p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
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**Audit procedures, results and information relied upon:**

In order to evaluate the audited provider’s compliance with this Specified Requirement, EY performed substantive procedures although controls existed, as outlined below.

1. Inquired with the audited service’s management to confirm whether there have been any out-of-court dispute settlement requests, and determined that no requests have been received during the period.
2. Reviewed that the design of the policies and processes in place was appropriate to comply with the Specified Requirement.
3. Inspected the User Interface of the audited service website and application and determined the information about the possibility for recipients of the service to have access to an out-of-court dispute settlement is easily accessible, clear, and user-friendly.
4. Inspected relevant IT controls, including controls related to change management, logical access and IT operations for the relevant systems in the production environment and determined that the controls were in place throughout the Examination Period to address key IT risks.
5. We confirmed, after the Examination Period, that there were no significant changes in the design or operation of the systems and processes in the period between testing and the end of the Examination Period.

**Changes to the audit procedures during the audit:**

Based on our updated understanding of the process subsequent to planning, changed audit procedures to test the Specified Requirements substantively instead of testing and relying on controls.

**Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:**

There were no material deviations identified in the performance of the above procedures, unless denoted below. The results of the audit procedures were deemed sufficient to obtain reasonable assurance.

**Positive** - In our opinion, the audited service complied with this Specified Requirement during the Examination Period, in all material respects.

<p><b>Recommendations on specific measures:</b> Not applicable.</p>	<p><b>Recommended timeframe to implement specific measures:</b> Not applicable.</p>
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<p><b>Obligation:</b> 21.2</p>	<p><b>Audit criteria:</b></p> <p>Throughout the period, in all material respects:</p> <ol style="list-style-type: none"> <li>Both parties shall engage with the selected certified out-of-court dispute settlement body with a view to resolving the dispute.</li> <li>The audited service may refuse to engage with such out-of-court dispute settlement body if a dispute has already been resolved concerning the same information and the same grounds of alleged illegality or incompatibility of content.</li> <li>The certified out-of-court dispute settlement body shall not have the power to impose a binding settlement of the dispute on the parties.</li> </ol>	<p><b>Materiality threshold:</b></p> <p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
<p><b>Audit procedures, results and information relied upon:</b></p> <p>In order to evaluate the audited provider’s compliance with this Specified Requirement, EY performed substantive procedures although controls existed, as outlined below.</p> <ol style="list-style-type: none"> <li>Inquired with the audited service’s management to confirm whether there have been any out-of-court dispute settlement requests, and determined that no requests have been received during the period.</li> <li>Reviewed that the design of the policies and processes in place was appropriate to comply with the Specified Requirement.</li> <li>We confirmed, after the Examination Period, that there were no significant changes in the design or operation of the systems and processes in the period between testing and the end of the Examination Period.</li> </ol> <p><b>Changes to the audit procedures during the audit:</b></p> <p>Based on our updated understanding of the process subsequent to planning, changed audit procedures to test the Specified Requirements substantively instead of testing and relying on controls.</p> <p><b>Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:</b></p> <p>There were no material deviations identified in the performance of the above procedures, unless denoted below. The results of the audit procedures were deemed sufficient to obtain reasonable assurance.</p> <p><b>Positive</b> - In our opinion, the audited service complied with this Specified Requirement during the Examination Period, in all material respects.</p>		
<p><b>Recommendations on specific measures:</b></p> <p>Not applicable.</p>	<p><b>Recommended timeframe to implement specific measures:</b></p> <p>Not applicable.</p>	

<p><b>Obligation:</b> 22.1</p>	<p><b>Audit criteria:</b></p> <p>Throughout the period, in all material respects:</p> <p>The provider's handling of trusted flagger notices met the following criteria:</p> <ul style="list-style-type: none"> <li>▶ Trusted flagger notice, for those acting in their designated areas of expertise, was given priority by those tasked with processing notices</li> <li>▶ Decision was made without undue delay.</li> </ul> <p><b>The following are certain operational benchmark(s) defined by the audited service:</b></p> <p>"Without undue delay": Notices submitted by trusted flaggers should be processed within [CONFIDENTIAL] unless special circumstances require an in-depth analysis.</p>	<p><b>Materiality threshold:</b></p> <p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
<p><b>Audit procedures, results and information relied upon:</b></p> <p>In order to evaluate the audited provider's compliance with this Specified Requirement, EY primarily evaluated the design and operation of control(s), as outlined below.</p> <ol style="list-style-type: none"> <li>1. Inquired with management and conducted a walkthrough to gain an understanding of the process that escalates notices submitted by trusted flaggers and validated that their notices will be given priority, processed and decided upon without undue delay.</li> <li>2. Reviewed that the design of the policies and processes in place was appropriate to comply with the Specified Requirement.</li> <li>3. Inspected the code configuration of the system to determine that the system alerts the dedicated staff to prioritize to handle the notices submitted by Trusted Flaggers.</li> <li>4. Selected a sample of notices submitted by trusted flaggers, in accordance with the sampling approach described in Appendix 2, and determined that such notices are systemically prioritized and processed without undue delay.</li> <li>5. Inspected relevant IT controls, including controls related to change management, logical access and IT operations for the relevant systems in the production environment and determined that the controls were in place throughout the Examination Period to address key IT risks.</li> <li>6. We confirmed, after the Examination Period, that there were no significant changes in the design or operation of the systems and processes in the period between testing and the end of the Examination Period.</li> </ol> <p><b>Changes to the audit procedures during the audit:</b> None</p> <p><b>Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:</b> There were no material deviations identified in the performance of the above procedures, unless denoted below. The results of the audit procedures were deemed sufficient to obtain reasonable assurance.</p> <p><b>Positive</b> - In our opinion, the audited service complied with this Specified Requirement during the Examination Period in all material respects.</p>		
<p><b>Recommendations on specific measures:</b></p> <p>Not applicable.</p>	<p><b>Recommended timeframe to implement specific measures:</b></p> <p>Not applicable.</p>	

<p><b>Obligation:</b> 23.1</p>	<p><b>Audit criteria:</b></p> <p>Throughout the period, in all material respects:</p> <ol style="list-style-type: none"> <li>1. The provider issued a warning to recipients of the service who were identified as frequently providing manifestly illegal content.</li> <li>2. After having issued a prior warning, the provider suspended the provision of their service to the recipients who frequently provided manifestly illegal content.</li> <li>3. The suspensions were levied for a reasonable period of time.</li> </ol> <p><b>The following are certain operational benchmark(s) defined by the audited service:</b></p> <p>"Reasonable period": This is defined in the applicable standard operating procedures.</p> <p>"Frequently": With the regularity detailed in the applicable standard operating procedures.</p> <p>"Manifestly illegal content": Manifestly illegal content is defined as such content "where it is evident to a layperson, without any substantive analysis, that the content is illegal".</p>	<p><b>Materiality threshold:</b></p> <p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
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**Audit procedures, results and information relied upon:**

In order to evaluate the audited provider’s compliance with this Specified Requirement, EY primarily evaluated the design and operation of control(s), as outlined below.

1. Inquired with management and conducted a walkthrough to gain an understanding of the mechanism in place to suspend the provision of services to recipients who have frequently provided manifestly illegal content after having issued a prior warning.
2. Reviewed that the design of the policies and processes in place was appropriate to comply with the Specified Requirement.
3. Inspected the audited service ‘s internal misuse prevention policy and determined that it defined the violation thresholds and a process for suspending the provision of their services to recipients that frequently provide manifestly illegal content.
4. Selected [CONFIDENTIAL] who was suspended and determined that the suspension was in line with the audited service’s policy.
5. Inspected relevant IT controls, including controls related to change management, logical access and IT operations for the relevant systems in the production environment and determined that the controls were in place throughout the Examination Period to address key IT risks.
6. We confirmed, after the Examination Period, that there were no significant changes in the design or operation of the systems and processes in the period between testing and the end of the Examination Period.

**Changes to the audit procedures during the audit:**

None

**Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:**

There were no material deviations identified in the performance of the above procedures, unless denoted below. The results of the audit procedures were deemed sufficient to obtain reasonable assurance.

**Positive** - In our opinion, the audited service complied with this Specified Requirement during the Examination Period in all material respects.

<p><b>Recommendations on specific measures:</b> Not applicable.</p>	<p><b>Recommended timeframe to implement specific measures:</b> Not applicable.</p>
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<p><b>Obligation:</b> 23.2</p>	<p><b>Audit criteria:</b></p> <p>Throughout the period, in all material respects:</p> <ol style="list-style-type: none"><li>1. The provider issued a warning to individuals, entities, or complainants who frequently submitted notices or complaints that were manifestly unfounded.</li><li>2. After having issued a prior warning, the provider suspended, for a reasonable period of time, the processing of notices and complaints submitted by individuals, entities, or complainants who frequently submit notices or complaints that are manifestly unfounded.</li></ol> <p><b>The following are certain operational benchmark(s) defined by the audited service:</b></p> <p>"Reasonable period": This is defined in the applicable standard operating procedures.</p> <p>"Frequently": With the regularity detailed in the applicable standard operating procedures.</p> <p>"Manifestly unfounded notices or complaints": Notices or complaints are obviously unfounded where it is evident to a layperson, without any substantive analysis, that the notices or complaints are unfounded.</p>	<p><b>Materiality threshold:</b></p> <p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
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**Audit procedures, results and information relied upon:**

In order to evaluate the audited provider's compliance with this Specified Requirement, EY primarily evaluated the design and operation of control(s), as outlined below.

1. Inquired with management and conducted a walkthrough to gain an understanding of the policies and procedures related to the manual process and the systemic restriction of suspending of processing of notices or complaints by recipients of the service, after issuing a prior warning, that frequently provide manifestly unfounded notices or complaints.
2. Reviewed that the design of the policies and processes in place was appropriate to comply with the Specified Requirement.
3. Inspected the audited service 's internal misuse prevention policy and determined that it defined the violation thresholds and a process for suspending the provision of their services to recipients that frequently submit manifestly unfounded notices or complaints.
4. Selected [CONFIDENTIAL] who was suspended and determined that the suspension was in line with the audited service's policy.
5. Inspected relevant IT controls, including controls related to change management, logical access and IT operations for the relevant systems in the production environment and determined that the controls were in place throughout the Examination Period to address key IT risks.
6. We confirmed, after the Examination Period, that there were no significant changes in the design or operation of the systems and processes in the period between testing and the end of the Examination Period.

**Changes to the audit procedures during the audit:**

None.

**Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:**

There were no material deviations identified in the performance of the above procedures, unless denoted below. The results of the audit procedures were deemed sufficient to obtain reasonable assurance.

**Positive** - In our opinion, the audited service complied with this Specified Requirement during the Examination Period, in all material respects.

**Recommendations on specific measures:**

Not applicable.

**Recommended timeframe to implement specific measures:**

Not applicable.

<p><b>Obligation:</b> 23.3</p>	<p><b>Audit criteria:</b></p> <p>Throughout the period, in all material respects:</p> <ol style="list-style-type: none"> <li>1. The provider's decision to issue a suspension was determined as follows: <ul style="list-style-type: none"> <li>▶ On a case-by-case basis,</li> <li>▶ Timely,</li> <li>▶ Diligently</li> <li>▶ Objectively.</li> </ul> </li> <li>2. The provider's decision to issue a suspension considered whether the recipient of the service, individual, entity or complainant engaged in the misuse referred to in 23.1 and 23.2.</li> <li>3. The provider's decision to issue a suspension considered all relevant facts and circumstances available, including: <ul style="list-style-type: none"> <li>▶ The absolute numbers of items of manifestly illegal content or manifestly unfounded notices or complaints, submitted within a given time frame</li> <li>▶ The relative proportion thereof in relation to the total number of items of information provided or notices submitted within a given time frame</li> <li>▶ The gravity of the misuses, including the nature of illegal content, and of its consequences</li> <li>▶ The intention of the recipient of the service, the individual, the entity or the complainant.</li> </ul> </li> </ol> <p><b>The following are certain operational benchmark(s) defined by the audited service:</b></p> <p>"Timely": Decisions on suspension as a result of misuse should be made within [CONFIDENTIAL]</p> <p>"Diligent and objective": When deciding on suspensions, we assess each case individually and take into account at least the factors specified under Article 23(3) of the DSA</p> <p>"Manifestly unfounded notices or complaints": Notices or complaints are obviously unfounded where it is evident to a layperson, without any substantive analysis, that the notices or complaints are unfounded.</p>	<p><b>Materiality threshold:</b></p> <p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
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**Audit procedures, results and information relied upon:**

In order to evaluate the audited provider's compliance with this Specified Requirement, EY primarily evaluated the design and operation of control(s), as outlined below.

1. Inquired with management and conducted a walkthrough to gain an understanding of the policies and procedures related to how the audited service decides to issue a suspension based on a determination that the recipient of the service engaged in misuse referred to in Article 23.1 (manifestly illegal content) and Article 23.2 (frequently submitted notices or complaints that are manifestly unfounded).
2. Reviewed that the design of the policies and processes in place was appropriate to comply with the Specified Requirement.
3. Inspected the audited service's internal misuse prevention policy, and determined that it defined criteria used for the suspension decisions in the internal review procedure and that criteria includes at least the following:
  - (a) the absolute numbers of items of manifestly illegal content or manifestly unfounded notices or complaints, submitted within a given time frame;
  - (b) the relative proportion thereof in relation to the total number of items of information provided or notices submitted within a given time frame;
  - (c) the gravity of the misuses, including the nature of illegal content, and of its consequences;
  - (d) where it is possible to identify it, the intention of the recipient of the service, the individual, the entity or the complainant.
4. Inspected [CONFIDENTIAL] and determined that the decision to issue a suspension was made on a case-by-case basis and in a timely, diligent and objective manner.
5. Inspected relevant IT controls, including controls related to change management, logical access and IT operation for the relevant systems in the production environment and determined that the controls were in place throughout the Examination Period to address key IT risks.
6. We confirmed, after the Examination Period, that there were no significant changes in the design or operation of the systems and processes in the period between testing and the end of the Examination Period.

**Changes to the audit procedures during the audit:**

None.

**Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:**

There were no material deviations identified in the performance of the above procedures, unless denoted below. The results of the audit procedures were deemed sufficient to obtain reasonable assurance.

**Positive** - In our opinion, the audited service complied with this Specified Requirement during the Examination Period, in all material respects.

**Recommendations on specific measures:**

Not applicable.

**Recommended timeframe to implement specific measures:**

Not applicable.

<p><b>Obligation:</b> 23.4</p>	<p><b>Audit criteria:</b></p> <p>The provider's T&amp;Cs include its policy regarding the misuse referred to in 23.1 and 23.2. The policy is set out in a clear and detailed manner, and includes examples of the facts and circumstances taken into account when assessing whether certain behavior constitutes misuse, and the duration of the suspension.</p> <p><b>The following are certain operational benchmark(s) defined by the audited service:</b></p> <p>“Terms and Conditions relevant for this obligation”: Terms of Use applicable to users of Temu EU sites and the Seller EU Services Agreement applicable to EU sellers.</p>	<p><b>Materiality threshold:</b></p> <p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
<p><b>Audit procedures, results and information relied upon:</b></p> <p>In order to evaluate the audited provider’s compliance with this Specified Requirement, EY performed substantive procedures, although controls existed, as outlined below.</p> <ol style="list-style-type: none"> <li>1. Inquired with management and conducted a walkthrough to gain an understanding of the policy documentation in place concerning the misuse referred to in Article 23.1 and 23.2.</li> <li>2. Reviewed that the design of the policies and processes in place was appropriate to comply with the Specified Requirement.</li> <li>3. Inspected the Terms of Use and Temu Seller EU Services Agreement, and determined that the audited service did not set out examples of the facts and circumstances that they take into account when assessing whether certain behavior constitutes misuse and the duration of the suspension in a clear and detailed manner in the Seller EU Services Agreement.</li> <li>4. We confirmed, after the Examination Period, that there were no significant changes in the design or operation of the systems and processes in the period between testing and the end of the Examination Period.</li> </ol> <p><b>Changes to the audit procedures during the audit:</b></p> <p>None.</p> <p><b>Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:</b></p> <p>The results of the audit procedures were deemed sufficient to obtain reasonable level of assurance.</p> <p><b>Negative -</b> In our opinion, except for the effects of the material noncompliance described in the following paragraph, the audited service complied with this Specified Requirement during the Examination Period, in all material respects.</p> <p>The audited service did not set out examples of the facts and circumstances that they take into account when assessing whether certain behavior constitutes misuse and the duration of the suspension in a clear and detailed manner in the Seller EU Services Agreement.</p>		

<p><b>Recommendations on specific measures:</b></p> <p>We recommend that the audited service provide examples of the facts and circumstances considered when assessing whether certain behavior of trader constitutes misuse as well as the corresponding duration of any suspension resulting from such misuse in a clear and detailed manner in the Temu Seller EU Services Agreement.</p>	<p><b>Recommended timeframe to implement specific measures:</b> 1 October 2025 - 31 December 2025</p>
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<p><b>Obligation:</b> 24.1</p>	<p><b>Audit criteria:</b></p> <p>Throughout the period, in all material respects: The providers published transparency reports included the following information:</p> <ul style="list-style-type: none"> <li>▶ The number of disputes submitted to the out-of-court dispute settlement bodies referred to in Article 21</li> <li>▶ The outcomes of the dispute settlement</li> <li>▶ The median time needed for completing the dispute settlement procedures</li> <li>▶ The share of disputes where the provider of the online platform implemented the decisions of the body</li> <li>▶ The number of suspensions imposed pursuant to Article 23</li> <li>▶ The number of suspensions imposed pursuant to Article 23 that distinguished between suspensions enacted for the provision of manifestly illegal content, the submission of manifestly unfounded notices, and the submission of manifestly unfounded complaints.</li> </ul>	<p><b>Materiality threshold:</b></p> <p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
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**Audit procedures, results and information relied upon:**

In order to evaluate the audited provider’s compliance with this Specified Requirement, EY evaluated the design and operation of control(s) and performed substantive procedures, as outlined below.

1. Inquired with management and conducted a walkthrough to gain an understanding of how the transparency report is drafted, obtains the necessary approvals, and converts the narratives and metrics into a format suitable for publication.
2. Reviewed that the design of the policies and processes in place was appropriate to comply with the Specified Requirement.
3. Inspected the DSA webpage to determine that the audited service’s DSA Transparency Reports were available and accessible. EY inspected the transparency reports and determined that:
  - a) Two reports were published: in November 2024 and in February 2025.
  - b) They were in a machine-readable format.
  - c) They were easily accessible.
  - d) They were clear and easily comprehensible.
4. Inspected the November 2024 and February 2025 DSA Transparency Reports and determined that they contained information required by the DSA, specifically:
  - a) Inspected the November 2024 and February 2025 DSA Transparency Report, to determine that no disputes settled out of court were reported for the period.
  - b) Inspected the November 2024 and February 2025 DSA Transparency Report to determine that the number of suspensions were included in the reports, and the number of suspensions are categorized by:
    - i. The provision of manifestly illegal content
    - ii. The submission of manifestly unfounded notices
    - iii. The submission of manifestly unfounded complaints
5. Inspected the transparency reports approvals and evidence reconciling report data to source data.
6. Reviewed a random selection, for the November 2024 and February 2025 DSA Transparency Reports, and re-performed the validation steps; we identified that the metrics as included in the transparency report were complete and accurate.
7. Inspected relevant IT controls, including controls related to change management, logical access and IT operation for the relevant systems in the production environment and determined that the controls were in place throughout the Examination Period to address key IT risks.

