

## Appendix A – Pre-Notification Letter



DEPARTMENT OF THE TREASURY  
INTERNAL REVENUE SERVICE  
WASHINGTON, D.C. 20224

SMALL BUSINESS/SELF-EMPLOYED DIVISION

Dear Taxpayer:

The Internal Revenue Service wants to improve customer relations through the way we conduct audits through correspondence with taxpayers. The Small Business and Self-Employed (SBSE) operating division of the IRS is conducting a survey to obtain your feedback on a number of topics. Your feedback will help the IRS better serve you and the small business taxpayer.

You have been randomly selected to participate in this survey. You will be receiving a survey by mail within 10 days and you will also receive a **postage paid** return envelope to facilitate your response.

While your participation is strictly on a volunteer basis, we hope that you will provide us with your feedback.

**Your identity and answers will remain anonymous and used only for the purposes of improving customer service. Any and all information you disclose about your participation or non-participation in the audit, or any other personal tax return information you disclose, is completely voluntary on your part, as a condition of participating in this survey.**

The Paperwork Reduction Act (PRA) requires that the IRS display an OMB control number on all public information requests. The OMB Approval 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

## Appendix B – Cover letter for Survey



DEPARTMENT OF THE TREASURY  
INTERNAL REVENUE SERVICE  
WASHINGTON, D.C. 20224

SMALL BUSINESS / SELF-EMPLOYED DIVISION

Dear Taxpayer:

Several days ago, we sent you a letter stating that you were selected to participate in a survey administered by the Internal Revenue Service.

The purpose of this survey is to study the elements that can potentially improve the IRS customer relations through the way we conduct audits with taxpayers through correspondence.

Enclosed is the nine-statement survey that also includes one question soliciting your response. Please take a couple of minutes to answer the survey and return it within 10 days using the envelope provided. **Postage is prepaid.** Or if you prefer, you can fax your survey response to (949)389-5015. This fax machine is located at the IRS office in Laguna Niguel, CA.

While your participation is strictly on a volunteer basis, we hope that you will provide us with your feedback.

**Your identity and answers will remain anonymous and used only for the purposes of improving customer service. Any and all information you disclose about your participation or non-participation in the audit, or any other personal tax return information you disclose, is completely voluntary on your part, as a condition of participating in this survey.**

Thank you for your participation.

## Appendix C – Thank you and Reminder Letter



DEPARTMENT OF THE TREASURY  
INTERNAL REVENUE SERVICE  
WASHINGTON, D.C. 20224

SMALL BUSINESS/SELF-EMPLOYED DIVISION

Dear Taxpayer:

Several days ago, we sent you a survey administered by the Internal Revenue Service.

Thank you for the time and effort you put to answer this survey.

If you have not yet responded to the survey, please take a couple of minutes to answer the questions and return it within 10 days using the envelope provided. **Postage is prepaid.** Or if you prefer, you can fax your survey response to (949)389-5015. This fax machine is located at the IRS office in Laguna Niguel, CA.

The purpose of this survey is, as mentioned before, to study the elements that can potentially improve the IRS customer relations through the way we conduct audits with taxpayers through correspondence. And through improved procedures, we could ultimately reduce taxpayer burden.

While your participation is strictly on a volunteer basis, we hope that you will provide us with your feedback.

**Your identity and answers will remain anonymous and used only for the purposes of improving customer service. Any and all information you disclose about your participation or non-participation in the audit, or any other personal tax return information you disclose, is completely voluntary on your part, as a condition of participating in this survey.**

Your cooperation and feedback is highly appreciated.

## Appendix D – Final Letter



DEPARTMENT OF THE TREASURY  
INTERNAL REVENUE SERVICE  
WASHINGTON, D.C. 20224

SMALL BUSINESS / SELF-EMPLOYED DIVISION

Dear Taxpayer:

As mentioned in our previous correspondence, the IRS is conducting a survey to study the elements that can potentially improve the IRS customer relations through the way we conduct audits with taxpayers through correspondence.

We asked you to help us achieve this mission by providing your opinion of the nine statements and answering one question on the survey that we previously sent you.

As of today, we have not received your response to the survey. We are enclosing another copy of the survey along with a **postage paid** return envelope. Or if you prefer, you can fax your survey response to (949)389-5015. This fax machine is located at the IRS office in Laguna Niguel, CA.

While your participation is strictly on a volunteer basis, we hope that you will provide us with your feedback.

As mentioned before, **your identity and answers will remain anonymous and used only for the purposes of improving customer service. Any and all information you disclose about your participation or non-participation in the audit, or any other personal tax return information you disclose, is completely voluntary on your part, as a condition of participating in this survey.**

Thank you for your cooperation.

## Appendix E – Survey

Customer Satisfaction Survey – Month YYYY OMB Control #1545-1432

# SURVEY QUESTIONNAIRE

The IRS is trying to improve its service to the public. You can help in this important mission by answering the statements 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. Do not mark outside of the response area. Your responses will be kept completely anonymous. If you have any questions about this survey, you may call The Survey Administrator at 1-949-389-4985.

The statements that follow ask your opinion regarding how the IRS handled your initial correspondence audit that led to your request for an audit reconsideration. For each statement, regardless of whether you agreed or disagreed with the final outcome of the audit or the audit reconsideration, please indicate your opinion by choosing a number from 1 to 5 where 1 means “Very Dissatisfied,” 2 means “Dissatisfied,” 3 means “Neither Satisfied Nor Dissatisfied,” 4 means “Satisfied” and 5 means “Very Satisfied.”

	Very Dissatisfied		Neither Satisfied nor Dissatisfied		Very Satisfied
	1	2	3	4	5
	▼	▼	▼	▼	▼
1. Clarity of the audit notification you received in explaining what records you needed to send in.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Time given to you to respond to the IRS.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Reasonableness of the volume of the information you were asked to provide.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Reasonableness of the type of documents you were asked to provide.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Consideration given to the information you submitted.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Explanation of why adjustments were made.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Number of times you mailed documents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Length of time it took to complete the initial examination	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Ease of understanding audit process in advance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

10. Please identify by selecting one or more answer(s) below by placing an “X” in the appropriate boxes, the issues that you asked to be reconsidered after completion of initial audit.

- Filing Status
- Exemptions/Dependents Claimed
- Earned Income Credit
- Other Credits (Child Tax Credit, etc.)
- Wages, Salaries, Tips, etc.
- Other (please list)\_\_\_\_\_

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1111 Constitution Ave. NW  
Washington, DC 20224

**Thank you for completing the survey.**

**Please return the questionnaire by using the enclosed business return envelope.**