



Internal Revenue Service

MEMORANDUM

Date: 12/19/2006

OMB NO. 1545-1432

To: Michael Robinson
IT Policy and Management Office

From: Glenn P. Kirkland
IRS Reports Clearance Officer SE:W:CAR:MP:T:T:SP

Subject: IRS Submission for OMB Review

Attached is a submission for: Voluntary Customer Surveys to
Implement EO-12862 (06-026).

Approval is needed by: January 4, 2007.

Received by _____ on ___/___/___.

Date sent to OMB ___/___/___.

Please sign the duplicate copy of this memo and return to us.

1545-1432

Note to: Glenn P. Kirkland
IRS Reports Clearance Office
Tax Forms and Publication SE:W:CAR:MP:T:T:SP

From: Kevin Cecco
Chief, Statistical Support Section
Statistics of Income RAS:S:S:S

Subject: OMB Approval Request W&I CC Exam
Study, 06-26

Attached is the documentation needed by the Office of Management and Budget for W&I CC Exam Study-06-026.
The total estimated burden for this study is 212 hours.

If you have any questions regarding this project, please direct them to me at (202) 874-0464.

Attachments:
Cover Memorandum to OMB
OMB Form 83-C
Clearance Request
Attachments
Questionnaire

NOTE TO THE REVIEWER OF: OMB Clearance # 1545-1432

From: Kevin Cecco
Chief, Statistical Support Section
Statistics of Income RAS:S:S:S

Subject: OMB Approval Request for W&I CC Exan Study, 06-026

Please accept the enclosed materials for approval under the OMB Clearance package 1545-1432, "Customer Satisfaction". In accordance with our agreement with OMB, I am submitting a brief description of the study and the materials to be used in the study at least two weeks in advance of the start of the study.

The total estimated burden for this study is 212 hours.

If there are any questions regarding this project, please direct them to me at (202) 874-0464.

**PAPERWORK REDUCTION ACT
CHANGE WORKSHEET**

| | | |
|--|-----------------------|--|
| Agency/Subagency Department of the Treasury Internal Revenue Service | | OMB Control Number 1 5 4 5 - 1 4 3 2 |
| <i>Enter only items that change</i> | | |
| | Current Record | New Record |
| Agency form number(s) Cognitive and Psychological Research | | 06- 026 |
| Annual reporting and recordkeeping hour burden | | |
| Number of respondents | | |
| Total annual responses | | |
| Percent of these responses collected electronically | % | % |
| Total annual hours | | |
| Difference | | |
| Explanation of difference | | |
| Program Change | | |
| Adjustment | | |
| Annual reporting and recordkeeping cost burden (in thousands of dollars) | | |
| Total annualized Capital/Startup costs | | |
| Total annual costs (O&M) | | |
| Total annualized cost requested | | |
| Difference | | |
| Explanation of difference | | |
| Program change | | |
| Adjustment | | |
| Other Change** | | |
| <i>Shun Patel 12/20/06</i> | | |
| Signature of Senior Official or designee: | Date: | For OIRA Use |
| | | _____ _____ _____ |

**This form cannot be used to extend an expiration date.
OMB 83-C

**OMB SUPPORTING STATEMENT FOR
COMPLIANCE CENTER EXAMINATION – CY07
TO MEASURE CUSTOMER SATISFACTION
IRS, WAGE AND INVESTMENT DIVISION
TIRNO-05-Z-00014**

Introduction

IRS has replaced its traditional measures of accomplishment with a balanced measurement system consisting of business results, customer satisfaction, and employee satisfaction. The Compliance Center Examination section within the Compliance Operating Unit (OU) of Wage and Investment will be responsible for responding to customer technical and account inquiries, resolving customer account issues, providing account settlement (payment options), and working related issues. As an important customer interface for Wage & Investment, Compliance Center Examination will need feedback from customers to continuously improve its operations. This initiative is part of the Service-wide effort to establish a system of balanced organizational performance measures mandated by the IRS Restructuring and Reform Act of 1998. This is also a result of Executive Order 12862, which requires all government agencies to survey their customers and incorporate customer preferences in their process improvement efforts.