**Changes to the audit procedures during the audit:**

None.

**Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:**

There were no material deviations identified in the performance of the above procedures, unless denoted below. The results of the audit procedures were deemed sufficient to obtain reasonable level of assurance.

**Positive** - In our opinion, the audited service complied with this Specified Requirement during the Examination Period in all material respects.

<p><b>Recommendations on specific measures:</b></p> <p>Not applicable.</p>	<p><b>Recommended timeframe to implement specific measures:</b></p> <p>Not applicable.</p>
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<p><b>Obligation:</b> 24.2</p>	<p><b>Audit criteria:</b></p> <p>Throughout the period, in all material respects:</p> <ol style="list-style-type: none"> <li>1. The provider published information on the average monthly active recipients of the service in the Union</li> <li>2. The information referenced in part (1) above was published in a publicly available section of its online interface.</li> <li>3. The information referenced in part (1) above was published by 17 February 2023 and at least once every 6 months thereafter.</li> <li>4. The average monthly active recipients was calculated as an average over the period of the prior 6 months and in accordance with the methodology laid out in the delegated acts referred to in 33.3.</li> </ol>	<p><b>Materiality threshold:</b></p> <p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
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**Audit procedures, results and information relied upon:**

In order to evaluate the audited provider’s compliance with this Specified Requirement, EY evaluated the design and operation of control(s) and performed substantive procedures, as outlined below.

1. Inquired with management and conducted a walkthrough to gain an understanding of how the transparency report is drafted, obtains the necessary approvals, and converts the narratives and metrics into a format suitable for publication.
2. Reviewed that the design of the policies and processes in place was appropriate to comply with the Specified Requirement.
3. Inspected the November 2024 and February 2025 DSA Transparency Report to determine that the existence of publicly available information on Temu's average monthly active recipients of the service in the Union was reported.
4. Inspected Temu DSA webpage to determine that the existence of publicly available information on Temu's average monthly active recipients of the service in the Union was reported.
5. Inspected methodology used for calculating the average monthly active recipients of the service in the Union and inspected evidence reconciling the November 2024 and February 2025 DSA Transparency Report data to source data.
6. Inspected the related emails for approvals and confirmed that all of the metrics published in the November 2024 and February 2025 DSA Transparency Report have been validated by stakeholders, including a verification of the SQL code used to extract in-scope data from the correct data sources. Validated that all approving stakeholders were appropriate based on their job functions/titles.
7. Inspected user access to modify the SQL code to pull monthly active recipient data for each in-scope product area and confirmed the employees that have access are appropriate based on their job title/function.
8. Inspected relevant IT controls, including controls related to change management, logical access and IT operations for the relevant systems in the production environment and determined that the controls were in place throughout the Examination Period to address key IT risks.
9. We confirmed, after the Examination Period, that there were no significant changes in the design or operation of the systems and processes in the period between testing and the end of the Examination Period.

**Changes to the audit procedures during the audit:**

Based on our updated understanding of the process subsequent to planning, changed audit procedures to test the Specified Requirements substantively instead of partially testing and relying on controls.

**Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:**

There were no material deviations identified in the performance of the above procedures, unless denoted below. The results of the audit procedures were deemed sufficient to obtain reasonable level of assurance.

**Positive** - In our opinion, the audited service complied with this Specified Requirement during the Examination Period in all material respects.

<p><b>Recommendations on specific measures:</b> Not applicable.</p>	<p><b>Recommended timeframe to implement specific measures:</b> Not applicable.</p>
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<p><b>Obligation:</b> 24.3</p>	<p><b>Audit criteria:</b></p> <p>Throughout the period, in all material respects:</p> <ol style="list-style-type: none"> <li>1. The provider communicated the information on the average monthly active recipients of the service in the Union referred to in 24.2 to the Digital Services Coordinator and/or the Commission: <ul style="list-style-type: none"> <li>▶ Upon their request</li> <li>▶ Without undue delay.</li> </ul> </li> <li>2. The provider provided the following additional information requested by the Digital Services Coordinator and/or the Commission: <ul style="list-style-type: none"> <li>▶ Calculation of the average monthly active recipients of the service in the Union</li> <li>▶ Explanations and substantiations in respect of the data used.</li> </ul> </li> <li>3. The information provided to the Digital Services Coordinator and/or the Commission did not contain personal data.</li> </ol> <p><b>The following are certain operational benchmark(s) defined by the audited service:</b></p> <p>“Without undue delay”: Following the required timelines of the request from the Digital Services Coordinator or the Commission.</p>	<p><b>Materiality threshold:</b></p> <p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
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**Audit procedures, results and information relied upon:**

In order to evaluate the audited provider’s compliance with this Specified Requirement, EY evaluated the design and operation of control(s) and performed substantive procedures, as outlined below.

1. Inquired with management and conducted a walkthrough to gain an understanding of the process for monitoring and recording all requests for information from the Digital Services Coordinator and/or the Commission. Determined that there have been no cases of requests for additional information from the Digital Services Coordinator and/or the Commission.
2. Reviewed that the design of the policies and processes in place was appropriate to comply with the Specified Requirement.
3. Inspected screenshots of the mailbox monitoring log pursuant to Article 11 and confirmed no request were submitted by the DSC and/or Commission related to providing the calculation of the average monthly active recipients of the service in the Union and explanations with substantiations in respect of the data used.
4. Inspected the Average Monthly Active Recipients (AMAR) data files and determined that the AMAR information does not include personal data.
5. We confirmed, after the Examination Period, that there were no significant changes in the design or operation of the systems and processes in the period between testing and the end of the Examination Period.

**Changes to the audit procedures during the audit:**

Based on our updated understanding of the process subsequent to planning, changed audit procedures to test the Specified Requirements substantively instead of partially testing and relying on controls.

**Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:**

There were no material deviations identified in the performance of the above procedures, unless denoted below. The results of the audit procedures were deemed sufficient to obtain reasonable level of assurance.

**Positive** - In our opinion, the audited service complied with this Specified Requirement during the Examination Period in all material respects.

**Recommendations on specific measures:**

Not applicable.

**Recommended timeframe to implement specific measures:**

Not applicable.



<p><b>Obligation:</b> 24.5</p>	<p><b>Audit criteria:</b></p> <p>Throughout the period, in all material respects:</p> <ol style="list-style-type: none"><li>1. The provider attempted submission of the decisions and the statements of reasons referred to in Article 17.1 to the Commission</li><li>2. The provider's attempted submissions referenced in part (1):</li></ol> <ul style="list-style-type: none"><li>▶ Were attempted without undue delay</li><li>▶ Were attempted in a machine-readable format,</li><li>▶ Do not contain personal data.</li></ul> <p><b>The following are certain operational benchmark(s) defined by the audited service:</b></p> <p>"Without undue delay": Decisions and the statements of reasons (SOR) are routinely submitted to the Commission's database within [CONFIDENTIAL] unless there is a basis for delay in special circumstances.</p>	<p><b>Materiality threshold:</b></p> <p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
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**Audit procedures, results and information relied upon:**

In order to evaluate the audited provider’s compliance with this Specified Requirement, EY primarily evaluated the design and operation of control(s), as outlined below.

1. Inquired with management and conducted a walkthrough to gain an understanding of the process for submitting statements of reasons (SORs) to the Commission.
2. Reviewed that the design of the policies and processes in place was appropriate to comply with the Specified Requirement.
3. Inspected the configuration of the audited service’s scheduled job of uploading the required information to the publicly accessible database.
4. Selected a sample of statements of reasons, in accordance with the sampling approach described in Appendix 2 and determined that the submission was attempted without undue delay in a machine-readable format and did not contain personal data.
5. Inspected the uploading records of SORs throughout the Examination Period and determined that all failed SOR uploads have been resubmitted.
6. Inspected relevant IT controls, including controls related to change management, logical access and IT operations for the relevant systems in the production environment and determined that the controls were in place throughout the Examination Period to address key IT risks.
7. We confirmed, after the Examination Period, that there were no significant changes in the design or operation of the systems and processes in the period between testing and the end of the Examination Period.

**Changes to the audit procedures during the audit:**

None.

**Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:**

There were no material deviations identified in the performance of the above procedures, unless denoted below. The results of the audit procedures were deemed sufficient to obtain reasonable level of assurance.

**Positive** - In our opinion, the audited service complied with this Specified Requirement during the Examination Period in all material respects.

**Recommendations on specific measures:**

Not applicable.

**Recommended timeframe to implement specific measures:**

Not applicable.

<p><b>Obligation:</b> 25.1</p>	<p><b>Audit criteria:</b></p> <p>Throughout the period, in all material respects: The provider did not design, organize, or operate its online interface in a manner which:</p> <ul style="list-style-type: none"> <li>▶ Deceived or manipulate the users</li> <li>▶ Distorted or impaired the ability of users to make free and informed decisions.</li> </ul> <p><b>The following are certain operational benchmark(s) defined by the audited service:</b></p> <p>“Deceives or manipulates”: a practice which materially distorts or impairs the ability of the recipients of their service to make free and informed decisions.</p>	<p><b>Materiality threshold:</b></p> <p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
<p><b>Audit procedures, results and information relied upon:</b></p> <p>In order to evaluate the audited provider’s compliance with this Specified Requirement, EY primarily evaluated the design and operation of control(s), as outlined below.</p> <ol style="list-style-type: none"> <li>1. Inquired with management and conducted a walkthrough to gain an understanding of the process used to ensure that the platform did not design, organize, or operate its online interface in a manner which materially deceived or manipulated the recipients of the service, or materially distorted or impaired the ability of the recipients of the service to make free and informed decisions, referred to as “dark patterns”.</li> <li>2. Reviewed that the design of the policies and processes in place was appropriate to comply with the Specified Requirement.</li> <li>3. Inspected documentation outlining how the review of the interface change proposal is submitted in the event of modifications or updates to the online interface features.</li> <li>4. Selected a sample of changes to the existing features, in accordance with the sampling approach described in Appendix 2, and determined that were properly assessed for deceptive design practices or manipulative interfaces. For cases where dark pattern elements are identified, a rectification request was issued to require modifications or adjustments to the proposals.</li> <li>5. We confirmed, after the Examination Period, that there were no significant changes in the design or operation of the systems and processes in the period between testing and the end of the Examination Period.</li> </ol> <p><b>Changes to the audit procedures during the audit:</b> None.</p> <p><b>Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:</b> There were no material deviations identified in the performance of the above procedures, unless denoted below. The results of the audit procedures were deemed sufficient to obtain reasonable level of assurance.</p> <p><b>Positive</b> - In our opinion, the audited service complied with this Specified Requirement during the Examination Period in all material respects.</p>		
<p><b>Recommendations on specific measures:</b></p> <p>Not applicable.</p>	<p><b>Recommended timeframe to implement specific measures:</b></p> <p>Not applicable.</p>	

<p><b>Obligation:</b> 27.1</p>	<p><b>Audit criteria:</b></p> <p>Throughout the period, in all material respects:</p> <ol style="list-style-type: none"> <li>1. The provider's T&amp;Cs, included:             <ol style="list-style-type: none"> <li>i. The main parameters used in their recommender systems</li> <li>ii. Options to modify or influence those main parameters.</li> </ol> </li> <li>2. The T&amp;Cs related to the main parameters and options to modify, as referenced in part (1), were written in plain and intelligible language.</li> </ol> <p><b>The following are certain operational benchmark(s) defined by the audited service:</b></p> <p>“Plain and intelligible language”: Straightforward and capable of being easily understood or comprehended.</p> <p>“Relevant sections of the Terms and Conditions”: Disclosure of recommender system on the DSA Help Page, as referenced in Section 3.6 of the Terms of Use applicable to users of Temu EU sites.</p> <p>“Main parameter”: main parameters are the criteria which are most significant in determining the information suggested to the user.</p>	<p><b>Materiality threshold:</b></p> <p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
<p><b>Conclusion:</b></p> <p><b>Disclaimer</b> - Because of the limitation on the scope of our examination discussed in the following paragraph, the scope of our work was not sufficient to enable us to express, and we do not express, an opinion on whether the audited service complied with this DSA Specified Requirement during the DSA Examination Period.</p> <p><b>Explanation of the circumstances and the reasons why this obligation could not be audited:</b></p> <ol style="list-style-type: none"> <li>1. The European Commission has opened formal proceedings against Temu as of 31 October 2024, to assess potential non-compliance with Article 27.1 of the Digital Services Act. These proceedings by the European Commission indicate that measures put in place by Temu may not be compliant with the Specified Requirements of Article 27.1.</li> <li>2. We have not been able to obtain all relevant information associated with the proceedings, including the reasons for and/or benchmarks /criteria underlying the formal proceedings.</li> <li>3. This results in the circumstance beyond the control of the audited provider, that we cannot obtain all documentation and understanding considered necessary to identify all risks which could impact Temu’s ability to comply with the Specified Requirements, in all material respects, and to adequately design the nature, timing and extent and performance of our procedures to assess compliance with Article 27.1.</li> </ol>		

<p><b>Obligation:</b> 27.2</p>	<p><b>Audit criteria:</b></p> <p>Throughout the period, in all material respects:</p> <p>The provider's T&amp;Cs for the main parameters referenced in article 27.1, included:</p> <p>i. The criteria which are 'most significant' in determining the information suggested to the recipient of the service</p> <p>ii. Reasons for the relative importance of those parameters.</p> <p><b>The following are certain operational benchmark(s) defined by the audited service:</b></p> <p>"Main parameter": main parameters are the criteria which are most significant in determining the information suggested to the user.</p>	<p><b>Materiality threshold:</b></p> <p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
<p><b>Conclusion:</b></p> <p><b>Disclaimer</b> - Because of the limitation on the scope of our examination discussed in the following paragraph, the scope of our work was not sufficient to enable us to express, and we do not express, an opinion on whether the audited service complied with this DSA Specified Requirement during the DSA Examination Period.</p> <p><b>Explanation of the circumstances and the reasons why this obligation could not be audited:</b></p> <ol style="list-style-type: none"> <li>1. The European Commission has opened formal proceedings against Temu as of 31 October 2024, to assess potential non-compliance with Article 27.2 of the Digital Services Act. These proceedings by the European Commission indicate that measures put in place by Temu may not be compliant with the Specified Requirements of Article 27.2.</li> <li>2. We have not been able to obtain all relevant information associated with the proceedings, including the reasons for and/or benchmarks /criteria underlying the formal proceedings.</li> <li>3. This results in the circumstance beyond the control of the audited provider, that we cannot obtain all documentation and understanding considered necessary to identify all risks which could impact Temu's ability to comply with the Specified Requirements, in all material respects, and to adequately design the nature, timing and extent and performance of our procedures to assess compliance with Article 27.2.</li> </ol>		

<p><b>Obligation:</b></p> <p>27.3</p>	<p><b>Audit criteria:</b></p> <p>Throughout the period, in all material respects:</p> <ol style="list-style-type: none"> <li>1. If the provider's recommender system offers recipients of the service several options to modify main parameters referenced in Article 27.1, then the provider makes available a functionality that allows the recipient to select and modify their preferred options at any time.</li> <li>2. The functionality was directly and easily accessible from the specific section of the online platform's online interface where the information is prioritized.</li> </ol> <p><b>The following are certain operational benchmark(s) defined by the audited service:</b></p> <p>"Main parameter": main parameters are the criteria which are most significant in determining the information suggested to the user.</p>	<p><b>Materiality threshold:</b></p> <p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
<p><b>Conclusion:</b></p> <p><b>Disclaimer</b> - Because of the limitation on the scope of our examination discussed in the following paragraph, the scope of our work was not sufficient to enable us to express, and we do not express, an opinion on whether the audited service complied with this DSA Specified Requirement during the DSA Examination Period.</p> <p><b>Explanation of the circumstances and the reasons why this obligation could not be audited:</b></p> <ol style="list-style-type: none"> <li>1. The European Commission has opened formal proceedings against Temu as of 31 October 2024, to assess potential non-compliance with Article 27.3 of the Digital Services Act. These proceedings by the European Commission indicate that measures put in place by Temu may not be compliant with the Specified Requirements of Article 27.3.</li> <li>2. We have not been able to obtain all relevant information associated with the proceedings, including the reasons for and/or benchmarks /criteria underlying the formal proceedings.</li> <li>3. This results in the circumstance beyond the control of the audited provider, that we cannot obtain all documentation and understanding considered necessary to identify all risks which could impact Temu's ability to comply with the Specified Requirements, in all material respects, and to adequately design the nature, timing and extent and performance of our procedures to assess compliance with Article 27.3.</li> </ol>		

**Section 4 – Additional provisions applicable to providers of online platforms allowing consumers to conclude distance contracts with traders**

<p><b>Obligation:</b> 30.1</p>	<p><b>Audit criteria:</b></p> <p>Throughout the period, in all material respects: The provider obtained the following information from all traders prior to allowing traders to offer their products or services on the provider's online platforms:</p> <ul style="list-style-type: none"> <li>▶ Trader's name</li> <li>▶ Trader's address</li> <li>▶ Trader's telephone number</li> <li>▶ Trader's email address</li> <li>▶ Copy of trader's ID documentation (or any other electronic ID as defined in Article 3 of Regulation (EU) No 910/2014)</li> <li>▶ Trader's payment account details</li> <li>▶ Where the trader is registered in a trade register or similar public register, the trade register where the trader is registered, and the registration number or equivalent means of identification in that register</li> <li>▶ Self-certification by the trader committing to only offer products/services that comply with the applicable rules of Union Law.</li> </ul>	<p><b>Materiality threshold:</b></p> <p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
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**Audit procedures, results and information relied upon:**

In order to evaluate the audited provider's compliance with this Specified Requirement, EY primarily evaluated the design and operation of control(s), as outlined below.

1. Inquired with management and conducted a walkthrough to gain an understanding of the process for traders to self-identify and provide the required identity information to the audited service.
2. Reviewed that the design of the policies and processes in place was appropriate to comply with the Specified Requirement.
3. Inspected Temu's Seller Center UI in requirement of filling in all the information during traders' onboarding process.
4. Selected a sample of traders, in accordance with the sampling approach described in Appendix 2, and inspected that the audited service obtained the following information from traders:
  - a. the name, address, telephone number and email address of the trader;
  - b. a copy of the identification document of the trader or any other electronic identification as defined by Article 3 of Regulation (EU) No 910/2014 of the European Parliament and of the Council;
  - c. the payment account details of the trader;
  - d. where the trader is registered in a trade register or similar public register, the trade register in which the trader is registered and its registration number or equivalent means of identification in that register;
  - e. a self-certification by the trader committing to only offer products or services that comply with the applicable rules of Union law.
5. Inspected relevant IT controls, including controls related to change management, logical access and IT operations for the relevant systems in the production environment and determined that the controls were in place throughout the Examination Period to address key IT risks.
6. We confirmed, after the Examination Period, that there were no significant changes in the design or operation of the systems and processes in the period between testing and the end of the Examination Period.

**Changes to the audit procedures during the audit:**

None

**Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:**

There were no material deviations identified in the performance of the above procedures, unless denoted below. The results of the audit procedures were deemed sufficient to obtain reasonable assurance.

