

### IVR Wage and Investment Survey

*(For IRS administrator)* Thank you for. 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 9 minutes to complete. Your responses will be kept completely anonymous to the IRS. If you have any questions about this survey, you may call the Survey Helpline at 1-866-960-7897.

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 answer by checking the box that best represents your opinion.

Please enter your five-digit site code.

A. Please enter the resolution of this call from your perspective.

For completely resolved, press 1

For partially resolved, press 2

For not resolved, press 3

B. Please enter the issue that the taxpayer called about.

Status of exam, press 1

Check if IRS received information mailed or faxed in, press 2

EITC Issue, press 3

Discretionary Issue, press 4

Recon, press 5

Explanation of letter received, press 6

Closed case, press 7

Other, press 8

Thank you. Please transfer caller now

*(For Respondent)*

Press the star key when you are ready to take the survey

### Quality of Service Section

Caller hears: Thank you for participating in this voluntary survey. This survey allows taxpayers to provide anonymous and private information to assist the IRS in improving its services. It will take less than 8 minutes to complete. During this survey you will be asked to rate the service you received from the IRS during this call.

Please rate the following questions using the following scale:

If you were very satisfied, press 5

For somewhat satisfied, press 4

For neither satisfied nor dissatisfied, press 3  
For somewhat dissatisfied, press 2  
For very dissatisfied, press 1  
If you are not sure, press 9

Press the star key to repeat the question.

Question 1 Did this call relate to a notice, bill, or letter you received recently from the IRS?  
If yes, press 1  
For no, press 2 (**Skip to Q4**)  
If you are not sure, press 9 (**Skip to Q4**)

Question 2 Please rate your level of satisfaction with the clarity of the notice, bill, or letter. (**1, 2 and 3 go to Q3**) (**4 and 5 skip to Q4**)

Question 3 What can the IRS do to improve the clarity of the notice, bill, or letter you received? Begin speaking at the tone. Press any key when you are finished.

**Caller hears** The following questions have to do with the IRS's automated answering system. The response scale is the same. You may enter your response as soon as you know your answer.

Question 4 Rate your satisfaction with the ease of understanding the automated answering system menu and instructions.

Question 5 Rate your satisfaction with the time it took to get through to the IRS using the automated answering system.

**Caller hears** The following questions have to do with the IRS representative with whom you spoke. If you spoke to more than one representative, please consider the one with whom you spent the most time on the phone.

Question 6 Rate your satisfaction with the friendliness of the representative who handled your call.

Question 7 Rate your satisfaction with the representative's willingness to help you with your issue.

Question 8 Rate your satisfaction with the fairness with which you were treated.

Question 9 Rate your satisfaction with the knowledge of the representative.

- Question 10 Rate your satisfaction with getting all the information you needed during the call.
- Question 11 Rate your satisfaction with the length of time it took to complete your call from when you first reached a representative.
- Question 12 If you think the time you spent on the phone with the representative was too short, press 1. If you think it was too long, press 2. If the time spent with the representative was just right, press 3.
- Question 13 Rate your satisfaction with the clarity of the explanation given to you by the IRS employee regarding your issue
- Question 14 Rate your satisfaction with the representative's description of what will happen if you do not take those actions.
- Question 15 Rate your satisfaction with the ability of the representative to make decisions regarding your issue.
- Question 16 Were you requested to follow-up on this issue at a later date?  
If yes, press 1 (Go to Q17)  
If no, press 2 (Skip to Q18)
- Question 17 Rate your satisfaction with the amount of time you were given today to follow-up with the IRS on this issue.
- Question 18 Everything considered, whether you agree or disagree with the final outcome, rate your **overall satisfaction** with the service you received during this call. **(Completion Point)**
- Question 19 Do you have any other comments or suggestions for the IRS regarding your experience today? Begin speaking at the tone. Press any key when you are finished.

**Caller hears** There are just a few more questions left. Please listen carefully to the new response choices.

- Question 20 At the completion of your phone call, did you feel your issues were resolved?  
If you feel they were completely resolved, press 1...skip to question 22  
For partly resolved, press 2...go to question 21  
For not resolved, press 3...go to question 21  
If you are not sure, press 9... skip to question 22

Question 21 Why do you feel the issue was not completely resolved? Begin speaking at the tone. Press any key when you are finished.

Question 22 Including today, how many times have you called and discussed this particular issue with an IRS representative?  
Press 1 through 4 for the number of times you have called  
Press 5 for 5 or more times.