The key goals of the survey are to track customer satisfaction at the five Wage and Investment Compliance Center Examination (CC Exam) sites and nationwide and to identify operational improvements.

Customer Satisfaction Survey

The customer satisfaction survey questionnaire is attached. Completion of the survey is expected to take approximately three minutes. The objective of the survey will be to gauge customer expectations and perceptions about the CC Exam process. The questionnaire is based on the vendor's Net Impression methodology, which asks respondents to evaluate various aspects of their experience and to provide an overall summary evaluation. The questionnaire was developed based on inputs from a focus group with customers who had a recent closed case with Compliance Center Examination. The results should facilitate more effective management of W&I CC Exam by:

- Providing insight from the customer's perspective about possible improvements.
- Providing useful input for program evaluation and execution at the programmatic and field office level of service delivery.

The survey will include several rating questions evaluating service delivery during the CC Exam process as well as several demographic items. In addition, ample space will be provided for suggestions for improvement.

Survey scoring for this contract will be based on the Customer Satisfaction Survey Score response average to the keystone question – "How would you rate your overall experience with the way your case was handled?" Questions will utilize a 5-point rating scale, with 1 being very dissatisfied and 5

being very satisfied. All survey responses generated will be confidential. The vendor shall ensure that taxpayers responding to the survey are guaranteed anonymity.

Design and Methodology

The sample universe will consist of taxpayers with closed CC Exam cases controlled in the AIMS database beginning with cases closed in January 2007. The vendor will select 3,333 cases per year and target 2,000 completed interviews per year (400 per site per quarter).

The vendor will administer the survey by mail on a monthly basis between January 2007 and December 2007. Standard procedures will be used in order to obtain the highest response rate possible for the mail survey. These will include: 1) an advance letter about the survey; 2) the initial survey with a cover letter; 3) a postcard reminder; and, 4) a second letter and survey to non-respondents.

The vendor will, on a semi-annual basis, summarize the quantitative ratings and produce a national report showing customer satisfaction scores on all CC Exam survey items and overall improvement priorities for the function. The vendor will deliver national reports each semi-annual period. On an annual basis, the vendor will prepare five site reports containing individual site scores on each of the survey items and improvement priorities for the individual sites. The vendor will include any relevant database variables in the analysis and will weight the survey responses as necessary to reflect accurately the entire customer base.

Reports of survey findings will be distributed to the IRS semi-annually. Each report will be delivered approximately seven weeks after the survey cut-off date for the quarter.

Evaluation

For the reports, the vendor will use basic and advanced statistical techniques including, but not limited to, analysis of variance and the prioritization of improvement priorities using vendor's established technique.

- Survey counts and overall response rates.
- The overall level of customer satisfaction with services provided by CC Exam
- The averages and frequencies for all rating questions.
- The differences in satisfaction ratings and attitudes across customer segments.
- Which areas of service, in priority order, CC Exam should focus its resources to improve overall satisfaction.
- Cross tabulations of variables for the customer surveys.
- Analysis of the relationship between survey responses.
- Analysis of the one open-ended question for improvement suggestions. The vendor shall transcribe and code the responses to the open-ended question and will conduct content analysis in order to provide CC Exam with the top ten categories of concern.

Estimates of the Burden of Data Collection

The CC Exam survey has been designed to minimize burden on the taxpayer. The time that a respondent takes to complete the survey has been carefully considered and only the most important areas are being surveyed. The average time of survey completion is expected to be 5 minutes, plus 2 minutes to read the pre-notification letter. This is based on the questionnaire consisting of 16 satisfaction questions and 7 demographic questions, plus one open-ended question on suggestions for improvement. The questions are generally one sentence in structure and on an elementary concept level.

We have made every attempt in designing this survey to maximize response rate.

Using the response rate of 60 percent, the total burden in hours is estimated to be 167 hours (2,000 surveys x 3 minutes / 60 minutes + 2,000 pre-notification letters x 2 minutes / 60 minutes).

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For non-respondents, the total number of burden hours is estimated to be 44 hours (1,333 pre-notification letters x 2 minutes/ 60 minutes).