**Positive** - In our opinion, the audited service complied with this Specified Requirement during the Examination Period in all material respects.

**Recommendations on specific measures:**

Not applicable.

**Recommended timeframe to implement specific measures:**

Not applicable.

<p><b>Obligation:</b> 30.2</p>	<p><b>Audit criteria:</b></p> <p>Throughout the period, in all material respects:</p> <ol style="list-style-type: none"> <li>1. Upon receiving the information from the trader referred to in 30.1, the provider assessed whether the information gathered in accordance with 30.1 was reliable and complete.</li> <li>2. The provider performed the assessment referenced in part (1) above, prior to allowing the trader to use its platform.</li> <li>3. For all traders already offering products or services on the provider's platform on or before 17 February 2024, the provider made best efforts to obtain the information described in 30.1 from these traders within 12 months.</li> <li>4. For instances in which the traders failed to provide the information within 12 months, the provider suspended the provision of its services to traders until such time that all of the required information specified in 30.1 was provided</li> </ol> <p><b>The following are certain operational benchmark(s) defined by the audited service:</b></p> <p>"Best efforts": Undertaking manual and/or automated verification of documents or information provided by sellers to assess their reliability and completeness.</p>	<p><b>Materiality threshold:</b></p> <p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
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<p><b>Audit procedures, results and information relied upon:</b></p> <p>In order to evaluate the audited provider's compliance with this Specified Requirement, EY primarily evaluated the design and operation of control(s), as outlined below.</p> <ol style="list-style-type: none"> <li>1. Inquired with management and conducted a walkthrough to gain an understanding of the process for reviewing the identity information provided by traders and to obtain the information described in 30.1 from traders already offering products or services on the platform on or before 17 February 2024, within 12 months.</li> <li>2. Reviewed that the design of the policies and processes in place was appropriate to comply with the Specified Requirement.</li> <li>3. Selected a sample of traders, in accordance with the sampling approach described in Appendix 2, to determine automated screening on trader's submitted information is required for verification of reliability and completeness. Inspected evidence of the review procedures to assess that the information provided in 30.1 was reliable and complete.</li> <li>4. Selected a sample of statements of traders, in accordance with the sampling approach described in Appendix 2, to determine if an inconclusive result of automated screening would be further pushed to manual review stage.</li> <li>5. Inspected relevant IT controls, including controls related to change management, logical access and IT operations for the relevant systems in the production environment and determined that the controls were in place throughout the Examination Period to address key IT risks.</li> <li>6. We confirmed, after the Examination Period, that there were no significant changes in the design or operation of the systems and processes in the period between testing and the end of the Examination Period.</li> </ol>
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**Changes to the audit procedures during the audit:**

None.

**Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:**

There were no material deviations identified in the performance of the above procedures, unless denoted below. The results of the audit procedures were deemed sufficient to obtain reasonable assurance.

**Positive** - In our opinion, the audited service complied with this Specified Requirement during the Examination Period in all material respects.

**Recommendations on specific measures:**

Not applicable.

**Recommended timeframe to implement specific measures:**

Not applicable.

<p><b>Obligation:</b> 30.3</p>	<p><b>Audit criteria:</b></p> <p>Throughout the period, in all material respects:</p> <ol style="list-style-type: none"> <li>1. For instances in which the provider obtained sufficient indications or reason to conclude that the information required to be obtained from traders referenced in Article 30.1, is inaccurate, incomplete, or not up to date, the provider requested the concerned traders to correct, update or provide missing information without delay or within the period of time set out by the Union and national law, if applicable.</li> <li>2. The provider swiftly suspended traders from offering its products or services to consumers located in the EU for traders that did not provide or correct the requested information.</li> </ol>	<p><b>Materiality threshold:</b></p> <p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
<p><b>Audit procedures, results and information relied upon:</b></p> <p>In order to evaluate the audited provider’s compliance with this Specified Requirement, EY primarily evaluated the design and operation of control(s), as outlined below.</p> <ol style="list-style-type: none"> <li>1. Inquired with management and conducted a walkthrough to gain an understanding of the process for identifying and reviewing that the information provided by traders referenced in Article 30.1 is accurate, complete and up to date; the process for the audited service to request that a trader remedy the inaccurate, incomplete or out of date information; and the process for the suspension of traders from offering their products or services to consumers located in the EU when traders did not provide or correct the requested information.</li> <li>2. Reviewed that the design of the policies and processes in place was appropriate to comply with the Specified Requirement.</li> <li>3. Selected a sample of statements of instances in which the audited service concluded that the information required to be obtained from traders referenced in Article 30.1 was inaccurate, incomplete or not up to date, in accordance with the sampling approach described in Appendix 2, and inspected that the audited service requested the concerned traders to correct, update or provide missing information.</li> <li>4. We confirmed, after the Examination Period, that there were no significant changes in the design or operation of the systems and processes in the period between testing and the end of the Examination Period.</li> </ol> <p><b>Changes to the audit procedures during the audit:</b></p> <p>None.</p> <p><b>Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:</b></p> <p>There were no material deviations identified in the performance of the above procedures, unless denoted below. The results of the audit procedures were deemed sufficient to obtain reasonable assurance.</p> <p><b>Positive</b> - In our opinion, the audited service complied with this Specified Requirement during the Examination Period in all material respects.</p>		
<p><b>Recommendations on specific measures:</b></p> <p>Not applicable.</p>	<p><b>Recommended timeframe to implement specific measures:</b></p> <p>Not applicable.</p>	

<p><b>Obligation:</b> 30.4</p>	<p><b>Audit criteria:</b> Throughout the period, in all material respects: The provider provided suspended traders with access to the provider's platform to lodge complaints as provided in Articles 20 and 21 of the DSA.</p>	<p><b>Materiality threshold:</b> If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
<p><b>Audit procedures, results and information relied upon:</b></p> <p>In order to evaluate the audited provider's compliance with this Specified Requirement, EY evaluated the design and operation of controls and performed substantive procedures, as outlined below.</p> <ol style="list-style-type: none"> <li>1. Inquired with management and conducted a walkthrough to gain an understanding of the process for suspended traders to lodge a complaint as provided in Articles 20 and 21 of the DSA.</li> <li>2. Reviewed that the design of the policies and processes in place was appropriate to comply with the Specified Requirement.</li> <li>3. Performed independent tests, specifically, EY created a Temu account, logged into it and followed the process to lodge a complaint as provided in Article 20 of the DSA. Inspected Temu's Seller EU Services Agreement to determine that it states that users have the right to lodge a complaint as provided in Article 21 of the DSA and it provides a guide for users to find the certified out-of-court dispute settlement bodies</li> <li>4. Inspected a list of traders whose use of the service is suspended due to missing or incorrect information for the Examination Period and selected a sample in accordance with the sampling approach described in Appendix 2, in order to verify that complaints have been sent by the traders.</li> <li>5. Inspected relevant IT controls, including controls related to change management, logical access and IT operations for the relevant systems in the production environment and determined that the controls were in place throughout the Examination Period to address key IT risks.</li> <li>6. We confirmed, after the Examination Period, that there were no significant changes in the design or operation of the systems and processes in the period between testing and the end of the Examination Period.</li> </ol> <p><b>Changes to the audit procedures during the audit:</b></p> <p>Based on our updated understanding of the process subsequent to planning, changed audit procedures to test the Specified Requirements substantively instead of partially testing and relying on controls.</p> <p><b>Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:</b></p> <p>There were no material deviations identified in the performance of the above procedures, unless denoted below. The results of the audit procedures were deemed sufficient to obtain reasonable assurance.</p> <p><b>Positive</b> - In our opinion, the audited service complied with this Specified Requirement during the Examination Period in all material respects.</p>		
<p><b>Recommendations on specific measures:</b> Not applicable.</p>	<p><b>Recommended timeframe to implement specific measures:</b> Not applicable.</p>	

<p><b>Obligation:</b> 30.5</p>	<p><b>Audit criteria:</b></p> <p>Throughout the period, in all material respects: With respect to traders' information obtained pursuant to 30.1 and 30.2, the provider:</p> <ul style="list-style-type: none"> <li>▶ Stored the information in a secure manner</li> <li>▶ Stored the information for a period of 6 months after the end of the contractual relationship with the trader</li> <li>▶ Deleted the information at the end of the 6-month period.</li> </ul>	<p><b>Materiality threshold:</b></p> <p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
<p><b>Audit procedures, results and information relied upon:</b></p> <p>In order to evaluate the audited provider's compliance with this Specified Requirement, EY primarily evaluated the design and operation of control(s), as outlined below.</p> <ol style="list-style-type: none"> <li>1. Inquired with management and conducted a walkthrough to gain an understanding of the process for storing information obtained pursuant to 30.1 and 30.2, for identifying the end of the contractual relationship with the trader and for retaining and deleting the information obtained pursuant to 30.1 and 30.2.</li> <li>2. Reviewed that the design of the policies and processes in place was appropriate to comply with the Specified Requirement.</li> <li>3. Inspected the audited service data retention policy and inquired with Management throughout the Examination Period and confirmed that, in accordance with the record-keeping requirement of [CONFIDENTIAL] the audited service is obligated to retain the information about the contractual partners for [CONFIDENTIAL]</li> <li>4. We confirmed, after the Examination Period, that there were no significant changes in the design or operation of the systems and processes in the period between testing and the end of the Examination Period.</li> </ol> <p><b>Changes to the audit procedures during the audit:</b></p> <p>None.</p> <p><b>Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:</b></p> <p>There were no material deviations identified in the performance of the above procedures, unless denoted below. The results of the audit procedures were deemed sufficient to obtain reasonable assurance.</p> <p><b>Positive</b> - In our opinion, the audited service complied with this Specified Requirement during the Examination Period in all material respects.</p>		
<p><b>Recommendations on specific measures:</b></p> <p>Not applicable.</p>	<p><b>Recommended timeframe to implement specific measures:</b></p> <p>Not applicable.</p>	

<p><b>Obligation:</b> 30.6</p>	<p><b>Audit criteria:</b> Throughout the period, in all material respects: The provider did not disclose trader information to any third parties unless required by law, Member States' competent authorities, or the European Commission</p>	<p><b>Materiality threshold:</b> If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
<p><b>Audit procedures, results and information relied upon:</b></p> <p>In order to evaluate the audited provider's compliance with this Specified Requirement, EY primarily evaluated the design and operation of control(s), as outlined below.</p> <ol style="list-style-type: none"> <li>1. Inquired with management and conducted a walkthrough to gain an understanding of the process for disclosing trader information to any third parties.</li> <li>2. Reviewed that the design of the policies and processes in place was appropriate to comply with the Specified Requirement.</li> <li>3. Selected a sample of statements of requests from third parties, in accordance with the sampling approach described in Appendix 2 and inspected the requests from third parties and the audited service's decision for the requests to determine the audited service only discloses the information to third parties where so required in accordance with the applicable law.</li> <li>4. We confirmed, after the Examination Period, that there were no significant changes in the design or operation of the systems and processes in the period between testing and the end of the Examination Period.</li> </ol> <p><b>Changes to the audit procedures during the audit:</b></p> <p>None</p> <p><b>Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:</b></p> <p>There were no material deviations identified in the performance of the above procedures, unless denoted below. The results of the audit procedures were deemed sufficient to obtain reasonable assurance.</p> <p><b>Positive</b> - In our opinion, the audited service complied with this Specified Requirement during the Examination Period in all material respects.</p>		
<p><b>Recommendations on specific measures:</b> Not applicable.</p>	<p><b>Recommended timeframe to implement specific measures:</b> Not applicable.</p>	

<p><b>Obligation:</b> 30.7</p>	<p><b>Audit criteria:</b></p> <p>Throughout the period, in all material respects: For each product or service hosted on its online platform, the provider presented the information referred to in Article 30.1, points (a), (d) and (e):</p> <ul style="list-style-type: none"> <li>▶ On the online platform's interface where the product service is presented</li> <li>▶ In a clear, easily accessible and comprehensible manner.</li> </ul> <p><b>The following are certain operational benchmark(s) defined by the audited service:</b></p> <p>"Clear, easily accessible, and comprehensible manner": Within one click on the product listing page by clicking the "trader information" tag.</p>	<p><b>Materiality threshold:</b></p> <p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
<p><b>Audit procedures, results and information relied upon:</b></p> <p>In order to evaluate the audited provider's compliance with this Specified Requirement, EY primarily evaluated the design and operation of control(s), as outlined below.</p> <ol style="list-style-type: none"> <li>1. Inquired with management and conducted a walkthrough to gain an understanding of the process to appropriately present the information referred to in Article 30.1 points (a), (d) and (e) on the product page.</li> <li>2. Reviewed that the design of the policies and processes in place was appropriate to comply with the Specified Requirement.</li> <li>3. Selected a sample of traders, in accordance with the sampling approach described in Appendix 2, and inspected that the audited service presented the information referred to in Article 30.1 points (a), (d) and (e) on the product listing page in a clear, easily accessible and comprehensible manner.</li> <li>4. We confirmed, after the Examination Period, that there were no significant changes in the design or operation of the systems and processes in the period between testing and the end of the Examination Period.</li> </ol> <p><b>Changes to the audit procedures during the audit:</b></p> <p>None.</p> <p><b>Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:</b></p> <p>There were no material deviations identified in the performance of the above procedures, unless denoted below. The results of the audit procedures were deemed sufficient to obtain reasonable assurance.</p> <p><b>Positive</b> - In our opinion, the audited service complied with this Specified Requirement during the Examination Period in all material respects.</p>		
<p><b>Recommendations on specific measures:</b></p> <p>Not applicable.</p>	<p><b>Recommended timeframe to implement specific measures:</b></p> <p>Not applicable.</p>	

<p><b>Obligation:</b> 31.1</p>	<p><b>Audit criteria:</b></p> <p>Throughout the period, in all material respects:</p> <ol style="list-style-type: none"> <li>1. The provider’s online interface was designed and organized in a manner that enabled traders to comply with obligations regarding: <ul style="list-style-type: none"> <li>▶ Pre-contractual information</li> <li>▶ Compliance</li> <li>▶ Product safety information.</li> </ul> </li> <li>2. The provider’s online interface was designed to enable traders to provide information on the name, address, telephone number and email address of the economic operator, as defined in Article 3, point (13), of Regulation (EU) 2019/1020 and other Union Law.</li> </ol>	<p><b>Materiality threshold:</b></p> <p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
<p><b>Audit procedures, results and information relied upon:</b></p> <p>In order to evaluate the audited provider’s compliance with this Specified Requirement, EY evaluated the design and operation of control(s) and performed substantive procedures, as outlined below.</p> <ol style="list-style-type: none"> <li>1. Inquired with management and conducted a walkthrough to gain an understanding of the process for traders to provide information on the name, address, telephone number and email address of the economic operator through the online interface.</li> <li>2. Reviewed that the design of the policies and processes in place was appropriate to comply with the Specified Requirement.</li> <li>3. Inspected the code configuration of the system to determine that the audited service online interface enables traders to provide information on the name, address, telephone number and email address of the economic operator.</li> <li>4. Inspected relevant IT controls, including controls related to change management, logical access and IT operation for the relevant systems in the production environment and determined that the controls were in place throughout the Examination Period to address key IT risks.</li> <li>5. We confirmed, after the Examination Period, that there were no significant changes in the design or operation of the systems and processes in the period between testing and the end of the Examination Period.</li> </ol> <p><b>Changes to the audit procedures during the audit:</b></p> <p>Based on our understanding of the process subsequent to planning, changed audit procedures to test the Specified Requirements substantively instead of solely relying on controls.</p> <p><b>Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:</b></p> <p>There were no material deviations identified in the performance of the above procedures, unless denoted below. The results of the audit procedures were deemed sufficient to obtain reasonable assurance.</p> <p><b>Positive</b> - In our opinion, the audited service complied with this Specified Requirement during the Examination Period, in all material respects.</p>		
<p><b>Recommendations on specific measures:</b></p> <p>Not applicable.</p>	<p><b>Recommended timeframe to implement specific measures:</b></p> <p>Not applicable.</p>	

<p><b>Obligation:</b> 31.2</p>	<p><b>Audit criteria:</b></p> <p>Throughout the period, in all material respects: The provider's online interface was designed and organized in a manner that enabled traders to provide the following information:</p> <ul style="list-style-type: none"> <li>▶ Information necessary for clear identification of products or services promoted or offered to consumers located in the Union through the services of the providers</li> <li>▶ Any sign identifying the trader such as the trademark, symbol or logo,</li> <li>▶ Where applicable, the information concerning the labelling and marking in compliance with rules of applicable Union law on product safety and product compliance.</li> </ul>	<p><b>Materiality threshold:</b></p> <p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
<p><b>Audit procedures, results and information relied upon:</b></p> <p>In order to evaluate the audited provider's compliance with this Specified Requirement, EY evaluated the design and operation of control(s) and performed substantive procedures, as outlined below.</p> <ol style="list-style-type: none"> <li>1. Inquired with management and conducted a walkthrough to gain an understanding of the process for traders to provide the information necessary for clear identification of products or services promoted or offered to consumers located in the Union through the online interface, any sign identifying the trader such as the trademark, symbol or logo, and the information concerning the labelling and marking in compliance with rules of applicable Union laws on product safety and product compliance.</li> <li>2. Reviewed that the design of the policies and processes in place was appropriate to comply with the Specified Requirement.</li> <li>3. Inspected the code configuration of the system to determine that the audited service online interface enables traders to provide the following:             <ol style="list-style-type: none"> <li>(a) the information necessary for the clear and unambiguous identification of the products or the services promoted or offered to consumers located in the Union through the services of the providers;</li> <li>(b) any sign identifying the trader such as the trademark, symbol or logo; and,</li> <li>(c) where applicable, the information concerning the labelling and marking in compliance with rules of applicable Union law on product safety and product compliance.</li> </ol> </li> <li>4. Inspected relevant IT controls, including controls related to change management, logical access and IT operation for the relevant systems in the production environment and determined that the controls were in place throughout the Examination Period to address key IT risks.</li> <li>5. We confirmed, after the Examination Period, that there were no significant changes in the design or operation of the systems and processes in the period between testing and the end of the Examination Period.</li> </ol> <p><b>Changes to the audit procedures during the audit:</b></p> <p>Based on our understanding of the process subsequent to planning, changed audit procedures to test the Specified Requirements substantively instead of solely relying on controls.</p> <p><b>Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:</b></p> <p>There were no material deviations identified in the performance of the above procedures, unless denoted below. The results of the audit procedures were deemed sufficient to obtain reasonable assurance.</p>		

<b>Positive</b> - In our opinion, the audited service complied with this Specified Requirement during the Examination Period, in all material respects.	
<b>Recommendations on specific measures:</b> Not applicable.	<b>Recommended timeframe to implement specific measures:</b> Not applicable.

