



IRS WAGE AND INVESTMENT CUSTOMER SATISFACTION SURVEY AUTOMATED UNDERREPORTER (AUR)

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 in 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.

1 The questions that follow ask your opinion regarding the discrepancy that was highlighted on your tax return. 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 |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| How would you rate the . . . | 1 | 2 | 3 | 4 | 5 |
| a. Ease of understanding the form notifying you of the discrepancy?..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>(If 1 or 2 rating):</i> Why did you give a dissatisfied rating for Ease of understanding the form notifying you of the discrepancy? | | | | | |
| | | | | | |
| b. Accuracy of the discrepancy amount?..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Completeness of information about the discrepancy?..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>(If 1 or 2 rating):</i> Why did you give a dissatisfied rating for Completeness of information about the discrepancy? | | | | | |
| | | | | | |
| d. Completeness of instructions for resolving the discrepancy?..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>(If 1 or 2 rating):</i> Why did you give a dissatisfied rating for Completeness of instructions for resolving the discrepancy? | | | | | |
| | | | | | |
| e. Flexibility in resolving the discrepancy?..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| f. Length of time it took to resolve the discrepancy?..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| g. Ease of understanding documents explaining the action taken on your account?..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| h. Length of time it took to hear from the IRS that you had a discrepancy?..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

2 Did you call the phone number listed in the AUR notice?

- Yes (CONTINUE BELOW) No (SKIP TO QUESTION 5)

How would you rate the . . .

| | | | | | |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| a. Usefulness of the automated telephone system?..... | 1 | | | | 5 |
| b. Length of time it took you to get through to an IRS employee?..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Completeness of information you received during this call?..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

3 What is the primary reason that you called the phone number listed in the AUR notice? *(Mark one response only)*

- To receive an explanation of the notice
- To receive general information (e.g. forms, status of case, etc.)
- To receive answers to my questions concerning my case
- To give the IRS additional information
- To request an extension of time to respond
- Other (specify)



4 Were you able to reach a representative when you called the phone number listed in the AUR notice?

Yes (CONTINUE BELOW) No (SKIP TO QUESTION 5)

How would you rate the . . .

| | Very Dissatisfied | | | | Very Satisfied |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| | 1 | 2 | 3 | 4 | 5 |
| a. Length of time it took to complete your call once you got through?..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Courtesy of the IRS representative?..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Knowledge of IRS representative?..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Ability of IRS representative to assist you in resolving your issue?..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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

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

6 Were you provided with documents explaining the actions taken on your account?

Yes No

7 Did you expect to receive documents explaining the actions taken on your account?

Yes No

8 If you had questions regarding your discrepancy, what method of contacting the IRS would you prefer? Please rank in order of importance from 1st to 5th, with 1st being the highest preference and 5th being the lowest preference.

(Mark only one under each preference)

| | Highest Preference | | | | Lowest Preference | |
|----------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--|
| | 1st | 2nd | 3rd | 4th | 5th | |
| Mail..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| Phone..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| In person..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| Fax..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| Email..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

9 Did you agree with the outcome of your discrepancy?

Yes
 No ➔
 Not sure

Why did you disagree? _____

10 Did you...?

Use a tax professional to assist you with resolving this discrepancy
 Represent yourself
 Both

Occasionally, we conduct additional in-depth research. Research participants may receive a small monetary incentive to participate depending on the survey. If you are interested in participating in future research, please provide us with your telephone number, best time of day to call and your email address (if available). This information will be confidential and used only for the purpose of survey research.

Telephone #: _____ Best time to call: _____
Email address: _____

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.

11 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.