The grand total burden is estimated to be 212 hours for the year.

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Privacy, Security, Disclosure and Confidentiality

All participants will be subject to the provisions of the Taxpayer Bill of Rights II during this study and the contractor will ensure that all participants are treated fairly and appropriately.

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The security of the data used in this project and the privacy of taxpayers will be carefully safeguarded at all times. Security requirements are based on the Computer Security Act of 1987 and Office of Management and Budget Circular A-130, Appendices A & B. Physical security measures include a locked, secure office. Notes are stored in locked cabinets or shredded. Data security at the C-2 level is accomplished via the Windows NT operating system. Systems are password protected, users profiled for authorized use, and individual audit trails generated and reviewed periodically.

The IRS will apply and meet fair information and record-keeping practices to ensure privacy protection of all taxpayers. This includes criteria for disclosure—laid out in the Privacy Act of 1974, the Freedom of Information Act, and Section 6103 of the Internal Revenue Code—all of which provide for the protection of taxpayer information as well as its release to authorized recipients.

The survey will not contain tax return or taxpayer information. Survey participants will not be identified in any of the documents or files used for this project. We will limit and control the amount of information we collect to those items that are necessary to accomplish the research questions. We will carefully safeguard the security of data utilized as well as the privacy of the survey respondents. We will apply the fair information and record-keeping practices to ensure protection of all survey respondents. The criterion for disclosure laid out in the Privacy Act, the Freedom of Information Act, and section 6103 of the Internal Revenue Code provides for the protection of information as well as its releases to authorized recipients.

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Other Information

The estimated cost of this study is \$79,421.

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The following information will be provided to the Human Capital Office within 60 days after the close of the survey data collection operations:

- Findings: A brief summary of significant findings that were evidenced in the results.
- Actions taken or lessons learned: A brief summary of any action taken or lessons learned as a result of the findings.
- Number of completed questionnaires

Statistical Contact

For questions regarding the study or questionnaire design or the statistical methodology, contact:

Elaine Lowitz
Pacific Consulting Group
399 Sherman Avenue, Suite 1
Palo Alto, California 94306
(650) 327-8108



DEPARTMENT OF THE TREASURY
INTERNAL REVENUE SERVICE
ATLANTA, GA 30308

WAGE AND INVESTMENT DIVISION

34051060127898200601

March 22, 2006

13257 0000001 *****MIXED AADC 166

JOHN Q & MARY Q SAMPLE

SAMPLE ADDRESS 1

SAMPLE ADDRESS 2

SAMPLE ADDRESS 3

SAMPLE ADDRESS 4

SAMPLE ADDRESS 5

ANYTOWN, US 12345-6789



Dear JOHN Q & MARY Q SAMPLE:

I need your help with an important initiative I am undertaking to improve our service to America's taxpayers. I want to get feedback from taxpayers like you who have had a recent correspondence audit conducted by the Internal Revenue Service.

In a few days, you will receive a questionnaire asking your opinions about working with the IRS to resolve the issues raised in your audit. Please direct it to the person in your household who had the most contact with the IRS on this matter. The questionnaire should take less than 5 minutes to complete. Your answers will be combined with others to give us an evaluation on customer satisfaction with IRS service.

To keep all replies confidential, we have asked an independent research company to administer the survey. The survey processing center employees will process the questionnaires and report only statistical totals to us.

I am committed to improving IRS service to every taxpayer. Please help me in this effort by completing and returning the questionnaire as soon as possible. If you do not receive a questionnaire, please contact our Survey Processing Center at 1-866-377-8208.

Sincerely yours,

Jim Grimes
Director, Compliance
Wage and Investment Division

Survey Processing Center

PO Box 344
Claysburg, PA 16625 USA

April 3, 2006

13257 000001 *****MIXED AADC 166
JOHN Q & MARY Q SAMPLE
SAMPLE ADDRESS 1
SAMPLE ADDRESS 2
SAMPLE ADDRESS 3
SAMPLE ADDRESS 4
SAMPLE ADDRESS 5
ANYTOWN, US 12345-6789



Dear JOHN Q & MARY Q SAMPLE:

A few days ago you received a letter from Jim Grimes, Director, Compliance, Wage and Investment Division, asking for your help with an important research project.