<b>Obligation:</b> 31.3	<p><b>Audit criteria:</b></p> <p>Throughout the period, in all material respects:</p> <ol style="list-style-type: none"> <li>1. For traders offering goods and services on their platform, the provider: <ul style="list-style-type: none"> <li>▶ Assessed whether the trader provided the information in 31.1 and 31.2 prior to allowing them to offer products and services in the platform.</li> </ul> </li> <li>2. After allowing a trader to offer products or services on its online platform, the provider made reasonable efforts to randomly check whether the products or services offered have been identified as illegal, using any official, freely accessible or machine-readable online database, or online interface.</li> </ol> <p><b>The following are certain operational benchmark(s) defined by the audited service:</b></p> <p>“Best efforts”: Undertaking an algorithm-based review to assess whether the information provided during the onboarding and product listing process is complete, as referred to in Article 31(1) and Article 31(2) of the DSA.</p> <p>“Reasonable efforts”: Manually check the Commission's public recall websites [CONFIDENTIAL] and spot-check the listed products against the public recall websites through automated and manual means.</p>	<b>Materiality threshold:</b>  If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.
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**Audit procedures, results and information relied upon:**

In order to evaluate the audited provider’s compliance with this Specified Requirement, EY evaluated the design and operation of control(s) and performed substantive procedures, as outlined below.

1. Inquired with management and conducted a walkthrough to gain an understanding of the process to assess whether a trader provided the information referred to in 31.1 and 31.2 and whether the products or services offered by traders have been identified as illegal.
2. Reviewed that the design of the policies and processes in place was appropriate to comply with the Specified Requirement.
3. Inspected the Temu's Seller Center UI in requirement of filling in all the information during traders' onboarding process and product listing process.
4. Inspected the code configuration of the system to determine that the audited service online interface enables traders to provide the information referred to in article 31.1 and 31.2.
5. Inspected relevant IT controls, including controls related to change management, logical access and IT operations for the relevant systems in the production environment and determined that the controls were in place throughout the Examination Period to address key IT risks.
6. We confirmed, after the Examination Period, that there were no significant changes in the design or operation of the systems and processes in the period between testing and the end of the Examination Period.

**Changes to the audit procedures during the audit:**

Based on our understanding of the process subsequent to planning, changed audit procedures to test the Specified Requirements substantively instead of solely relying on controls.

**Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:**

There were no material deviations identified in the performance of the above procedures, unless denoted below. The results of the audit procedures were deemed sufficient to obtain reasonable assurance.

**Positive** - In our opinion, the audited service complied with this Specified Requirement during the Examination Period, in all material respects.

**Recommendations on specific measures:**

Not applicable.

**Recommended timeframe to implement specific measures:**

Not applicable.

<p><b>Obligation:</b> 32.1</p>	<p><b>Audit criteria:</b></p> <p>Throughout the period, in all material respects: For instances when an illegal product or service has been purchased through the platform from a trader by a consumer located in the Union through the provider's services, and said purchases were made in the 6 months preceding the moment that the provider became aware of the illegality, the provider shall inform such consumer(s):</p> <ul style="list-style-type: none"> <li>▶ The fact that the product or service is illegal</li> <li>▶ The identity of the trader</li> <li>▶ Any relevant means of redress.</li> </ul>	<p><b>Materiality threshold:</b></p> <p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
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**Audit procedures, results and information relied upon:**

In order to evaluate the audited provider's compliance with this Specified Requirement, EY evaluated the design and operation of control(s) and performed substantive procedures, as outlined below.

1. Inquired with management and conducted a walkthrough to gain an understanding of the process for the audited service to inform consumers located in the Union, who have purchased an illegal product or service through the audited service platform and said such purchases were made in the 6 months preceding the moment that the audited service became aware of the illegality. Inquired that the audited service informs such consumers of the fact that the product or service is illegal, the identity of the trader and any relevant means of redress.
2. Reviewed that the design of the policies and processes in place was appropriate to comply with the Specified Requirement.
3. Selected a sample of instances when an illegal product or service has been purchased through the audited service platform by a consumer in the Union, in accordance with the sampling approach described in Appendix 2, and inspected that the audited service informed the consumer on the fact that the product or service is illegal, as well as the identity of the trader and any relevant means of redress.
4. Inspected the code configuration of the system and through one instance determined that [CONFIDENTIAL] send out emails and messages to impacted consumers and a delivery status prompt will indicate any unsuccessful attempts.
5. Inspected relevant IT controls, including controls related to change management, logical access and IT operations for the relevant systems in the production environment and determined that the controls were in place throughout the Examination Period to address key IT risks.
6. We confirmed, after the Examination Period, that there were no significant changes in the design or operation of the systems and processes in the period between testing and the end of the Examination Period.

**Changes to the audit procedures during the audit:**

Based on our understanding of the process subsequent to planning, changed audit procedures to test the Specified Requirements substantively instead of solely relying on controls.

**Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:**

There were no material deviations identified in the performance of the above procedures, unless denoted below. The results of the audit procedures were deemed sufficient to obtain reasonable assurance.

**Positive** - In our opinion, the audited service complied with this Specified Requirement during the Examination Period, in all material respects.

<b>Recommendations on specific measures:</b>  Not applicable.	<b>Recommended timeframe to implement specific measures:</b>  Not applicable.
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<b>Obligation:</b> 32.2	<b>Audit criteria:</b> Throughout the period, in all material respects: For instances described in 32.1, if the provider does not have the contact details of all consumers concerned, that provider shall make publicly available and easily accessible on its online interface: <ul style="list-style-type: none"> <li>▶ The information concerning the illegal product or service</li> <li>▶ The identity of the trader</li> <li>▶ Any relevant means of redress.</li> </ul>	<b>Materiality threshold:</b>  If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.
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**Audit procedures, results and information relied upon:**

In order to evaluate the audited provider's compliance with this Specified Requirement, EY primarily evaluated the design and operation of control(s), as outlined below.

1. Inquired with management and conducted a walkthrough to gain an understanding of the process in place for instances described in 32.1, if the audited service does not have the contact details for all consumers concerned, and how the audited service makes publicly available and easily accessible on the online platform the information concerning the illegal product or service, the identity of the trader and any relevant means of redress.
2. Reviewed that the design of the policies and processes in place was appropriate to comply with the Specified Requirement.
3. Selected a sample of instances when an illegal product or service has been purchased through the audited service platform by a consumer in the Union, in accordance with the sampling approach described in Appendix 2, and inspected that the audited service made publicly available and easily accessible on the online interface the information concerning the illegal product or service, the identity of the trader and any relevant means of redress when the audited service fails to inform the consumer through the contact details.
4. Inspected relevant IT controls, including controls related to change management, logical access and IT operations for the relevant systems in the production environment and determined that the controls were in place throughout the Examination Period to address key IT risks.
5. We confirmed, after the Examination Period, that there were no significant changes in the design or operation of the systems and processes in the period between testing and the end of the Examination Period.

**Changes to the audit procedures during the audit:**

None

**Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:**

There were no material deviations identified in the performance of the above procedures, unless denoted below. The results of the audit procedures were deemed sufficient to obtain reasonable assurance.

**Positive** - In our opinion, the audited service complied with this Specified Requirement during the Examination Period, in all material respects.



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<p><b>Recommendations on specific measures:</b> Not applicable.</p>	<p><b>Recommended timeframe to implement specific measures:</b> Not applicable.</p>
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**Section 5 – Additional obligations for providers of very large online platforms and of very large online search engines to manage systemic risks**

<p><b>Obligation:</b> 34.1</p>	<p><b>Audit criteria:</b></p> <p>Throughout the period, in all material respects:</p> <ol style="list-style-type: none"> <li>1. Systemic risks in the Union stemming from the design or functioning of the audited provider's service and its related systems, including algorithmic systems, or from the use made of their services, are diligently identified, analyzed and assessed.</li> <li>2. The risk assessments were carried out by the date of application referred to in Article 33.6, second subparagraph, that date being 3 October 2024.</li> <li>3. Risk assessments were carried out prior to deploying functionalities that are likely to have a critical impact on the risks identified pursuant to this Article.</li> <li>4. The risk assessment was specific to their services.</li> <li>5. The risk assessment was proportionate to the systemic risks.</li> <li>6. The risk assessment considered the probability and severity of the identified risks.</li> <li>7. The risk assessment included the systemic risks specified within Article 34.1, paragraph 2.</li> </ol> <p><b>The following are certain operational benchmark(s) defined by the audited service:</b></p> <p>"Critical impact": Material and negative impact on the systemic risks set out in Article 34, as identified, and assessed by relevant business lines.</p>	<p><b>Materiality threshold:</b></p> <p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
<p><b>Conclusion:</b></p> <p><b>Disclaimer</b> – Because of the limitation on the scope of our examination discussed in the following paragraph, the scope of our work was not sufficient to enable us to express, and we do not express, an opinion on whether the audited service complied with this DSA Specified Requirement during the DSA Examination Period.</p> <p><b>Explanation of the circumstances and the reasons why this obligation could not be audited:</b></p> <ol style="list-style-type: none"> <li>1. The European Commission has opened formal proceedings against Temu as of 31 October 2024, to assess potential non-compliance with Article 34.1 of the Digital Services Act. These proceedings by the European Commission indicate that measures put in place by Temu may not be compliant with the Specified Requirements of Article 34.1.</li> <li>2. We have not been able to obtain all relevant information associated with the proceedings, including the reasons for and/or benchmarks /criteria underlying the formal proceedings.</li> <li>3. This results in the circumstance beyond the control of the audited provider, that we cannot obtain all documentation and understanding considered necessary to identify all risks which could impact Temu's ability to comply with the Specified Requirements, in all material respects, and to adequately design the nature, timing and extent and performance of our procedures to assess compliance with Article 34.1.</li> </ol>		

<p><b>Obligation:</b> 34.2</p>	<p><b>Audit criteria:</b></p> <p>Throughout the period, in all material respects:</p> <ol style="list-style-type: none"> <li>1. The conducted risk assessment considered whether and how the five factors specified in Article 34.2, influenced any of the systemic risks referred to in paragraph 1.</li> <li>2. The risk assessment included an analysis of whether and how the risks specified in paragraph 1 are influenced by intentional manipulation of their service by inauthentic use or automated exploitation of the service.</li> <li>3. The risk assessment included an analysis of whether and how the risks specified in paragraph 1 are influenced by intentional manipulation of their service by the amplification and potentially rapid and wide dissemination of illegal content.</li> <li>4. The risk assessment included an analysis of whether and how the risks specified in paragraph 1 are influenced by intentional manipulation of their service by the amplification and potentially rapid and wide dissemination of information that is incompatible with their T&amp;Cs.</li> <li>5. The risk assessment considered specific regional or linguistic aspects, including when specific to a Member State.</li> </ol>	<p><b>Materiality threshold:</b></p> <p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
<p><b>Conclusion:</b></p> <p><b>Disclaimer</b> - Because of the limitation on the scope of our examination discussed in the following paragraph, the scope of our work was not sufficient to enable us to express, and we do not express, an opinion on whether the audited service complied with this DSA Specified Requirement during the DSA Examination Period.</p> <p><b>Explanation of the circumstances and the reasons why this obligation could not be audited:</b></p> <ol style="list-style-type: none"> <li>1. The European Commission has opened formal proceedings against Temu as of 31 October 2024, to assess potential non-compliance with Article 34.2 of the Digital Services Act. These proceedings by the European Commission indicate that measures put in place by Temu may not be compliant with the Specified Requirements of Article 34.2.</li> <li>2. We have not been able to obtain all relevant information associated with the proceedings, including the reasons for and/or benchmarks /criteria underlying the formal proceedings.</li> <li>3. This results in the circumstance beyond the control of the audited provider, that we cannot obtain all documentation and understanding considered necessary to identify all risks which could impact Temu's ability to comply with the Specified Requirements, in all material respects, and to adequately design the nature, timing and extent and performance of our procedures to assess compliance with Article 34.2.</li> </ol>		

<p><b>Obligation:</b> 34.3</p>	<p><b>Audit criteria:</b></p> <p>Throughout the period, in all material respects:</p> <ol style="list-style-type: none"> <li>1. The provider preserved supporting documents of the risk assessments, such as information regarding the preparation thereof, underlying data and data on the testing of their algorithmic systems, for at least 3 years after the performance of risk assessments.</li> <li>2. Upon request, supporting documents were communicated to the Commission and to the Digital Services Coordinator of establishment.</li> </ol>	<p><b>Materiality threshold:</b></p> <p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
<p><b>Audit procedures, results and information relied upon:</b></p> <p>In order to evaluate the audited provider’s compliance with this Specified Requirement, EY evaluated the design and operation of control(s) and performed substantive procedures, as outlined below.</p> <ol style="list-style-type: none"> <li>1. Inquired with management and conducted a walkthrough to gain an understanding of the process in place to preserve supporting documents of the risk assessments for at least three years after the performance of risk assessments and communicate supporting documentation of the Risk Assessment Report (RAR) to the Commission and Digital Services Coordinator, upon request.</li> <li>2. Assessed that the design of the policies and processes in place was appropriate to comply with the Specified Requirement.</li> <li>3. Inspected the internal repository system where the Risk Assessment Report (RAR) is saved to determine it is preserved for at least 3 years.</li> <li>4. Inspected the European Commission request for information dated 20 December 2024 to determine that, upon request, supporting documents were communicated to the Commission and the Digital Services Coordinator.</li> <li>5. We confirmed, after the Examination Period, that there were no significant changes in the design or operation of the systems and processes in the period between testing and the end of the Examination Period.</li> </ol> <p><b>Changes to the audit procedures during the audit:</b></p> <p>None.</p> <p><b>Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:</b></p> <p>There were no material deviations identified in the performance of the above procedures, unless denoted below. The results of the audit procedures were deemed sufficient to obtain reasonable assurance.</p> <p><b>Positive</b> - In our opinion, the audited service complied with this Specified Requirement during the Examination Period in all material respects.</p>		
<p><b>Recommendations on specific measures:</b></p> <p>Not applicable.</p>	<p><b>Recommended timeframe to implement specific measures:</b></p> <p>Not applicable.</p>	

<p><b>Obligation:</b> 35.1</p>	<p><b>Audit criteria:</b></p> <p>Throughout the period, in all material respects:</p> <ol style="list-style-type: none"> <li>1. Reasonable, proportionate and effective mitigation measures were put in place tailored to the specific systemic risks identified pursuant to Article 34.</li> <li>2. The provider considered the impact of the mitigation measures on the fundamental rights of users.</li> <li>3. The risk assessment included an assessment whether the risk mitigation measures in Article 35.1, points (a) to (k) were applicable to the audited service.</li> </ol>	<p><b>Materiality threshold:</b></p> <p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
<p><b>Conclusion:</b></p> <p><b>Disclaimer</b> - Because of the limitation on the scope of our examination discussed in the following paragraph, the scope of our work was not sufficient to enable us to express, and we do not express, an opinion on whether the audited service complied with this DSA Specified Requirement during the DSA Examination Period.</p> <p><b>Explanation of the circumstances and the reasons why this obligation could not be audited:</b></p> <ol style="list-style-type: none"> <li>1. The European Commission has opened formal proceedings against Temu as of 31 October 2024, to assess potential non-compliance with Article 35.1 of the Digital Services Act. These proceedings by the European Commission indicate that measures put in place by Temu may not be compliant with the Specified Requirements of Article 35.1.</li> <li>2. We have not been able to obtain all relevant information associated with the proceedings, including the reasons for and/or benchmarks /criteria underlying the formal proceedings.</li> <li>3. This results in the circumstance beyond the control of the audited provider, that we cannot obtain all documentation and understanding considered necessary to identify all risks which could impact Temu's ability to comply with the Specified Requirements, in all material respects, and to adequately design the nature, timing and extent and performance of our procedures to assess compliance with Article 35.1.</li> </ol>		

Obligation:	Audit criteria:	Materiality threshold:
36.1	<p>Throughout the period, in all material respects: For a crisis declared by the European Commission, the provider took one or more of the following actions:</p> <ul style="list-style-type: none"> <li>▶ Assessed whether, and if so to what extent, their services significantly contribute to the threat or are likely to do so</li> <li>▶ Identified relevant systems involved in the functioning or use of the service(s) that significantly contribute to the threat</li> <li>▶ Defined and monitored the significant contribution to the serious threat</li> <li>▶ Identified and applied specific, effective and proportionate measures to prevent, eliminate or limit any such contribution to the threat</li> <li>▶ Identified the parties concerned by the measures, and assessed the actual or potential impact of the measures on those parties' fundamental rights and legitimate interests</li> <li>▶ Reported to the Commission by a certain date or at regular intervals as specified in the decision.</li> </ul> <p>Note: For the purpose of this Article, a crisis shall be deemed to have occurred where extraordinary circumstances lead to a serious threat to public security or public health in the Union or in significant parts of it.</p> <p><b>The following are certain operational benchmark(s) defined by the audited service:</b></p> <p>"Crisis": a crisis shall be deemed to have occurred where extraordinary circumstances lead to a serious threat to public security or public health in the Union or in significant parts of it</p>	<p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>

**Audit procedures, results and information relied upon:**

In order to evaluate the audited provider's compliance with this Specified Requirement, EY primarily evaluated the design and operation of control(s), as outlined below.

1. Conducted a walkthrough and inquired with management and determined there were no occurrences of a serious threat or crisis declared by the Commission to the audited provider during the Examination Period. Inquired with management and gained an understanding of the procedures and policies in place for when a crisis is declared by the Commission, as per inspection of the policy documentation determined it includes guidance to assess whether, and if so, to what extent, the functioning and use of their services significantly contribute to the serious threat or are likely to do so; identify any relevant systems involved in the functioning or use of the service(s) that significantly contributes to the serious threat; identify and apply specific, effective and proportionate measures to prevent, eliminate or limit any such contribution to the serious threat; identify the parties concerned by the measures and assess the actual or potential impact of the measures on those parties' fundamental rights and legitimate interests; and report to the Commission by a certain date or at regular intervals as specified in the Commission's decision.
2. Reviewed that the design of the policies and processes in place was appropriate to comply with the Specified Requirement.
3. We confirmed, after the Examination Period, that there were no significant changes in the design or operation of the systems and processes in the period between testing and the end of the Examination Period.

**Changes to the audit procedures during the audit:**

None.

**Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:**

There were no material deviations identified in the performance of the above procedures, unless denoted below. The results of the audit procedures were deemed sufficient to obtain reasonable assurance.

**Positive** - In our opinion, the audited service complied with this Specified Requirement during the Examination Period in all material respects.

**Recommendations on specific measures:**

Not applicable.

**Recommended timeframe to implement specific measures:**

Not applicable.

