

IRS CUSTOMER SATISFACTION SURVEY

[INSERT CUSTOMER SEGMENT HERE]

You can help the IRS improve its service to the public by answering the questions below. This voluntary survey takes less than 8 minutes to complete. Your responses will be confidential and only aggregate information will be provided to the IRS.

Instructions for marking survey here.

The following questions ask your opinion regarding your most recent IRS [customer segment] examination. For each question, *regardless of whether you agree or disagree with the final outcome*, please mark the appropriate box on a scale (where 1 means “Very Dissatisfied” and 7 means “Very Satisfied”) or next to the response that best applies to you.

OVERALL SATISFACTION

	Very Dissatisfied						Very Satisfied	Don't Know Not Applicable
	1	2	3	4	5	6	7	□
1. Regardless of whether you agree or disagree with the final outcome, how would you rate your overall satisfaction with the way your case was handled by the IRS?	□	□	□	□	□	□	□	□
2. Overall, how satisfied are you with the length of the examination process, from first notice through final resolution?	□	□	□	□	□	□	□	□
3. Overall, how satisfied are you with how well the IRS communicated with you throughout the examination process?	□	□	□	□	□	□	□	□
4. Overall, how satisfied are you with the IRS agent assigned to your case?	□	□	□	□	□	□	□	□
5. How did your opinion of the IRS change as a result of this examination?								
<input type="checkbox"/> Better								
<input type="checkbox"/> Stayed the same								
<input type="checkbox"/> Worse								

NOTIFICATION LETTER/CALL

How satisfied are you with...

6. How well the notification letter communicated the examination process to you?	□	□	□	□	□	□	□	□
7. The explanation of what would be required of you during the initial meeting?	□	□	□	□	□	□	□	□
8. The time given you to prepare for the initial meeting?	□	□	□	□	□	□	□	□
9. The amount of time you had to spend preparing for the initial meeting?	□	□	□	□	□	□	□	□
10. Did the IRS agent contact you by telephone in addition to sending a notification letter?								
<input type="checkbox"/> Yes								
<input type="checkbox"/> No								

INITIAL MEETING

For this section please respond based on your interaction with the IRS agent at the initial meeting.

	Very Dissatisfied					Very Satisfied		Don't Know Not Applicable
	1	2	3	4	5	6	7	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Overall, how satisfied are you with the initial meeting?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How satisfied are you with...								
12. The courtesy of the IRS agent?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. The knowledge of the IRS agent?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. The explanation of the examination process?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. How well the IRS agent listened to your concerns?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. The explanation of your taxpayer rights?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. How thoroughly the IRS agent answered your questions?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18. The amount of information you were asked to provide during the initial meeting?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. The reasonableness of the IRS agent's requests during the initial meeting?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SUBSEQUENT INTERACTION(S) WITH THE IRS

Please complete this section only if an IRS agent asked you to provide additional information after the initial meeting.

	Very Dissatisfied					Very Satisfied		Don't Know Not Applicable
	1	2	3	4	5	6	7	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How satisfied are you with...								
20. The consideration given to the information you provided previously (e.g., during the initial meeting)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. The description of the additional information the IRS needed to complete the examination process?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22. The explanation of why additional information 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"/>
23. The time given you to respond to additional IRS request(s)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24. The amount of time you had to spend responding to IRS request(s) for additional information?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25. Communications about the status of your examination after you had provided the requested information?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
26. The timeliness of the IRS agent in responding to your inquiries?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
27. How many requests for additional information did you have following your initial meeting?								
<input type="checkbox"/> None								
<input type="checkbox"/> One								
<input type="checkbox"/> Two								
<input type="checkbox"/> Three or more								

FINAL RESOLUTION

How satisfied are you with...

<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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

28. The ease of understanding the examination letter/report you received?

29. The explanation of why adjustments were made?

OTHER INFORMATION

30. How many total people are employed by the **organization** for which this examination was conducted? *Please continue on next page*

- Sole Proprietor
- 1–9
- 10–99
- 100–499
- 500–999
- 1,000 or more

31. insert new customer demographic item

32. For this examination, were you . . .

- An employee/officer of the organization [*skip to Question 34*]?
- A designated third-party representative/power of attorney (POA)?

33. If you are a designated third-party representative/power of attorney, how consistent was the IRS in its handling of this examination compared with other examinations in which you have participated in the past year?

Very Inconsistent	1	2	3	4	5	6	7	Very Consistent	Don't Know Not Applicable
	□	□	□	□	□	□	□		□
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>

34. Did you visit the IRS website (www.irs.gov/ge) for assistance or information during the examination process?

- Yes
- No

COMMENTS

35. If you have any suggestions for how the IRS can improve its service, or any other comments, please provide them below.

If you have any questions about this survey, you may call the Survey Processing Center at 1-866-377-8208.

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

777-4778.

Paperwork Reduction Act Notice

The Paperwork Reduction Act requires that the IRS display 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: 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 this questionnaire by mail using the enclosed business return envelope.**