We are administering a nationwide survey among people who have had contact with the Internal Revenue Service (IRS). We want to know your opinions about your recent correspondence audit conducted by the IRS. Your responses are critical to the accuracy of this research.

We are sending questionnaires to a random sample of taxpayers who have had such audits. All responses are confidential, and your participation is voluntary. We will group your responses with others, so that no individual reply can be traced back to any one person.

The questionnaire is quite brief and should take less than five minutes to complete. Please use the postage-paid reply envelope to return your completed questionnaire. If you have any questions or concerns, please feel free to call the Survey Helpline at 1-866-377-8208.

The IRS is committed to improving its performance and service to the American public. A first step in this process is to gather reliable information from those who have had contact with IRS services and employees. Your honest opinions will help bring about this improvement.

Sincerely,

A handwritten signature in black ink that reads "Peter Webb".

Dr. Peter Webb
Project Director

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IRS WAGE AND INVESTMENT CUSTOMER SATISFACTION SURVEY COMPLIANCE CENTER EXAM

The IRS is trying to improve its service to the public. You can help in this important mission by answering the questions below. This voluntary survey should take less than five minutes to complete. When completing the survey, please mark your responses with an 'x' using a blue or black pen like this example **X**. Do not mark outside of the response area like this example **X**. Your responses will be kept completely confidential. If you have any questions about this survey, you may call The Survey Processing Center at 1-866-377-8208.

1 The questions that follow ask your opinion regarding how the IRS handled your most recent audit. For each question, *regardless of whether you agree or disagree with the final outcome*, please indicate your opinion by choosing a number from 1 to 5, where 1 means "Very Dissatisfied" and 5 means "Very Satisfied."

| | Very Dissatisfied | | | | Very Satisfied | Don't know/Not applicable |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|---------------------------|
| | 1 | 2 | 3 | 4 | 5 | |
| | ▼ | ▼ | ▼ | ▼ | ▼ | ▼ |
| a. Explanation of why your tax return was being audited. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Explanation of what records you needed to send in. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Ease of understanding the letter you received with the examination report. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Ease of understanding the examination report you received. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e. Ease of understanding the request for information the IRS sent to you. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| f. Ease of collecting the information requested by the IRS. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| g. Ease of using the automated phone system to get help. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| h. How long you had to wait to talk to an IRS representative by phone. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| i. Getting through to the right employee by phone. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| j. Courtesy and professionalism of IRS employees. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| k. Knowledge of IRS employees. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| l. Time you were given to respond to the IRS. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| m. Consideration given to the information you sent to the IRS. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| n. Keeping you informed of the status of your case. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| o. Length of the audit process, from start to finish. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| p. Amount of time you had to spend on this audit. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| q. Explanation of why adjustments were made. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| r. Fairness of treatment by the IRS. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

2 Regardless of whether you agree or disagree with the final outcome, how would you rate your overall satisfaction with the way your audit was handled?.....

| Very Dissatisfied | | | | Very Satisfied | Don't know/Not applicable |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|---------------------------|
| 1 | 2 | 3 | 4 | 5 | |
| ▼ | ▼ | ▼ | ▼ | ▼ | ▼ |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

3 Which of the following methods did you use to contact the IRS throughout the Examination Process? (Mark all that apply)

- None
- Calling the IRS Toll-Free Customer Service number
- Calling the IRS Toll-Free Exam number listed on the letter you received
- Calling a local IRS office
- Visiting a local IRS office
- Visiting the IRS website
- Mailing information to the IRS
- Using a taxpayer representative
- Other (specify) _____



4 Which of the following methods do you prefer to use when contacting the IRS? (Mark all that apply)

- Calling the IRS Toll-Free Customer Service number
- Calling the IRS Toll-Free Exam number listed on the letter you received
- Calling a local IRS office
- Visiting a local IRS office
- Visiting the IRS website
- Mailing information to the IRS
- Using a taxpayer representative
- Other (specify) _____