<p><b>Obligation:</b> 37.2</p>	<p><b>Audit criteria:</b></p> <p>As part of the annual DSA audit, the provider:</p> <ul style="list-style-type: none"> <li>▶ Gave auditors the necessary cooperation and assistance</li> <li>▶ Gave auditors access to all relevant data and premises by answering oral or written questions timely</li> <li>▶ Refrained from hampering, unduly influencing or undermining the performance of the audit.</li> </ul>	<p><b>Materiality threshold:</b></p> <p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
<p><b>Audit procedures, results and information relied upon:</b></p> <p>In order to evaluate the audited provider’s compliance with this Specified Requirement, EY performed substantive procedures although control(s) existed, as outlined below.</p> <ol style="list-style-type: none"> <li>1. Inspected the agreement between the audited service and EY and determined that the audited service agreed to provide the necessary documentation, evidence, data and answers to questions regarding their controls and processes.</li> <li>2. Assessed the audited service’s provided cooperation and assistance throughout the Examination Period and determined that it was sufficient to enable the independent auditor to conduct those audits in an effective, efficient and timely manner, including by giving them access to all relevant data and premises and by answering oral or written questions, to determine compliance.</li> <li>3. Assessed the audited service’s cooperation and assistance throughout the Examination Period and determined that the audited service has refrained from hampering, unduly influencing or undermining the performance of the audit to determine compliance.</li> <li>4. Inquired of relevant team members who interacted with audited provider personnel, and validated that there have not been any material situations where the audited service: <ul style="list-style-type: none"> <li>- did not afford the auditing organization cooperation and assistance necessary to enable the auditing organization to conduct the current year audit in an effective, efficient and timely manner;</li> <li>- refused to give the auditing organization access to all relevant data and premises or did not answer oral or written questions;</li> <li>- hampered, unduly influenced or undermined the performance of the current year audit.</li> </ul> </li> </ol> <p><b>Changes to the audit procedures during the audit:</b></p> <p>None.</p> <p><b>Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:</b></p> <p>There were no material deviations identified in the performance of the above procedures, unless denoted below. The results of the audit procedures were deemed sufficient to obtain reasonable assurance.</p> <p><b>Positive</b> - In our opinion, the audited service complied with this Specified Requirement during the Examination Period in all material respects.</p>		
<p><b>Recommendations on specific measures:</b></p> <p>Not applicable.</p>	<p><b>Recommended timeframe to implement specific measures:</b></p> <p>Not applicable.</p>	

<p><b>Obligation:</b> 38.1</p>	<p><b>Audit criteria:</b></p> <p>Throughout the period, in all material respects: At least one option for each of their recommender systems was provided which was not based on profiling as defined in Article 4, point (4), or Regulation (EU) 2016/679.</p> <p><b>The following are certain operational benchmark(s) defined by the audited service:</b></p> <p>“Recommender systems in scope that are based on profiling”: Product-related recommendations and promotion-related recommendations. By deactivating the toggle, the recipient will not receive recommendations based on profiling in relation to both products and promotions.</p>	<p><b>Materiality threshold:</b></p> <p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
<p><b>Conclusion:</b></p> <p><b>Disclaimer</b> - Because of the limitation on the scope of our examination discussed in the following paragraph, the scope of our work was not sufficient to enable us to express, and we do not express, an opinion on whether the audited service complied with this DSA Specified Requirement during the DSA Examination Period.</p> <p><b>Explanation of the circumstances and the reasons why this obligation could not be audited:</b></p> <ol style="list-style-type: none"> <li>1. The European Commission has opened formal proceedings against Temu as of 31 October 2024, to assess potential non-compliance with Article 38.1 of the Digital Services Act. These proceedings by the European Commission indicate that measures put in place by Temu may not be compliant with the Specified Requirements of Article 38.1.</li> <li>2. We have not been able to obtain all relevant information associated with the proceedings, including the reasons for and/or benchmarks /criteria underlying the formal proceedings.</li> <li>3. This results in the circumstance beyond the control of the audited provider, that we cannot obtain all documentation and understanding considered necessary to identify all risks which could impact Temu’s ability to comply with the Specified Requirements, in all material respects, and to adequately design the nature, timing and extent and performance of our procedures to assess compliance with Article 38.1.</li> </ol>		

<p><b>Obligation:</b> 40.12</p>	<p><b>Audit criteria:</b></p> <p>Throughout the period, in all material respects:</p> <ol style="list-style-type: none"> <li>1. Access to data was provided to researchers, including those affiliated to not for profit bodies, organizations and associations, who comply with the conditions set out in paragraph 8, points (b), (c), (d) and (e), and who will use the data solely for performing research that contributes to the detection, identification and understanding of systemic risks in the Union pursuant to Article 34.1.</li> <li>2. Access to data was provided without undue delay.</li> <li>3. Access to real-time data was provided where technically possible.</li> </ol> <p><b>The following are certain operational benchmark(s) defined by the audited service:</b></p> <p>“Without undue delay”: Without excessive waiting or postponement.</p>	<p><b>Materiality threshold:</b></p> <p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
<p><b>Conclusion:</b></p> <p><b>Disclaimer</b> - Because of the limitation on the scope of our examination discussed in the following paragraph, the scope of our work was not sufficient to enable us to express, and we do not express, an opinion on whether the audited service complied with this DSA Specified Requirement during the DSA Examination Period.</p> <p><b>Explanation of the circumstances and the reasons why this obligation could not be audited:</b></p> <ol style="list-style-type: none"> <li>1. The European Commission has opened formal proceedings against Temu as of 31 October 2024, to assess potential non-compliance with Article 40.12 of the Digital Services Act. These proceedings by the European Commission indicate that measures put in place by Temu may not be compliant with the Specified Requirements of Article 40.12.</li> <li>2. We have not been able to obtain all relevant information associated with the proceedings, including the reasons for and/or benchmarks /criteria underlying the formal proceedings.</li> <li>3. This results in the circumstance beyond the control of the audited provider, that we cannot obtain all documentation and understanding considered necessary to identify all risks which could impact Temu’s ability to comply with the Specified Requirements, in all material respects, and to adequately design the nature, timing and extent and performance of our procedures to assess compliance with Article 40.12.</li> </ol>		

<p><b>Obligation:</b></p> <p>41.1</p>	<p><b>Audit criteria:</b></p> <p>Throughout the period, in all material respects:</p> <p>The provider established a compliance function which:</p> <ul style="list-style-type: none"> <li>▶ Was independent from operational functions</li> <li>▶ Had one or more compliance officers</li> <li>▶ Had a head of the compliance function</li> <li>▶ Had sufficient authority, stature, and resources</li> <li>▶ Had access to the management body.</li> </ul> <p><b>The following are certain operational benchmark(s) defined by the audited service:</b></p> <p>“Sufficient authority, stature, and resources”: The power and capabilities required to fulfil statutory duties.</p>	<p><b>Materiality threshold:</b></p> <p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
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**Audit procedures, results and information relied upon:**

In order to evaluate the audited provider's compliance with this Specified Requirement, EY primarily evaluated the design and operation of control(s), as outlined below.

1. Conducted a walkthrough and inquired with management to gain an understanding of the Compliance Function and determined [CONFIDENTIAL] who is independent from operational functions with sufficient authority, stature and resources, as well as access to the management body.
2. Assessed policy documentation and determined they were appropriately in place to define the Compliance Function and its role, as well as reporting requirements to the management body.
3. Inspected meeting minutes where the management reviewed the composition of the Compliance Function and organization charts and determined the Compliance Function is comprised solely of the Head of Compliance Function.
4. Inspected two independence assessments performed to the Head of Compliance Function, including their approval, and determined he is independent from operating functions and has sufficient authority and stature to perform his duties.
5. Inspected meeting minutes and determined the Compliance Function has access to the management body to raise concerns and inform it of the organization's status of compliance with the DSA.
6. We confirmed, after the Examination Period, that there were no significant changes in the design or operation of the systems and processes in the period between testing and the end of the Examination Period.

**Changes to the audit procedures during the audit:**

None.

**Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:**

There were no material deviations identified in the performance of the above procedures, unless denoted below. The results of the audit procedures were deemed sufficient to obtain reasonable assurance.

**Positive** - In our opinion, the audited service complied with this Specified Requirement during the Examination Period in all material respects.

**Recommendations on specific measures:**

Not applicable.

**Recommended timeframe to implement specific measures:**

Not applicable

<p><b>Obligation:</b></p> <p>41.2</p>	<p><b>Audit criteria:</b></p> <p>Throughout the period, in all material respects:</p> <ol style="list-style-type: none"> <li>1. A management body of the provider was designated to ensure that: <ul style="list-style-type: none"> <li>▶ Compliance officers had the professional qualifications, knowledge, experience and ability necessary to fulfil the tasks</li> <li>▶ The head of the compliance function was an independent senior manager with distinct responsibility for the compliance function.</li> </ul> </li> <li>2. The head of the compliance function reported directly to the management body and raised concerns to the body regarding risks referred to in Article 34 or non-compliance that could have affected the Company.</li> <li>3. The head of the compliance function was not removed without prior approval of the management body.</li> </ol>	<p><b>Materiality threshold:</b></p> <p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
<p><b>Audit procedures, results and information relied upon:</b></p> <p>In order to evaluate the audited provider’s compliance with this Specified Requirement, EY primarily evaluated the design and operation of control(s), as outlined below.</p> <ol style="list-style-type: none"> <li>1. Conducted a walkthrough and inquired with management to gain an understanding of how the management body (Whaleco Technology Limited) oversees the Compliance Function and its procedures in monitoring the compliance of the audited service with the DSA, ensuring the compliance officers and the Head of Compliance Function have the professional qualifications, knowledge, experience and ability necessary to fulfil their tasks.</li> <li>2. Inquired with management and assessed policy documentation and determined that the Head of Compliance Function cannot be removed without prior approval of the management body and has been in their role for the duration of the Examination Period.</li> <li>3. Inspected the CV of the Head of Compliance Function and determined he has the professional qualifications, knowledge, experience and ability necessary to fulfil their tasks.</li> <li>4. Assessed policy documentation and determined that the management body of the provider was designated to ensure that the Compliance Officers had the professional qualifications, knowledge, experience and ability necessary to fulfil their tasks and the Head of the Compliance Function is an independent senior manager with distinct responsibility for the Compliance Function.</li> <li>5. Inspected two independence assessments performed to the Head of Compliance Function, including their approval, and determined he is independent from operating functions and has sufficient authority and stature to perform his duties.</li> <li>6. Inspected meeting minutes and verified that the Head of Compliance Function reported directly to the management body and raised concerns to the body regarding risks referred to in Article 34 or non-compliance that could have affected the Company.</li> <li>7. We confirmed, after the Examination Period, that there were no significant changes in the design or operation of the controls in the period between testing the operating effectiveness of the controls and the end of the Examination Period.</li> </ol>		

<p><b>Changes to the audit procedures during the audit:</b></p> <p>None.</p> <p><b>Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:</b></p> <p>There were no material deviations identified in the performance of the above procedures, unless denoted below. The results of the audit procedures were deemed sufficient to obtain reasonable assurance.</p> <p><b>Positive</b> - In our opinion, the audited service complied with this Specified Requirement during the Examination Period in all material respects.</p>	
<p><b>Recommendations on specific measures:</b></p> <p>Not applicable.</p>	<p><b>Recommended timeframe to implement specific measures:</b></p> <p>Not applicable.</p>

<p><b>Obligation:</b></p> <p>41.3</p>	<p><b>Audit criteria:</b></p> <p>Throughout the period, in all material respects:</p> <p>The Compliance officers engaged in the following tasks:</p> <ul style="list-style-type: none"> <li>▶ Cooperated with the Digital Services Coordinator of establishment and the Commission</li> <li>▶ Ensured that all risks referred to in Article 34 were identified and properly reported on, and that reasonable, proportionate and effective risk-mitigation measures were taken pursuant to Article 35</li> <li>▶ Organized and supervised the independent audit activities pursuant to Article 37</li> <li>▶ Informed and advised management and employees about relevant obligations under this Regulation</li> <li>▶ Monitored the compliance of the Company with its obligations under this Regulation</li> <li>▶ Where applicable, monitored the compliance with commitments made under the codes of conduct pursuant to Articles 45 and 46 or the crisis protocols pursuant to Article 48.</li> </ul>	<p><b>Materiality threshold:</b></p> <p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
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**Audit procedures, results and information relied upon:**

In order to evaluate the audited provider’s compliance with this Specified Requirement, EY primarily evaluated the design and operation of control(s), as outlined below.

1. Conducted a walkthrough and inquired with management to gain an understanding of how the Compliance Function cooperated with the Digital Services Coordinator of establishment and the Commission, performed an independent assessment related to Article 34 and 35, assisted in the organization and supervision of the independent audit activities pursuant to Article 37, informed management and employees about relevant obligations under the DSA and monitored the compliance of the audited service with its obligations under the DSA.

2. Inspected policy documentation and determined that the policy clearly stipulates the responsibilities of the Compliance Officers required by Article 41.3 below:

- a) Cooperated with the Digital Services Coordinator of establishment and the Commission
- b) Ensured that all risks referred to in Article 34 were identified and properly reported on, and that reasonable, proportionate and effective risk-mitigation measures were taken pursuant to Article 35
- c) Organized and supervised the independent audit activities pursuant to Article 37
- d) Informed and advised management and employees about relevant obligations under this Regulation
- e) Monitored the compliance of the Company with its obligations under this Regulation
- f) Monitored the compliance with commitments made under the codes of conduct pursuant to Articles 45 and 46 or the crisis protocols pursuant to Article 48.

3. We confirmed, after the Examination Period, that there were no significant changes in the design or operation of the controls in the period between testing the operating effectiveness of the controls and the end of the Examination Period

**Changes to the audit procedures during the audit:**

None.

**Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:**

There were no material deviations identified in the performance of the above procedures, unless denoted below. The results of the audit procedures were deemed sufficient to obtain reasonable assurance.

**Positive** - In our opinion, the audited service complied with this Specified Requirement during the Examination Period in all material respects.

**Recommendations on specific measures:**

Not applicable.

**Recommended timeframe to implement specific measures:**

Not applicable.

<b>Obligation:</b>  41.4	<b>Audit criteria:</b>  Throughout the period, in all material respects:  The provider communicated the name and contact details of the head of the compliance function to the Digital Services Coordinator of establishment and to the Commission.	<b>Materiality threshold:</b>  If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.
<p><b>Audit procedures, results and information relied upon:</b></p> <p>In order to evaluate the audited provider's compliance with this Specified Requirement, EY primarily evaluated the design and operation of control(s), as outlined below.</p> <ol style="list-style-type: none"> <li>1. Conducted a walkthrough and inquired with management regarding the process to communicate the name and contact details of the Head of Compliance Function to the Digital Services Coordinator of establishment and to the Commission.</li> <li>2. Inspected policy documentation and determined that the policy clearly stipulated that the provider must communicate the name and contact details of the Head of Compliance Function to the Digital Services Coordinator of establishment and to the Commission within one week of appointment.</li> <li>3. Inspected email communication from Temu to the Commission and the Digital Services Coordinator and determined that the Company communicated the name and contact details of the Head of Compliance Function to the Commission and the Digital Services Coordinator. However, the latter was informed over one week following the HOCF's appointment which does not comply with internal policies.</li> <li>4. We confirmed, after the Examination Period, that there were no significant changes in the design or operation of the controls in the period between testing the operating effectiveness of the controls and the end of the Examination Period.</li> </ol> <p><b>Changes to the audit procedures during the audit:</b></p> <p>None.</p> <p><b>Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:</b></p> <p>There were no material deviations identified in the performance of the above procedures, unless denoted below. The results of the audit procedures were deemed sufficient to obtain reasonable assurance.</p> <p><b>Positive</b> - In our opinion, the audited service complied with this Specified Requirement during the Examination Period in all material respects.</p>		
<b>Recommendations on specific measures:</b>  Not applicable.	<b>Recommended timeframe to implement specific measures:</b>  Not applicable.	

<p><b>Obligation:</b></p> <p>41.5</p>	<p><b>Audit criteria:</b></p> <p>Throughout the period, in all material respects:</p> <p>The management body of the provider defined, oversaw, and maintained accountability for the implementation of the provider's governance arrangements to ensure the independence of the compliance function, including the division of responsibilities within the organization, the prevention of conflicts of interest, and management of systemic risks identified pursuant to Article 34.</p>	<p><b>Materiality threshold:</b></p> <p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
<p><b>Audit procedures, results and information relied upon:</b></p> <p>In order to evaluate the audited provider's compliance with this Specified Requirement, EY primarily evaluated the design and operation of control(s), as outlined below.</p> <ol style="list-style-type: none"> <li>1. Conducted a walkthrough and inquired with management to gain an understanding of how the management body of the provider defined, oversaw and maintained accountability for the implementation of the audited service's governance arrangements to ensure the independence of the compliance function, including the division of responsibilities, the prevention of conflicts of interest, and management of systemic risks identified pursuant to Article 34.</li> <li>2. Inspected policy documentation and determined that the management body has defined, oversaw and is accountable for implementing the audited service's governance arrangements that ensure independence of the compliance function, including the division of responsibilities within the Company, the prevention of conflicts of interest, and sound management of systemic risks identified pursuant to Article 34.</li> <li>3. Inspected meeting minutes and verified that the Head of Compliance Function reported directly to the management body and raised concerns to the body regarding risks referred to in Article 34 or non-compliance that could have affected the Company.</li> <li>4. We confirmed, after the Examination Period, that there were no significant changes in the design or operation of the controls in the period between testing the operating effectiveness of the controls and the end of the Examination Period.</li> </ol> <p><b>Changes to the audit procedures during the audit:</b></p> <p>None.</p> <p><b>Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:</b></p> <p>There were no material deviations identified in the performance of the above procedures, unless denoted below. The results of the audit procedures were deemed sufficient to obtain reasonable assurance.</p> <p><b>Positive</b> - In our opinion, the audited service complied with this Specified Requirement during the Examination Period in all material respects.</p>		
<p><b>Recommendations on specific measures:</b></p> <p>Not applicable.</p>	<p><b>Recommended timeframe to implement specific measures:</b></p> <p>Not applicable.</p>	

<p><b>Obligation:</b></p> <p>41.6</p>	<p><b>Audit criteria:</b></p> <p>Throughout the period, in all material respects:</p> <p>The management body approved and reviewed, at least once a year, the strategies and policies for taking up, managing, monitoring and mitigating the risks identified pursuant to Article 34.</p>	<p><b>Materiality threshold:</b></p> <p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
<p><b>Audit procedures, results and information relied upon:</b></p> <p>In order to evaluate the audited provider's compliance with this Specified Requirement, EY primarily evaluated the design and operation of control(s), as outlined below.</p> <ol style="list-style-type: none"> <li>1. Conducted a walkthrough and inquired with management to determine how the management body reviewed and approved the strategies and policies in place for taking up, managing, monitoring and mitigating risks identified pursuant to Article 34.</li> <li>2. Inspected meeting minutes and determined that the management body reviewed and approved the Risk Assessment Report presented by the Head of Compliance Function during the Examination Period that included the strategies and policies for taking up, managing, monitoring and mitigating the risks pursuant to Article 34.</li> <li>3. Inspected policy documentation and determined that the management body must review and approve, at least once a year, the strategies and policies for taking up, managing, monitoring and mitigating the risks identified pursuant to Article 34. However, we verified that during the Examination Period, the audited service's SOPs were not formally approved.</li> <li>4. Verified the Risk Assessment Report was produced in accordance with Article 34, and includes the strategies for taking up, managing, monitoring and mitigating the risks identified pursuant to Article 34.</li> <li>5. We confirmed, after the Examination Period, that there were no significant changes in the design or operation of the controls in the period between testing the operating effectiveness of the controls and the end of the Examination Period.</li> </ol> <p><b>Changes to the audit procedures during the audit:</b></p> <p>None.</p> <p><b>Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:</b></p> <p>The results of the audit procedures were deemed sufficient to obtain reasonable assurance.</p> <p><b>Negative</b> - In our opinion, except for the effects of material non-compliance described in the following paragraph, the audited service complied with the Specified Requirement during the Examination Period, in all material respects.</p> <p>All of the audited service's Standard Operating Procedures were not formally approved at the beginning of the Examination Period. All the DSA related SOPs were reviewed during the annual review process in July 2025 and subsequently approved by the Board of Directors in August 2025, following the Examination Period.</p>		

<p><b>Recommendations on specific measures:</b></p> <p>We recommend that the audited service formally approve its Standard Operating Procedures prior to release. Furthermore, each strategy and policy should clearly indicate the version, identify the preparer and reviewer, and include the dates of approval and review by the Board of Directors.</p>	<p><b>Recommended timeframe to implement specific measures:</b></p> <p>Not applicable.</p>
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<p><b>Obligation:</b></p> <p>41.7</p>	<p><b>Audit criteria:</b></p> <p>Throughout the period, in all material respects:</p> <p>The management body:</p> <ul style="list-style-type: none"> <li>▶ Devoted sufficient time to the consideration of the measures related to risk management</li> <li>▶ Maintained active involvement in the decisions related to risk management</li> <li>▶ Ensured that adequate resources were allocated to the management of the risks identified in accordance with Article 34.</li> </ul>	<p><b>Materiality threshold:</b></p> <p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
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<p><b>Audit procedures, results and information relied upon:</b></p> <p>In order to evaluate the audited provider's compliance with this Specified Requirement, EY primarily evaluated the design and operation of control(s), as outlined below.</p> <ol style="list-style-type: none"> <li>1. Conducted a walkthrough and inquired with management and gained an understanding of how the management body oversaw the Compliance Function and its procedures in monitoring the compliance of the audited service with the DSA throughout the Examination Period.</li> <li>2. Reviewed that the design of the policies and processes in place was appropriate to comply with the Specified Requirement.</li> <li>3. Inspected meeting minutes and determined the management body devoted sufficient time to the consideration of the measures related to risk management, maintained active involvement in the decisions related to risk management, and ensured that adequate resources were allocated to the management of the risks identified in accordance with Article 34.</li> <li>4. We confirmed, after the Examination Period, that there were no significant changes in the design or operation of the controls in the period between testing the operating effectiveness of the controls and the end of the Examination Period.</li> </ol> <p><b>Changes to the audit procedures during the audit:</b></p> <p>None.</p> <p><b>Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:</b></p> <p>There were no material deviations identified in the performance of the above procedures, unless denoted below. The results of the audit procedures were deemed sufficient to obtain reasonable assurance.</p> <p><b>Positive</b> - In our opinion, the audited service complied with this Specified Requirement during the Examination Period in all material respects.</p>
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<b>Recommendations on specific measures:</b>  Not applicable.	<b>Recommended timeframe to implement specific measures:</b>  Not applicable.
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<b>Obligation:</b> 42.1	<b>Audit criteria:</b> Throughout the period, in all material respects: The provider published transparency reports referred to in Article 15: <ul style="list-style-type: none"> <li>▶ No later than 2 months from the date of application referred to in 33.6, second subparagraph, and</li> <li>▶ At least every 6 months thereafter.</li> </ul>	<b>Materiality threshold:</b> If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.
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**Audit procedures, results and information relied upon:**

In order to evaluate the audited provider’s compliance with this Specified Requirement, EY performed substantive procedures although controls existed, as outlined below.

1. Conducted a walkthrough and inquired with management and gained an understanding of how the process for publishing transparency reports to the publicly accessible website.
2. Reviewed that the design of the policies and processes in place was appropriate to comply with the Specified Requirement.
3. Inspected Temu DSA website and verified that the Article 15 transparency reports were published no later than two months from the date of application, and at least every six months thereafter, with the first transparency report being published on 30 November 2024 and the subsequent transparency report being published on the 28 February 2025.
4. We confirmed, after the Examination Period, that there were no significant changes in the design or operation of the controls in the period between testing the operating effectiveness of the controls and the end of the Examination Period.

**Changes to the audit procedures during the audit:**

None.

**Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:**

There were no material deviations identified in the performance of the above procedures, unless denoted below. The results of the audit procedures were deemed sufficient to obtain reasonable assurance.

**Positive** - In our opinion, the audited service complied with this Specified Requirement during the Examination Period in all material respects.

<b>Recommendations on specific measures:</b>  Not applicable.	<b>Recommended timeframe to implement specific measures:</b>  Not applicable.
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<p><b>Obligation:</b> 42.2</p>	<p><b>Audit criteria:</b></p> <p>Throughout the period, in all material respects:</p> <p>1. The provider included information enumerated in points (a) to (c) of 42.2 in the published transparency reports, summarized as follows:</p> <ul style="list-style-type: none"> <li>▶ Information on the human resources dedicated to content moderation related to the service in the Union, broken down by each official language of the Member States</li> <li>▶ Information on the qualifications and linguistic expertise of the content moderation staff</li> <li>▶ Information on the training and support given to content moderation staff</li> <li>▶ Information on the use of automated means for content moderation, broken down by each official language of the Member States.</li> </ul> <p>2. The provider published the reports in at least one of the official languages of the Member States.</p>	<p><b>Materiality threshold:</b></p> <p>If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
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**Audit procedures, results and information relied upon:**

In order to evaluate the audited provider’s compliance with this Specified Requirement, EY performed substantive procedures although controls existed, as outlined below.

1. Conducted a walkthrough and inquired with management and gained an understanding of the transparency report is drafted, obtains the necessary approvals and converts the narratives and metrics into a format suitable for publication.
2. Reviewed that the design of the policies and processes in place was appropriate to comply with the Specified Requirement.
3. Inspected the related emails for approvals and confirmed that all of the metrics published in the November 2024 and February 2025 DSA Transparency Report have been validated by stakeholders, including a verification of the SQL code used to extract in-scope data from the correct data sources. Validated that all approving stakeholders were appropriate based on their job functions/titles.
4. Inspected the November 2024 and February 2025 DSA Transparency Report on the DSA webpage and determined that they contained information required by the DSA, specifically:
  - i. The human resources dedicated to content moderation related to the service in the Union, broken down by each official language of the Member States
  - ii. The qualifications and linguistic expertise of the content moderation staff
  - iii. The training and support given to the content moderation staff
  - iv. The information on the use of automated means for content moderation, broken down by each official language of the Member States
5. Inspected the November 2024 and February 2025 DSA Transparency Report on the DSA webpage and determined that they were published in at least one of the official languages of the Member States, being English.
6. We confirmed, after the Examination Period, that there were no significant changes in the design or operation of the controls in the period between testing the operating effectiveness of the controls and the end of the Examination Period.

**Changes to the audit procedures during the audit:**

None.

**Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:**

There were no material deviations identified in the performance of the above procedures, unless denoted below. The results of the audit procedures were deemed sufficient to obtain reasonable assurance.

**Positive** - In our opinion, the audited service complied with this Specified Requirement during the Examination Period in all material respects.

**Recommendations on specific measures:**

Not applicable.

**Recommended timeframe to implement specific measures:**

Not applicable.



<p><b>Obligation:</b> 42.3</p>	<p><b>Audit criteria:</b> The provider included in the transparency reports (referred to in 42.1) the average monthly recipients of the service for each Member State.</p>	<p><b>Materiality threshold:</b> If a control was not suitably designed and operated effectively to satisfy the obligation for at least 95% of the Engagement Period, and/or if there was an actual or projected error of more than 5% (or other material qualitative variance) during the Engagement Period related to the audit criteria.</p>
<p><b>Audit procedures, results and information relied upon:</b></p> <p>In order to evaluate the audited provider’s compliance with this Specified Requirement, EY performed substantive procedures although controls existed, as outlined below.</p> <ol style="list-style-type: none"> <li>1. Conducted a walkthrough and inquired with management and gained an understanding of the transparency report is drafted, obtains the necessary approvals and converts the narratives and metrics into a format suitable for publication.</li> <li>2. Reviewed that the design of the policies and processes in place was appropriate to comply with the Specified Requirement.</li> <li>3. Inspected the related emails for approvals and confirmed that all of the metrics published in the November 2024 and February 2025 DSA Transparency Report have been validated by stakeholders, including a verification of the SQL code used to extract in-scope data from the correct data sources. Validated that all approving stakeholders were appropriate based on their job functions/titles.</li> <li>4. Inspected the November 2024 and February 2025 DSA Transparency Report on the DSA webpage and determined that the information on the average monthly recipients of the audited service, for each member state, were included in the reports.</li> <li>5. We confirmed, after the Examination Period, that there were no significant changes in the design or operation of the controls in the period between testing the operating effectiveness of the controls and the end of the Examination Period.</li> </ol> <p><b>Changes to the audit procedures during the audit:</b> None.</p> <p><b>Results of procedures performed, how reasonable level of assurance was achieved, and conclusion:</b> There were no material deviations identified in the performance of the above procedures, unless denoted below. The results of the audit procedures were deemed sufficient to obtain reasonable assurance.</p> <p><b>Positive</b> - In our opinion, the audited service complied with this Specified Requirement during the Examination Period in all material respects.</p>		
<p><b>Recommendations on specific measures:</b> Not applicable.</p>	<p><b>Recommended timeframe to implement specific measures:</b> Not applicable.</p>	

## Appendix 2 – Overview of methodology/approach of procedures performed

### Overview

As part of determining the initial risk assessment for each obligation (or shortly thereafter), we made inquiries and/or performed a walkthrough of applicable processes or controls to obtain a sufficient understanding in order to design the nature, timing and extent of our procedures to obtain reasonable assurance.

For each obligation we took one of the following approaches:

1. *Primarily evaluated the design and operation of control(s).* If the audited provider has a control or set of controls that closely aligns with the relevant DSA Specified Requirements, we executed procedures to assess the design and operation of the control and did not perform substantive procedures other than inquiry (unless denoted otherwise).
2. *Performed substantive procedures, although control(s) existed.* If the audited provider has a control or set of controls that closely aligns with the relevant DSA Specified Requirements, but we deemed assessment to be more efficient by executing substantive procedures, we executed substantive procedures and did not perform procedures to assess the design and operation of the control.
3. *Evaluated the design and operation of control(s) and performed substantive procedures.* If the audited provider has a control or set of controls that closely aligns with some, but not all, of the criteria of the relevant DSA Specified Requirements, we executed procedures to assess the design and operation of the control for those criteria aligned with a control or set of controls and performed substantive procedures for the remaining attributes of the relevant DSA Specified Requirements.
4. *Performed substantive procedures.* If the audited provider does not have a control or set of controls that closely aligns with many aspects of the relevant DSA Specified Requirements, we solely executed substantive procedures.

The nature of our procedures to obtain evidence can include a combination of the following techniques to obtain reasonable assurance:

- (a) Inquiry - Seeking information from knowledgeable people, throughout or outside the audited provider
- (b) Observation - Watching processes or procedures being performed by audited provider personnel
- (c) Inspection - Examining records or documents
- (d) Reperformance - Independent execution, by the auditing organization, of controls or procedures originally performed by the audited provider

The timing and extent of our procedures to be performed is a matter of professional judgment and will vary based on engagement circumstances, including the materiality, subjectivity and complexity of the obligations and commitments and our risk assessment conclusions.

### Impact of notable changes to the systems and functionalities audited during the Examination Period

We inquired as to any notable changes made to the systems and functionalities during the DSA Examination Period and adjusted our examination procedures appropriately. To the extent the changes were deemed to have a significant impact on achieving compliance with the given DSA Specified Requirements, we denoted the nature of the change in the description of the procedures performed in Appendix 1.

### Evaluation and use of audited provider's legal interpretation, benchmarks and definitions

Many of the obligations needed to be supplemented by the audited provider's own legal determination, benchmark and/or definition of ambiguous terms ("audited provider's developed supplemental criteria"). The legal determination, benchmark and/or definition of ambiguous terms determined by the audited provider are based upon their business practices, policies, specific events and other context-specific criteria. There are numerous terms that have not been defined by the DSA, implementing EU legislation or guidance from the EU Commission. For example, "promptly" may depend on the specifics of a particular event which is evaluated on a case-by-case basis. The audited provider's definition of these terms were used by the Service Auditor when conducting their substantive and control testing specifically for the Examination Period 3 October 2024 through 30 June 2025.

For each obligation, we took one of the following approaches:

1. We assessed the audited provider's developed supplemental criteria and deemed it being reasonable without further expansion or adjustment. As such, we performed procedures to evaluate the audited service's compliance with the DSA Specified Requirements, including the audited provider's supplemental developed criteria.
2. We assessed the audited provider's developed supplemental criteria and deemed it being reasonable but identified recommendations to improve the audited provider's developed supplemental criteria. As such, we performed procedures to evaluate the audited service's compliance with the DSA Specified Requirements, including the audited provider's supplemental developed criteria, and provided a recommendation to improve the audited provider's supplemental developed criteria.
3. We assessed the audited provider's supplemental developed criteria (if any) and deemed it insufficient to obtain reasonable assurance. In these situations, we either concluded the obligation was not met or determined we did not have sufficient criteria to conclude on the obligation.

The professional standards applied prohibit the auditing organization from developing its own criteria. Certain audited provider's developed supplemental criteria are included in the audit criteria within Appendix 1 for each obligation that the auditing organization deemed necessary to provide for the Specified Parties to evaluate compliance and for the DSA Specified Requirements to meet the applicable professional standard's definition of suitability.

### **Use of Sampling**

As noted in the Delegated Regulations, the auditing organization is permitted to use sampling in the collection of audit evidence. The sample size and methodology for sampling were selected in a way to obtain representativeness of the data or information and, as appropriate, in consideration of the following:

- (a) evidence obtained throughout the DSA Examination Period, or subset of DSA Examination Period (as appropriate)
- (b) relevant changes to the audited service during the DSA Examination Period;
- (c) relevant changes to the context in which the audited service is provided during the DSA Examination Period;
- (d) relevant features of algorithmic systems, where applicable, including personalization based on profiling or other criteria;
- (e) other relevant characteristics or partitions of the data, information and evidence under consideration;
- (f) the representation and appropriate analysis of concerns related to particular groups as appropriate, such as minors or vulnerable groups and minorities, in relation to the audited obligation or commitment, as deemed necessary.

As part of our risk assessment, we determined our preliminary audit strategy (i.e., controls reliance, substantive only strategy or combination of the two) for each individual obligation. When taking a controls reliance strategy and our procedures include obtaining evidence from multiple controls and/or additional assurance from substantive procedures, we have selected sample sizes based on the size of the population (e.g., a sample of 25 when the population is greater than 250 occurrences or 10% of the population size, with a minimum sample of 5 when the population is less than 50 occurrences.).

#### *Sampling related to controls/compliance*

Based on the nature of the engagement, our procedures relate to testing compliance and/or internal control over compliance - with certain requirements. Accordingly, our testing procedures include attribute sampling to determine if the sample selected has the desired attribute (for example, the selected sample's attribute is correct or incorrect, present or absent, valid or not valid) to conclude on compliance with the DSA Specified Requirements. As such, we applied guidance for minimum sample sizes in accordance with attribute sampling techniques (i.e., a qualitative statistical sample). Due to the nature of compliance/control sampling, other traditional sampling approaches for testing are not applicable as the populations do not have quantitative dimensions (e.g., monetary balances in a financial statement audit).

#### *Sampling related to substantive procedures and other considerations for controls testing*

When we have taken a substantive only strategy or we have only identified one control to test related to the obligation, we have either (1) expanded our sample sizes (e.g., to 60) or (2) performed additional procedures to obtain sufficient evidence to conclude on the Company's compliance with the DSA Specified Requirements. These additional procedures may include obtaining specific representations from management, performing substantive analytical procedures or testing more key items.



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*Identified exceptions in sample populations*

In all instances, when we encountered one exception within our sample selections which we determined to be random, we selected additional items for testing (e.g., for sample sizes of 25, we tested at least 15 additional items or 40 in total). When we concluded that the exception is systematic, we did not extend our sample size but instead concluded that the exception was an instance of non-compliance.

*Reliance placed on Information Technology General Controls (ITGCs)*

When an obligation or commitment relied on systems, tools, or the system functionality (code) used in the processes or controls to meet the Company's compliance with the Specified Requirements, we tested the changes to these systems, tools or the system functionality and that changes were tested and approved by the Company. Alternatively, when there was reliance placed on the underlying data (e.g., Transparency Report) to demonstrate compliance with the Specified Requirements, we tested access control restrictions to the relevant data that existed.

Appendix 3 – Annex I of the Delegated Regulations – Template for the audit report referred to in Article 6 of Delegated Regulations

Section A: General Information

<b>1. Audited service:</b>	
TEMU	
<b>2. Audited provider:</b>	
Whaleco Technology Limited (“WTL”)	
<b>3. Address of the audited provider:</b>	
25 St Stephen’s Green Dublin 2, Dublin, Ireland	
<b>4. Point of contact of the audited provider:</b>	
[CONFIDENTIAL] Head of Compliance Function	
<b>5. Scope of the audit:</b>	
Does the audit report include an assessment of compliance with all the obligations and commitments referred to in Article 37(1) of Regulation (EU) 2022/2065 applicable to the audited provider?	Yes. The audit report includes an assessment of compliance with Article 37(1)(a). Refer to the applicable obligations and commitments in Appendix 1. Article 37(1)(b) was not subject to audit because the requirement for the audited service to comply with such articles did not exist during the DSA Examination Period.
<b><i>i. Compliance with Regulation (EU) 2022/2065</i></b>	
<b>Obligations set out in Chapter III of Regulation (EU) 2022/2065:</b>	
<b>Audited obligation</b>	<b>Period covered</b>
A listing of the audited obligations can be found in Appendix 1 of our attached Assurance Report of Independent Auditor regarding the Digital Services Act.	3 October 2024 through 30 June 2025
<b><i>ii. Compliance with codes of conduct and crisis protocols</i></b>	
<b>Commitments undertaken pursuant to codes of conduct referred to in Articles 45 and 46 of Regulation (EU) 2022/2065 and crisis protocols referred to in Article 48 of Regulation (EU) 2022/2065:</b>	
<b>Audited commitment</b>	<b>Period covered</b>
Not applicable	Not applicable
<b>6. a. Audit start date:</b>	<b>b. Audit end date:</b>
Not applicable	Not applicable

Section B: Auditing organisation

<b>1. Name of organisation constituting the auditing organisation:</b>
Ernst & Young S.A., Luxembourg (“EY”)
<b>2. Information about the auditing team of the auditing organisation:</b>
<p>For each member of the auditing team, provide:</p> <ul style="list-style-type: none"> <li>▶ Their personal name.</li> <li>▶ The individual organisation, part of the auditing organisation, they are affiliated with;</li> <li>▶ Their professional email address.</li> <li>▶ Descriptions of their responsibilities and the work they undertook during the audit</li> </ul>
<p>[CONFIDENTIAL] was the overall responsible person from EY. (Contact detail : [CONFIDENTIAL], Ernst &amp; Young S.A. 35E Avenue John F. Kennedy, Luxembourg). EY has maintained a list of the engagement team members. At EY’s request, for privacy purposes, the personal names are not being specified in this submission. However, the complete list of team members may be requested if required by the intended users of the Independent auditor’s assurance report.</p>
<b>3. Auditors’ qualification:</b>
<p>a. Overview of the professional qualifications of the individuals who performed the audit, including domains of expertise, certifications, as applicable:</p> <p>There were more than 15 university-degreed team members involved in the execution of the engagement. Personnel directing the assurance engagement collectively have significant experience related to auditing the technology industry, algorithm systems, performing risk assessment, assessing compliance functions, content moderation, privacy matters, GDPR and other related topics. The team included individuals with the following credentials:</p> <ul style="list-style-type: none"> <li>▶ Réviseur d’Entreprises Agréé (Licensed Certified Public Auditor) as recognized by the Commission de Surveillance du Secteur Financier (CSSF) in Luxembourg</li> <li>▶ Chartered Financial Analyst as recognized by the CFA Institute</li> <li>▶ Certified Information Systems Auditor (“CISA”) as recognized by the Information Systems Audit and Control Association</li> <li>▶ Certified Public Accountant (“CICPA”) as recognized by the Chinese Institute of Certified Public Accountants</li> <li>▶ Certified Internal Auditor (“CIA”) as recognized by the Institute of Internal Auditors</li> <li>▶ Certified Information Systems Security Professional (“CISSP”) as recognized by the International Information System Security Certification Consortium, also known as (“ISC”)</li> <li>▶ Financial Risk Manager (“FRM”), as certified by the Global Association of Risk Professionals (GARP)</li> <li>▶ ITIL Foundation v4</li> <li>▶ ISO 27001 Lead Auditor - Information Security Certification</li> </ul>
<p>b. Documents attesting that the auditing organisation fulfils the requirements laid down in Article 37(3), point (b) of Regulation (EU) 2022/2065 have been attached as an annex to this report:</p>
Response included in Appendix 6.
<b>4. Auditors’ independence:</b>
<b>a. Declaration of interests</b>
<p>EY performs audits, reasonable and limited assurance engagements, and related permissible professional services, for Whaleco Technology Limited in our capacity as an assurance, tax, transaction, and advisory services provider. Additionally, EY performs audits, reasonable and limited assurance engagements, and related permissible professional services, for PDD Holdings Inc. in our capacity as a global assurance, tax, transaction, and advisory services provider.</p> <p>Whaleco Technology Limited is an affiliate of PDD Holdings Inc., which has restrictions that only allow pursuit of engagements by EY that are permissible for an SEC audit client. Thus, this engagement is subject to SEC independence rules. No prohibited services have been provided to Whaleco Technology Limited, and the general principles of independence are met (i.e., no management function, no project management, no loan staff, no legal, no aggressive tax position, no expert witness, no advocacy, no HR, no payroll, no mutuality of interest, no auditing of our own work, no becoming part of internal controls/processes, etc.).</p>

In reaching our independence conclusions we considered the International Code of Ethics for Professional Accountants, including International Independence Standards, issued by the International Ethics Standards Board for Accountants (“IESBA Code”) as adopted for Luxembourg by the CSSF.