5 Prior to the examination, what was your expectation of the length of time in months for the examination to be completed? (Write number of months)

_____ Months

6 Who was the main person who prepared your taxes? (Mark only one)

- You (yourself)
- Professional tax preparer
- Friend or relative
- IRS Taxpayer Assistance Center (TAC) employee
- Volunteer at VITA or TCE sites
- Other

7 Did you claim Earned Income Tax Credit (EITC)?

- No
- Yes

8 Which of the following statements best describes you? (Mark only one)

- I am the taxpayer
- I am a tax professional who represented the taxpayer
- I am someone else who represented the taxpayer

If you have been unable to resolve any specific problems with your tax matter through the normal IRS channels, or now face a significant hardship due to the application of the tax law, we encourage you to contact the Taxpayer Advocate Service at 1-877-777-4778.

9 Use this space for comments, or suggestions for improvement.

Paperwork Reduction Act Notice

The Paperwork Reduction Act requires that the IRS display an OMB control number on all public information requests. The OMB Control Number for this study is 1545-1432. Also, if you have any comments regarding the time estimates associated with this study or suggestions on making this process simpler, please write to the: Internal Revenue Service, Tax Products Coordinating Committee, SE:W:CAR:MP:T:T:SP, 1111 Constitution Ave. NW, Washington, DC 20224.

Thank you for completing the survey.

Please return the questionnaire by mail, using the enclosed business return envelope.

Appendix H

Compliance Services Collection Operation W&I Questionnaire

CSCO W&I Questionnaire—Front



OMB • 1545-1433

IRS WAGE AND INVESTMENT CUSTOMER SATISFACTION SURVEY COMPLIANCE SERVICES COLLECTION

The IRS is trying to improve its service to the public. You can help in this important mission by answering the questions below. This voluntary survey should take less than five minutes to complete. When completing this survey, please mark your responses with an "X" using a blue or black pen like this example . Do not mark outside of the response area like this example . Your responses will be kept completely confidential. If you have any questions about this survey, you may call The Survey Processing Center at 1-866-377-8208.

The questions that follow ask your opinion regarding how the IRS handled your most recent collection process. For each question, regardless of whether you agree or disagree with the final outcome, please indicate your opinion by choosing a number from 1 to 5, where 1 means "Very Dissatisfied" and 5 means "Very Satisfied." If the question does not apply to your situation, mark the box labeled "Don't Know/Not Applicable."


Please consider only the written notices you received from the IRS when answering the following questions.

| | Very Dissatisfied | | | | | Very Satisfied | | | | | Don't Know/Not Applicable | | | | |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|---------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| | 1 | 2 | 3 | 4 | 5 | 1 | 2 | 3 | 4 | 5 | 1 | 2 | 3 | 4 | 5 |
| 1 How satisfied are you with the: | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| a. Ease of obtaining the information you needed from the IRS | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Explanation of AIA adjustments were made to your account | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Length of time you were given to respond to the IRS if a response was requested | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Consideration given to the information you submitted to the IRS to finish | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e. Length of the correspondence collection process, from when you first wrote the IRS to finish | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| f. Follow through of the IRS on what they said they were going to do | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| g. Understanding that you have payment options | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| h. Resolving this matter through written correspondence | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| i. Awareness of phone option to inquire about this matter | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| j. Fairness of treatment by the IRS | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| k. Ease of understanding the notice you received in response to your written inquiry | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| l. Accuracy of information provided in response to your written inquiry | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| m. Time IRS took to respond to your written inquiry | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2 Regardless of whether you agree or disagree with the final outcome, how would you rate your overall satisfaction with the way your correspondence collection issue was handled? <i>If you marked 2, 3 or 4 for the question, please fill in what could have been done differently to improve the way the correspondence collection process is handled.</i> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

3a Did you request any information from the IRS?
 Yes
 No (Skip to Question 6)

3b If yes, how did you request this information?
 Mail
 Email
 Phone
 In person

CSCO W&I Questionnaire—Back



4a Did you receive the information you requested?
 Yes
 No (Skip to Question 6)