**b. References to any standards relevant for the auditing team’s independence that the auditing organisation(s) adheres to:**

Refer to the Assurance Report of Independent Auditor regarding the Digital Services Act. As noted in the Assurance Report of Independent Auditor, EY applies the International Ethics Standards Board for Accountants International Code of Ethics for Professional Accountants (including International Independence Standards), which includes independence and other requirements founded on fundamental principles of integrity, objectivity, professional competence and due care, confidentiality and professional behavior. Independence is comprised of independence of mind and independence in appearance, both of which are required of the engagement team members engaged in providing reasonable assurance engagements. Independence of mind requires that the members maintain a state of mind that permits the expression of a conclusion without being affected by influences that compromise professional judgment, thereby allowing an individual to act with integrity and exercise objectivity and skepticism. Independence of appearance is achieved by the avoidance of facts and circumstances that are so significant that a reasonable and informed third party would likely conclude, weighing all the specific facts and circumstances, that a firm’s, or a member of the audit team’s, integrity, objectivity, or professional skepticism has been compromised.

**c. List of documents attesting that the auditing organisation complies with the obligations laid down in Article 37(3), points (a) and (c) of Regulation (EU) 2022/2065 attached as annexes to this report. Attachment 3 and 5 to Annex 1**

Refer to Appendix 6 which addresses Article 37 (3), points (a) and (c).

**5. References to any auditing standards applied in the audit, as applicable:**

Refer to our attached Assurance Report of Independent Auditor regarding the Digital Services Act. As noted in the Assurance Report of Independent Auditor, our engagement was conducted in accordance with the International Standard for Assurance Engagements Other Than Audits or Reviews of Historical Financial Information (“ISAE 3000 [Revised]”) as adopted by the Institut des Réviseurs d’Entreprises in Luxembourg. Those standards require that we plan and perform the reasonable assurance engagement to obtain reasonable assurance about whether management’s assertion is appropriately stated, in all material respects.

**6. References to any quality management standards the auditing organisation adheres to, as applicable:**

EY applies the International Standard on Quality Management 1 (ISQM 1), Quality Management for Firms that Perform Audits or Reviews of Financial Statements, or Other Assurance or Related Services engagements, which requires that we design, implement and operate a system of quality management including policies or procedures regarding compliance with ethical requirements, professional standards and applicable legal and regulatory requirements.

Furthermore, EY is a registered audit firm with the Commission de Surveillance du Secteur Financier (“CSSF”) in Luxembourg and the Institut des Réviseurs d’Entreprises (“IRE”) in Luxembourg. As such, EY complies with the public accounting profession’s technical and ethical standards. In addition to the Code of Professional Conduct, the CSSF and IRE publishes standards, which delineate specific requirements that Certified Public Auditors are consistently required to follow during the audit and other assurance engagements. Refer to EY Transparency Report 2024 for further background.

Section C: Summary of the main findings

<p><b>1. Summary of the main findings drawn from the audit (pursuant to paragraph 37(4), point (e) of Regulation (EU) 2022/2065)</b></p>
<p>A description of the main findings drawn from the audit can be found in Appendix 1 of our attached Assurance Report of Independent Auditor regarding the Digital Services Act.</p>
<p><b>Section C.1: Compliance with Regulation (EU) 2022/2065</b></p>
<p>1) Audit opinion for compliance with the audited obligations referred to in Article 37(1), point (a) of Regulation (EU) 2022/2065: The aggregate audit opinion for compliance with the applicable audited obligations set out in Chapter III of Regulation (EU) 2022/2065 can be found on page 7 within our attached Assurance Report of Independent Auditor regarding the Digital Services Act.</p>
<p>2) Audit conclusion for each audited obligation: The audit conclusion for each audited obligation can be found in Appendix 1 of our attached Assurance Report of Independent Auditor regarding the Digital Services Act.</p>
<p><b>Section C.2: Compliance with voluntary commitments in codes of conduct and crisis protocols</b> <i>Repeat section C.2 for each audited code of conduct and crisis protocol referred to in Article 37(1), point (b) of Regulation (EU) 2022/2065:</i></p>
<p>1) Audit opinion for compliance with the commitments made under specify the code of conduct or crisis protocol covered by the audit: <b>Not applicable</b></p>
<p>2) Audit conclusion for each audited commitment: <b>Not applicable</b></p>
<p><b>Section C.3: Where applicable, explanations of the circumstances and the reasons why an audit opinion could not be expressed:</b> Explanations of the circumstances and the reasons why an audit opinion could not be expressed can be found in Appendix 1 of our attached Assurance Report of Independent Auditor regarding the Digital Services Act.</p>

Section D: Description of the findings: compliance with Regulation (EU) 2022/2065

Section D.1: Audit conclusion for obligation (specify)	
<p>Insert as many entries for section D.1 as necessary to cover the entire scope of the audit, specifying the obligation the section refers to.</p> <p>The information provided should be complete and detailed such that a third party with no previous connection with the audit is able to understand the description of the findings.</p> <p>Insert as many lines as necessary per point when completing this section.</p>	
I. Audit conclusion:	
<ul style="list-style-type: none"> <li>▶ <b>Description of the audit conclusion, justification, and remarks.</b></li> <li>▶ <b>As appropriate, include here any comments.</b></li> </ul> <p>A description of the audit conclusion, justification, and remarks for each audited obligation can be found in Appendix 1 of our attached Assurance Report of Independent Auditor regarding the Digital Services Act.</p>	
<p><i>If the conclusion is not 'positive', operational recommendations on specific measures to achieve compliance. Explanation on the materiality of non-compliance, where applicable</i></p>	<p><i>Recommended timeframe to achieve compliance</i></p>
<p>Operational recommendations on specific measures to either a) achieve compliance (where the conclusion is negative) , including an explanation on the materiality of non-compliance and recommended timeframe to achieve compliance, or b) improve that do not have a substantive effect on compliance (where the conclusion is positive with comments), can be found in Appendix 1 of our attached Assurance Report of Independent Auditor regarding the Digital Services Act.</p>	
II. Audit procedures and their results:	
<p><b>1) Description of the audit criteria and materiality threshold used by the auditing organisation pursuant to Article 10(2), point (a) of this Regulation:</b></p> <p>A description of the audit criteria and materiality thresholds used can be found in Appendix 1 of our attached Assurance Report of Independent Auditor regarding the Digital Services Act.</p>	
<p><b>2) Audit procedures, methodologies, and results:</b></p> <p><b>a) Description of the audit procedures performed by the auditing organisation, the methodologies used to assess compliance, and justification of the choice of those procedures and methodologies (including, where applicable, a justification for the choices of standards, benchmarks, sample size(s) and sampling method(s)):</b> A description of the audit procedures performed, the methodologies used to assess compliance, and a justification of the choice of those procedures and methodologies can be found in Appendix 1 and Appendix 2 of our attached Assurance Report of Independent Auditor regarding the Digital Services Act.</p> <p><b>b) Description, explanation, and justification of any changes to the audit procedures during the audit:</b> A description, explanation, and justification of any changes to the audit procedures during the audit can be found in Appendix 1 and Appendix 2 of our attached Assurance Report of Independent Auditor regarding the Digital Services Act.</p> <p><b>c) Results of the audit procedures, including any test and substantive analytical procedures:</b> The results of the audit procedures, including any test and substantive analytical procedures, can be found in Appendix 1 of our attached Assurance Report of Independent Auditor regarding the Digital Services Act.</p>	
<p><b>3) Overview and description of information relied upon as audit evidence, including, as applicable:</b></p> <ul style="list-style-type: none"> <li>a. Description of the type of information and its source;</li> <li>b. The period(s) when the evidence was collected;</li> <li>c. The period the evidence refers to;</li> <li>d. Any other relevant information and metadata.</li> </ul> <p>An overview and description of information relied upon as audit evidence can be found in Appendix 1 and Appendix 2 of our attached Assurance Report of Independent Auditor regarding the Digital Services Act.</p>	
<p><b>4) Explanation of how the reasonable level of assurance was achieved:</b></p>	

<p>An explanation of how the reasonable level of assurance was achieved can be found in Appendix 1 of our attached Assurance Report of Independent Auditor regarding the Digital Services Act.</p>
<p><b>5) In cases when:</b></p> <p>a. A specific element could not be audited, as referred to in Article 37(5) of Regulation (EU) 2022/2065, or  b. an audit conclusion could not be reached with a reasonable level of assurance, as referred to in Article 8(8) of this Regulation, provide an explanation of the circumstances and the reasons:</p> <p>An explanation of the circumstances and the reasons why a specific element could not be audited or an audit conclusion could not be reached with a reasonable level of assurance can be found in Appendix 1 of our attached Assurance Report of Independent Auditor regarding the Digital Services Act.</p>
<p><b>6) Notable changes to the systems and functionalities audited during the audited period and explanation of how these changes were taken into account in the performance of the audit.</b></p> <p>A list of notable changes to the systems and functionalities audited during the audited period and explanation of how these changes were taken into account in the performance of the audit can be found in Appendix 1 of our attached Assurance Report of Independent Auditor regarding the Digital Services Act and Appendix 2.</p>
<p><b>7) Other relevant observations and findings:</b></p> <p>Please see Appendix 1 of our attached Assurance Report of Independent Auditor regarding the Digital Services Act and Appendix 2 for any other relevant observations and findings.</p>
<p><b>Section D.2: Additional elements pursuant to Article 16 of this Regulation</b></p>
<p><b>1) An analysis of the compliance of the audited provider with Article 37(2) of Regulation (EU) 2022/2065 with respect to the current audit:</b></p> <p>An analysis of the compliance of the audited provider with Article 37(2) of Regulation (EU) 2022/2065 with respect to the current audit can be found in Appendix 1 of our attached Assurance Report of Independent Auditor regarding the Digital Services Act.</p>
<p><b>2) Description of how the auditing organisation ensured its objectivity in the situation described in Article 16(3) of this Regulation:</b></p> <p>Not applicable as this is the first required audit.</p>

Section E: Description of the findings concerning compliance with codes of conduct and crisis protocol

**Not Applicable – No codes of conduct or crisis protocols were applicable during the audit period**

**Code of conduct or crisis protocol: (specify)**

Repeat this section for each code of conduct and crisis protocol.

Section E.1: Audit conclusion for commitment (specify)		
<p><i>Insert as many entries for section E.1 as necessary to cover the entire scope of the audit, specifying the commitment audited.</i></p> <p><i>The information provided should be complete and detailed such that a third party with no previous connection with the audit is able to understand the description of the findings.</i></p> <p><i>Insert as many lines as necessary per point when completing this section.</i></p>		
I. Audit conclusion:		
Audit conclusion		
Positive	Positive with comments	Negative
Description of the audit conclusion, justification, and any comments.		
<p><i>If the conclusion is not 'positive', operational recommendations on specific measures to achieve compliance.</i></p> <p><i>Explanation on the materiality of non-compliance, where applicable</i></p>		<p><i>Recommended timeframe to achieve compliance</i></p>
II. Audit procedures and their results:		
1. Description of the audit criteria and materiality threshold used by the auditing organisation pursuant to Article 10(2), point (a) of this Regulation:		
2. Audit procedures, methodologies, and results:		
a) Description of the audit procedures performed by the auditing organisation, the methodologies used to assess compliance, and justification of the choice of those procedures and methodologies (including, where applicable, a justification for the choices of standards, benchmarks, sample size(s) and sampling method(s)):		
b) Description, explanation, and justification of any changes to the audit procedures during the audit:		
c) Results of the audit procedures, including any test and substantive analytical procedures:		
3. Overview and description of information relied upon as audit evidence, including, as applicable:		
a) description of the type of information and its source;		
b) the period(s) when the evidence was collected;		
c) the period to which the evidence refers;		
d) any other relevant information and metadata.		
4. Explanation of how the reasonable level of assurance was achieved:		
5. <b>In cases when:</b>		
a. a specific element could not be audited, as referred to in Article 37(5) of Regulation (EU) 2022/2065, or		
b. an audit conclusion could not be reached with a reasonable level of assurance, as referred to in Article 8(8) of this Regulation, provide an explanation of the circumstances and the reasons:		
Obligation or commitment and relevant elements not audited		Explanation of circumstances and reasons:
6. Notable changes to the systems and functionalities audited during the audited period and explanation of how these changes were taken into account in the performance of the audit.		
7. Other relevant observations and findings		



*Section F: Third-parties consulted*

Repeat this section per third-party consulted, incrementing the name of the section by one (for example, F.1, F.2, and so forth).

<b>1. Name of third party consulted:</b>
<i>Not Applicable</i>
<b>2. Representative and contact information of consulted third party:</b>
<i>Not Applicable</i>
<b>3. Date(s) of consultation:</b>
<i>Not Applicable</i>
<b>4. Input provided by third-party</b>
<i>Not Applicable</i>



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Section G: Any other information the auditing body wishes to include in the audit report (such as a description of possible inherent limitations).

Please refer to our attached Assurance Report of Independent Auditor regarding the Digital Services Act for additional information.

		<i>Include as many lines as necessary in accordance with the allocation of responsibilities and empowerment as referred to in Article 7(1) point b)</i>	
<b>Date</b>	30 September 2025	<b>Signed by</b>	[CONFIDENTIAL]
<b>Place</b>	35E Avenue John F. Kennedy, L-1855, Luxembourg	<b>In the name of</b>	Ernst & Young S.A.
		<b>Responsible for:</b>	Entire Engagement



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## Appendix 4 – Written agreement(s) between audited provider and the auditing organization

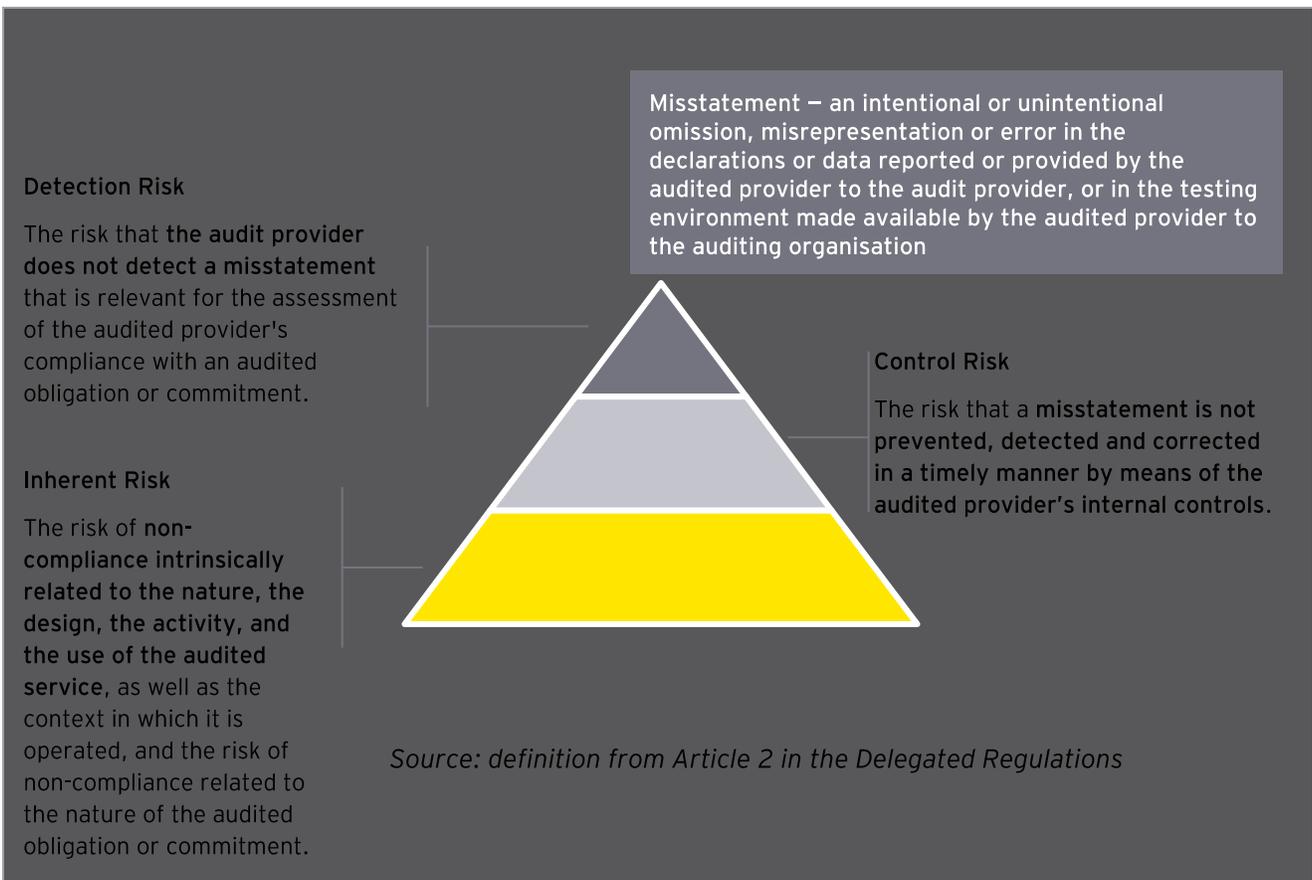
[CONFIDENTIAL]

## Appendix 5 – Documents relating to the audit risk analysis

**Purpose:** This document summarizes the risk assessment performed for the assessment of compliance with each audited obligation or commitment, including the assessment of inherent risks, control risks and detection risks for each audited obligation (i.e., each Sub article of the Digital Service Act).

### DSA Risk Assessment Requirements

- 1) The audit report shall include a substantiated audit risk analysis performed by the auditing organization for the assessment of the audited provider's compliance with each audited obligation or commitment.
- 2) The audit risk analysis shall be carried out prior to the performance of audit procedures and shall be updated during the performance of the audit, in the light of any new audit evidence which, according to the professional judgement of the auditing organization, materially modifies the assessment of the audit risk.
- 3) The audit risk analysis shall consider:
  - a. Inherent risks;
  - b. Control risks;
  - c. Detection risks.



4) The audit risk analysis shall be conducted considering:

a. The nature of the audited service and the societal and economic context in which the audited service is operated, including probability and severity of exposure to crisis situations and unexpected events;

b. The nature of the obligations and commitments;

c. Other appropriate information, including:

▶ Where applicable, information from previous audits to which the audited service was subjected;

▶ Where applicable, information from reports issued by the European Board for Digital Services or guidance from the Commission, including guidelines issued pursuant to Article 35(2) and (3) of Regulation (EU) 2022/2065, and any other relevant guidance issued by the Commission with respect to the application of Regulation (EU) 2022/2065;

▶ Where applicable, information from audit reports published pursuant to Article 42(4) of Regulation (EU) 2022/2065 by other providers of very large online platforms or of very large online search engines operating in similar conditions or providing similar services to the audited service.

#### Overview

Risk assessment procedures were performed to help identify risks of material misstatement and plan out the nature, timing, and extent of our audit procedures.

#### **Risk Assessment Steps performed:**

1. We obtained an understanding of the systems and processes (and related controls) put in place to comply with the DSA Specified Requirements and other engagement circumstances

Understanding the subject matter is key to planning and executing an effective engagement. We obtain our understanding during planning and update it throughout the performance of the engagement to the extent that changes affect our overall engagement strategy or the nature, timing, and extent of our procedures.

#### **We obtained an understanding sufficient to:**

▶ Enable us to identify and assess the risks of material misstatement.

▶ Provide a basis for designing and performing procedures to respond to the assessed risks and to obtain reasonable assurance to support our opinion.

Information obtained to inform the audit risk analysis:

Described in Article 9 of the Delegated Regulations	Information obtained, included, but not limited to:
The nature of the audited service and the societal and economic context in which the audited service is operated, including probability and severity of exposure to crisis situations and unexpected events.	Information from audited provider (website, voice-over, annual report) The transparency reports Systemic Risk Assessment
The nature of the obligations and commitments in Chapter 3 of the DSA;	Any documentation by the audited provider concerning the scope The audit risk and control framework
Other appropriate information, including, where applicable, information from previous audits to which the audited service was subjected;	Requests for Information (RFIs) and the responses to the RFIs European Commission's Supervision actions taken of the other designated very large online platforms and search engines under DSA
Other appropriate information, including, where applicable, information from reports issued by the European Board for Digital Services or guidance from the Commission, including guidelines issued pursuant to Article 35(2) and (3) of Regulation (EU) 2022/2065, and any other relevant guidance issued by the Commission with respect to the application of Regulation (EU) 2022/2065;	None Identified
Other appropriate information, including, where applicable, information from audit reports published pursuant to Article 42(4) of Regulation (EU) 2022/2065 by other providers of very large online platforms or of very large online search engines operating in similar conditions or providing similar services to the audited service.	Certain published reports from other providers operating in similar conditions or providing similar services (e.g., published transparency reports, DSA audit reports, etc.)

2. We determined whether the risk factors we identify are inherent risks that may give rise to risks of material misstatement associated with the subject matter. We obtained an understanding by performing procedures, including reviews of relevant information, inquiries, data analytics, observations, and inspections.

We obtained an understanding of how management prepares certain information, such as their risk assessment to comply with Article 34. We also obtain an understanding of management's process for determining the risks that would prevent the DSA Specified Requirements from being achieved, and for designing and implementing processes and controls to address those risks. The audited provider has a formal risk assessment process to comply with Article 34, and other requirements.

We obtained an understanding of the components of the system of internal control at the entity level is an important step in performing our risk assessment procedures, as it helped us identify events and conditions that may have a pervasive effect on the susceptibility of the subject matters of our report to misstatement, either due to fraud or error. We obtained an understanding how online platform's system of internal control operates at the entity level, including:

- ▶ Control environment
- ▶ Monitoring activities
- ▶ Managements risk assessment process

3. For each obligation , we assessed inherent, control and detection risks

See below for the determination of inherent, control and detection risks.

#### 4. Revision of Risk Assessment

In some instances, our assessment of the risks of material misstatement changed during the engagement as additional evidence is obtained. In circumstances in which we obtain evidence from performing further procedures, or when new information is obtained, either of which is inconsistent with the evidence on which we originally based the assessment, we revised the assessment and modify the planned procedures accordingly.



Determination of inherent, control and detection risks for each obligation and commitment

II. Assessment of Risk of each audited Obligation or Commitment

Overview of Risk assessment

Assessment of Risk regarding the Digital Services Act				
Obligation	Inherent Risk	Control Risk	Control Strategy	Detection Risk
11.1 - Final	Lower	Not Rely	Fully substantive	Moderate
11.2 - Final	Lower	Not Rely	Fully substantive	Moderate
11.3 - Final	Lower	Not Rely	Fully substantive	Moderate
12.1 - Final	Lower	Not Rely	Fully substantive	Moderate
12.2 - Final	Lower	Not Rely	Fully substantive	Moderate
14.1 - Final	Lower	Not Rely	Fully substantive	Moderate
14.2 - Final	Lower	Rely	Controls testing	Minimal
14.4 - Final	Lower	Rely	Combination of controls and substantive testing	Minimal
14.5 - Final	Lower	Not Rely	Fully substantive	Moderate
14.6 - Final	Lower	Not Rely	Fully substantive	Moderate
15.1 - Final	Lower	Rely	Controls testing	Minimal
16.1 - Final	Lower	Rely	Combination of controls and substantive testing	Minimal
16.2 - Final	Lower	Rely	Controls testing	Minimal
16.4 - Final	Lower	Rely	Controls testing	Minimal
16.5 - Initial	Lower	Rely	Controls testing	Minimal
16.5 - Final	Lower	Rely	Combination of controls and substantive testing	Minimal
16.6 - Initial	Lower	Rely	Controls testing	Minimal
16.6 - Final	Lower	Rely	Combination of controls and substantive testing	Minimal
17.1 - Final	Lower	Rely	Controls testing	Minimal
17.3 - Final	Lower	Rely	Controls testing	Minimal
17.4 - Final	Lower	Rely	Controls testing	Minimal
18.1 - Final	Lower	Rely	Controls testing	Minimal
18.2 - Final	Lower	Rely	Controls testing	Minimal
20.1 - Final	Lower	Rely	Controls testing	Minimal
20.3 - Final	Lower	Rely	Controls testing	Minimal
20.4 - Initial	Lower	Rely	Controls testing	Minimal
20.4 - Final	Lower	Rely	Combination of controls and substantive testing	Minimal
20.5 - Initial	Lower	Rely	Controls testing	Minimal
20.5 - Final	Lower	Rely	Combination of controls and substantive testing	Minimal
20.6 - Initial	Lower	Rely	Controls testing	Minimal
20.6 - Final	Lower	Rely	Combination of controls and substantive testing	Minimal
21.1 - Initial	Lower	Rely	Controls testing	Minimal
21.1 - Final	Lower	Not Rely	Fully substantive	Moderate
21.2 - Initial	Lower	Rely	Controls testing	Minimal
21.2 - Final	Lower	Not Rely	Fully substantive	Moderate
22.1 - Final	Lower	Rely	Controls testing	Minimal



Assessment of Risk regarding the Digital Services Act				
Obligation	Inherent Risk	Control Risk	Control Strategy	Detection Risk
23.1 - Final	Lower	Rely	Controls testing	Minimal
23.2 - Final	Lower	Rely	Controls testing	Minimal
23.3 - Final	Lower	Rely	Controls testing	Minimal
23.4 - Final	Lower	Not Rely	Fully substantive	Moderate
24.1 - Final	Lower	Rely	Combination of controls and substantive testing	Minimal
24.2 - Initial	Lower	Rely	Controls testing	Minimal
24.2 - Final	Lower	Rely	Combination of controls and substantive testing	Minimal
24.3 - Initial	Lower	Rely	Controls testing	Minimal
24.3 - Final	Lower	Rely	Combination of controls and substantive testing	Minimal
24.5 - Final	Lower	Rely	Controls testing	Minimal
25.1 - Final	Lower	Rely	Controls testing	Minimal
27.1 - Final	Higher	Rely	Combination of controls and substantive testing	Low
27.2 - Final	Higher	Rely	Combination of controls and substantive testing	Low
27.3 - Final	Higher	Rely	Combination of controls and substantive testing	Low
30.1 - Final	Lower	Rely	Controls testing	Minimal
30.2 - Final	Lower	Rely	Controls testing	Minimal
30.3 - Final	Lower	Rely	Controls testing	Minimal
30.4 - Initial	Lower	Rely	Controls testing	Minimal
30.4 - Final	Lower	Rely	Combination of controls and substantive testing	Minimal
30.5 - Final	Lower	Rely	Controls testing	Minimal
30.6 - Final	Lower	Rely	Controls testing	Minimal
30.7 - Final	Lower	Rely	Controls testing	Minimal
31.1 - Initial	Lower	Rely	Controls testing	Minimal
31.1 - Final	Lower	Rely	Combination of controls and substantive testing	Minimal
31.2 - Initial	Lower	Rely	Controls testing	Minimal
31.2 - Final	Lower	Rely	Combination of controls and substantive testing	Minimal
31.3 - Initial	Lower	Rely	Controls testing	Minimal
31.3 - Final	Lower	Rely	Combination of controls and substantive testing	Minimal
32.1 - Initial	Lower	Rely	Controls testing	Minimal
32.1 - Final	Lower	Rely	Combination of controls and substantive testing	Minimal
32.2 - Final	Lower	Rely	Controls testing	Minimal
34.1 - Final	Higher	Rely	Combination of controls and substantive testing	Low
34.2 - Final	Higher	Rely	Combination of controls and substantive testing	Low
34.3 - Final	Lower	Rely	Combination of controls and substantive testing	Minimal
35.1 - Final	Higher	Rely	Combination of controls and substantive testing	Low



Assessment of Risk regarding the Digital Services Act				
Obligation	Inherent Risk	Control Risk	Control Strategy	Detection Risk
36.1 - Final	Lower	Rely	Controls testing	Minimal
37.2 - Final	Lower	Not Rely	Fully substantive	Moderate
38.1 - Final	Higher	Rely	Combination of controls and substantive testing	Low
40.12 - Final	Higher	Rely	Combination of controls and substantive testing	Low
41.1 - Final	Lower	Rely	Controls testing	Minimal
41.2 - Final	Lower	Rely	Controls testing	Minimal
41.3 - Final	Lower	Rely	Controls testing	Minimal
41.4 - Final	Lower	Rely	Controls testing	Minimal
41.5 - Final	Lower	Rely	Controls testing	Minimal
41.6 - Final	Lower	Not Rely	Controls testing	Moderate
41.7 - Final	Lower	Rely	Controls testing	Minimal
42.1 - Final	Lower	Not Rely	Fully substantive	Moderate
42.2 - Final	Lower	Not Rely	Fully substantive	Moderate
42.3 - Final	Lower	Not Rely	Fully substantive	Moderate

Appendix 6 – Documents attesting that the auditing organization complies with the obligations laid down in Article 37 (3), point (a), (b), and (c)

DSA Annex	Illustrative Response
<p>Documents attesting that the auditing organisation complies with the obligations laid down in Article 37(3), point (a) of Regulation (EU) 2022/2065.</p>	<p>We have complied with the International Ethics Standards Board for Accountants International Code of Ethics for Professional Accountants (including International Independence Standards) as adopted by the CSSF in Luxembourg which includes independence and other requirements founded on fundamental principles of integrity, objectivity, professional competence and due care, confidentiality and professional behaviour.</p> <p>Our engagement agreement notes our compliance with Article 37 (3) (a) (i). Since this is the first year of the DSA audit requirement, we are, by definition, in accordance with Article 37 (3) (a)(ii). Regarding Article 37 (3) (a)(iii), we are not performing the audit in return for fees which are contingent on the result of the audit.</p>
<p>Documents attesting that the auditing organisation complies with the obligations laid down in Article 37(3), point (b) of Regulation (EU) 2022/2065.</p>	<p>In compliance with Article 37(3)(b), we conclude that we have the requisite knowledge, skills, and professional diligence under the ISAE 3000 (revised) standards. We have applied these professional standards throughout the course of our engagement.</p>
<p>Documents attesting that the auditing organisation complies with the obligations laid down in Article 37(3), point (c) of Regulation (EU) 2022/2065.</p>	<p>We have complied with the International Ethics Standards Board for Accountants International Code of Ethics for Professional Accountants (including International Independence Standards) as adopted by the CSSF in Luxembourg which includes independence and other requirements founded on fundamental principles of integrity, objectivity, professional competence and due care, confidentiality and professional behaviour.</p> <p>We applied the International Standard on Quality Management and accordingly maintained a comprehensive system of quality management including documented policies and procedures regarding compliance with ethical requirements, professional standards, and applicable legal and regulatory requirements.</p>

## Appendix 7 – Definitions

For purposes of this assurance report the following terms have the meanings attributed below:

Term	Definition	Source
<b>Assurance engagement</b>	An engagement in which a practitioner aims to obtain sufficient appropriate evidence to express a conclusion designed to enhance the degree of confidence of the intended users other than the [VLOP/VLOSE] about the subject matter information (that is, the outcome of the measurement or evaluation of an underlying subject matter against criteria).	B
<b>Audit Criteria</b>	The criteria against which the auditing organization assesses compliance with each audited obligation or commitment	A
<b>Audit evidence</b>	Any information used by an auditing organisation to support the audit findings and conclusions and to issue an audit opinion, including data collected from documents, databases or IT systems, interviews or testing performed.	A
<b>Audited obligation or commitment</b>	An obligation or commitment referred to in Article 37(1) of Regulation (EU) 2022/2065 which forms the subject matter of the audit. Unless noted otherwise, each sub article is an audited obligation or commitment.	A
<b>Auditing organisation</b>	An individual organisation, a consortium or other combination of organisations, including any sub-contractors, that the audited provider has contracted to perform an independent audit in accordance with Article 37 of Regulation (EU) 2022/2065	A
<b>Auditing procedure</b>	Any technique applied by the auditing organization in the performance of the audit, including data collection, the choice and application of methodologies, such as tests and substantive analytical procedures, and any other action taken to collect and analyze information to collect audit evidence and formulate audit conclusions, not including the issuing of an audit opinion or of the audit report	A
<b>Audited provider</b>	The provider of an audited service which is subject to independent audits pursuant to Article 37(1) of that Regulation	A
<b>Audit risk</b>	The risk that the auditing organization issues an incorrect audit opinion or reaches an incorrect conclusion concerning the audited provider's compliance with an audited obligation or commitment, considering detection risks, inherent risks and control risks with respect to that audited obligation or commitment	A
<b>Audited service</b>	A very large online platform or a very large online search engine designated in accordance with Article 33 of Regulation (EU) 2022/2065	A
<b>Control risk</b>	The risk that a misstatement is not prevented, detected and corrected in a timely manner by means of the audited provider's internal controls.	A
<b>Criteria</b>	The benchmarks used to measure or evaluate the underlying subject matter.	B
<b>Detection risk</b>	The risk that the auditing organisation does not detect a misstatement that is relevant for the assessment of the audited provider's compliance with an audited obligation or commitment.	A
<b>Engagement risk</b>	The risk that the practitioner expresses an inappropriate conclusion when the subject matter information is materially misstated.	B
<b>Evaluation Period</b>	The period in scope of the assurance engagement.	B
<b>Evidence</b>	Information used by the practitioner in arriving at the practitioner's conclusion. Evidence includes both information contained in relevant information systems, if any, and other information.	B
<b>Inherent risk</b>	The risk of non-compliance intrinsically related to the nature, the design, the activity and the use of the audited service, as well as the context in which it is operated, and the risk of non-compliance related to the nature of the audited obligation or commitment;	A
<b>Intended users</b>	The individual(s) or organization(s), or group(s) thereof that the practitioner expects will use the assurance report.	B
<b>Internal control</b>	Any measures, including processes and tests, that are designed, implemented and maintained by the audited provider, including its compliance officers and management body, to monitor and ensure the audited provider's compliance with the audited obligation or commitment.	A
<b>Materiality threshold</b>	The threshold beyond which deviations or misstatements by the audited provider, individually or aggregated, would reasonably affect the audit findings, conclusions and opinions.	A

Term	Definition	Source
<b>Misstatement</b>	A difference between the subject matter information and the appropriate measurement or evaluation of the underlying subject matter in accordance with the criteria. Misstatements can be intentional or unintentional, qualitative or quantitative, and include omissions.	B
<b>Practitioner</b>	The individual(s) conducting the engagement (usually the engagement partner or other members of the engagement team, or, as applicable, the firm).	B
<b>Professional judgment</b>	The application of relevant training, knowledge, and experience, within the context provided by assurance and ethical standards, in making informed decisions about the courses of action that are appropriate in the circumstances of the engagement.	B
<b>Professional skepticism</b>	An attitude that includes a questioning mind, being alert to conditions which may indicate possible misstatement, and a critical assessment of evidence.	B
<b>Reasonable assurance engagement</b>	An assurance engagement in which the practitioner reduces engagement risk to an acceptably low level in the circumstances of the engagement as the basis for the practitioner's conclusion. The practitioner's conclusion is expressed in a form that conveys the practitioner's opinion on the outcome of the measurement or evaluation of the underlying subject matter against criteria.	B
<b>Subject matter</b>	The phenomenon that is measured or evaluated by applying criteria.	B
<b>Subject matter information</b>	The outcome of the measurement or evaluation of the underlying subject matter against the criteria, i.e., the information that results from applying the criteria to the underlying subject matter.	B
<b>Substantive analytical procedure</b>	An audit methodology used by the auditing organisation to assess information to infer audit risks or compliance with the audited obligation or commitment.	A
<b>Test</b>	An audit methodology consisting in measurements, experiments or other checks, including checks of algorithmic systems, through which the auditing organisation assesses the audited provider's compliance with the audited obligation or commitment.	A
<b>Vetted researcher</b>	A researcher vetted in accordance with Article 40 (8) of Regulation (EU) 2022/2065.	A

Sources used:

A - Delegated Regulations Article 2

B - ISAE 3000 (Revised), *Assurance Engagements Other than Audits or Reviews of Historical Financial Information*

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