4b If yes, how many days elapsed between the time you submitted this inquiry and the time you received a reply?
 Right away (over the phone or in person)
 Less than 15 days
 15-29 days
 30-44 days
 45-60 days
 Over 60 days
 Did not receive a reply

5 Was this information helpful to you?
 Yes
 No
 If no, what other information did you need?

6 Are you?
 The taxpayer
 A tax professional who represented the taxpayer
 Someone else who represented the taxpayer

7 Please mark the topic that best describes your main issue?
 Balance due
 Return delinquency
 Both balance due and return delinquency
 Other

8 Have you contacted the IRS about this issue before?
 Yes
 No

9 Was your issue with the IRS completely resolved?
 Yes
 No
 Not sure
 If your issue is not resolved, or if you are unsure, why do you believe your issue has not been completely resolved?

10 Use this space for additional comments or suggestions for improvement.

If you have been unable to resolve any specific problems with your tax matter through the normal IRS channels, or now face a significant hardship due to the application of the tax law, we encourage you to contact the Taxpayer Advocate Service at 1-877-777-4778.

Thank you for completing the survey.
Please return the questionnaire by mail, using the enclosed business return envelope.

Payment Reduction Act Notice
 The Payment Reduction Act requires that the IRS display an OMB control number on all public information requests. The OMB Control Number for this study is 1545-0047. Also, if you have any comments regarding the time estimates associated with this study, or suggestions on making this process simpler, please write them on the Revenue Service Tax Public Commenting Card at C.I.R. 402-7-139, 1111 Constitution Ave. N.E., Washington, DC 20224.

Form 13257J (Rev. 11-2004) Cat. No. 31463N Department of the Treasury Internal Revenue Service

Survey Processing Center
Post Office Box 344
Claysburg, PA 16625-0344

Do We Have Your Input Yet?

Recently, you received a questionnaire asking your opinions about the service you received from the IRS in a recent contact. If you have already completed and returned the questionnaire, please accept our sincere thanks. If not, please take a few minutes to complete it and return it today. We want to be sure we have your opinions and suggestions.

If you did not receive the questionnaire, or it got misplaced, please call 1-866-377-8208.

Dr. Peter H. Webb
Project Director

Survey Processing Center

PO Box 344
Claysburg, PA 16625 USA

March 15, 2006

13257 0000001 *****MIXED AADC 166
JOHN Q & MARY Q SAMPLE
SAMPLE ADDRESS 1
SAMPLE ADDRESS 2
SAMPLE ADDRESS 3
SAMPLE ADDRESS 4
SAMPLE ADDRESS 5
ANYTOWN, US 12345-6789



Dear JOHN Q & MARY Q SAMPLE:

A few days ago you received a survey from Jim Grimes, Director, Compliance, Wage and Investment Division, asking for your help with an important research project. If you have already completed the survey, thank you. If you have not already done so, please take a few minutes to fill in your responses.

We are administering a nationwide survey among people who have had contact with the Internal Revenue Service (IRS). We want to know your opinions about your recent correspondence audit conducted by the IRS. Your responses are critical to the accuracy of this research.

We are sending questionnaires to a random sample of taxpayers who have had such audits. All responses are confidential, and your participation is voluntary. We will group your responses with others, so that no individual reply can be traced back to any one person.

The questionnaire is quite brief and should take less than five minutes to complete. Please use the postage-paid reply envelope to return your completed questionnaire. If you have any questions or concerns, please feel free to call the Survey Helpline at 1-866-377-8208.

The IRS is committed to improving its performance and service to the American public. A first step in this process is to gather reliable information from those who have had contact with IRS services and employees. Your honest opinions will help bring about this improvement.

Sincerely,

A handwritten signature in black ink that reads "Peter Webb".

Dr. Peter Webb
Project Director



IRS WAGE AND INVESTMENT CUSTOMER SATISFACTION SURVEY COMPLIANCE CENTER EXAM

The IRS is trying to improve its service to the public. You can help in this important mission by answering the questions below. This voluntary survey should take less than five minutes to complete. When completing the survey, please mark your responses with an 'x' using a blue or black pen like this example **X**. Do not mark outside of the response area like this example **X**. Your responses will be kept completely confidential. If you have any questions about this survey, you may call The Survey Processing Center at 1-866-377-8208.

1 The questions that follow ask your opinion regarding how the IRS handled your most recent audit. For each question, *regardless of whether you agree or disagree with the final outcome*, please indicate your opinion by choosing a number from 1 to 5, where 1 means "Very Dissatisfied" and 5 means "Very Satisfied."

| | Very Dissatisfied | | | | Very Satisfied | Don't know/Not applicable |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|---------------------------|
| | 1 | 2 | 3 | 4 | 5 | |
| a. Explanation of why your tax return was being audited. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Explanation of what records you needed to send in. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Ease of understanding the letter you received with the examination report. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Ease of understanding the examination report you received. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e. Ease of understanding the request for information the IRS sent to you. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| f. Ease of collecting the information requested by the IRS. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| g. Ease of using the automated phone system to get help. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| h. How long you had to wait to talk to an IRS representative by phone. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| i. Getting through to the right employee by phone. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| j. Courtesy and professionalism of IRS employees. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| k. Knowledge of IRS employees. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| l. Time you were given to respond to the IRS. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| m. Consideration given to the information you sent to the IRS. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| n. Keeping you informed of the status of your case. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| o. Length of the audit process, from start to finish. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| p. Amount of time you had to spend on this audit. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| q. Explanation of why adjustments were made. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| r. Fairness of treatment by the IRS. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

2 Regardless of whether you agree or disagree with the final outcome, how would you rate your overall satisfaction with the way your audit was handled?.....

| Very Dissatisfied | | | | Very Satisfied | Don't know/Not applicable |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|---------------------------|
| 1 | 2 | 3 | 4 | 5 | |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

3 Which of the following methods did you use to contact the IRS throughout the Examination Process? (Mark all that apply)

- None
- Calling the IRS Toll-Free Customer Service number
- Calling the IRS Toll-Free Exam number listed on the letter you received
- Calling a local IRS office
- Visiting a local IRS office
- Visiting the IRS website
- Mailing information to the IRS
- Using a taxpayer representative
- Other (specify) _____



4 Which of the following methods do you prefer to use when contacting the IRS? (Mark all that apply)

- Calling the IRS Toll-Free Customer Service number
- Calling the IRS Toll-Free Exam number listed on the letter you received
- Calling a local IRS office
- Visiting a local IRS office
- Visiting the IRS website
- Mailing information to the IRS
- Using a taxpayer representative
- Other (specify) _____

5 Prior to the examination, what was your expectation of the length of time in months for the examination to be completed? (Write number of months)

_____ Months

6 Who was the main person who prepared your taxes? (Mark only one)

- You (yourself)
- Professional tax preparer
- Friend or relative
- IRS Taxpayer Assistance Center (TAC) employee
- Volunteer at VITA or TCE sites
- Other

7 Did you claim Earned Income Tax Credit (EITC)?

- No
- Yes

8 Which of the following statements best describes you? (Mark only one)

- I am the taxpayer
- I am a tax professional who represented the taxpayer
- I am someone else who represented the taxpayer

If you have been unable to resolve any specific problems with your tax matter through the normal IRS channels, or now face a significant hardship due to the application of the tax law, we encourage you to contact the Taxpayer Advocate Service at 1-877-777-4778.

9 Use this space for comments, or suggestions for improvement.

Paperwork Reduction Act Notice

The Paperwork Reduction Act requires that the IRS display an OMB control number on all public information requests. The OMB Control Number for this study is 1545-1432. Also, if you have any comments regarding the time estimates associated with this study or suggestions on making this process simpler, please write to the: Internal Revenue Service, Tax Products Coordinating Committee, SF:W-CAR:MP:T:T:SP, 1111 Constitution Ave. NW, Washington, DC 20224.

Thank you for completing the survey.

Please return the questionnaire by mail, using the enclosed business return envelope.