Question 23 How many minutes did you spend on this call including any time on hold, but not including the time spent answering this survey?  
If less than 10 minutes, press 1  
10 to 20 minutes, press 2  
21 to 30 minutes, press 3  
31 minutes or longer, press 4

Question 24 Why did you call today?  
For an explanation about the letters you received from the IRS, press 1  
To let the IRS know you had mailed/faxed documents in, press 2  
To obtain the status of your case, press 3  
For a general question not related to a specific case, press 4  
For any other reason, press 5

**End Section**

Q29 We often do research on behalf of the IRS and need respondents for our research. Would you be willing to participate in future research? If so, please provide us with your phone number and email address if you have one. This information will be anonymous and used only for the purpose of survey research. Research participants may receive a small monetary incentive to participate depending on the survey.  
If you would like to participate, press 1.....go to Q29a  
If you do not want to participate, press 2.....skip to Q25

Q29a Please type in phone number:

Q29b Please state and spell your first and last name:

**Caller hears** That completes the survey; however, we are required by law to report to you the OMB Control Number for this public information request. That number is 1545-1432. In addition, if you have any comments about the time used to complete this survey or ways to improve the survey, you may write to the IRS.

Question 25 Would you like the address to mail your comments?

If yes, press 1  
If no, press 2

If yes, the caller hears:  
Mail your comments to:  
Internal Revenue Service  
Tax Products Coordinating Committee  
1111 Constitution Ave, NW, Room 6510-S  
Washington, DC 20224

Question 26 To repeat this address, press 1.  
Otherwise, press 2.

Question 27 If you have tried unsuccessfully to resolve a problem with the IRS or if you have a complaint, you may contact the Taxpayer Advocate's office by calling a toll-free telephone number. If you would like the telephone number of the Taxpayer Advocate, press 1. Otherwise, press 2.

If 1, the caller hears:  
The toll-free Taxpayer Advocate phone number is 1-877-777-4778.

Question 28 To repeat this telephone number, press 1.  
Otherwise, press 2.

Thank you for participating in this survey. Your information will help improve the services provided by the IRS. Thank you. Goodbye.

## **Survey End**

### **Mail Survey, Examples:**

Advance letter (pre-note) about the survey

[IRS LOGO] [IRS DEPARTMENT LETTERHEAD]  
[DATE]  
CCE012010001

Gwen Garren  
SAMPLE ADDRESS 1  
ANYTOWN, US 12345-6789

Dear Gwen Garren:

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 (IRS).

In a few days, you will receive a questionnaire asking your opinions about the service you received from the IRS to resolve the issues raised in your audit. If you are not the person who had the most contact with the IRS on this matter, please direct the survey to the person who did. This brief questionnaire should take less than 5 minutes to complete. Your answers will be combined with others to give us an evaluation of customer satisfaction with IRS service.

To keep all replies anonymous to the IRS, we have asked an independent research firm to administer the survey. Contractor will process the questionnaires and

report only aggregate 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 Contractor Survey Helpline at 1-888-260-0052.

Thank you in advance for your cooperation.

Sincerely,  
Director, Compliance  
Wage and Investment Division

### **Cover letter with the survey**

[IRS LOGO] [IRS DEPARTMENT LETTERHEAD]  
[DATE]  
CCE012010001

IRS Customer Survey  
P.O. Box 64529  
St. Paul, MN 55164-9610

[DATE]

CCE012010001  
JOHN DOE  
SAMPLE ADDRESS 1  
ANYTOWN, US 12345-6789

Dear John Doe:

A few days ago you received a letter from \_\_\_\_\_, 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). Your name was selected for this survey through a random sample of taxpayers who were audited. We want to know your opinions regarding the audit process and the service you received. Your responses are critical to the accuracy of our evaluation of the IRS's service. If any other person was primarily responsible for dealing with the IRS on this matter, please

direct the survey to that person and encourage him or her to respond. Contractor will hold your identity anonymous and will not provide any of your identifying information to the IRS. Your answers will be grouped with others, so that no individual reply can be traced back to a person or case number.

This brief survey should take less than 5 minutes to complete. We have included a postage-paid reply envelope for you to return your completed survey. If you have any questions or concerns, please feel free to contact Contractor Survey Helpline at 1-888-260-0052.

Thank you in advance for your cooperation.  
Sincerely,  
Project Director

### **Postcard reminder**

#### **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 and return it today. We want to be sure we have your opinions and suggestions for improving the IRS's service to the public.

If you did not receive the questionnaire, or it has been misplaced, please call us at 1-888-260-0052.

Project Director

### **Survey- Cover Letter [second package]**

[IRS LOGO] [IRS DEPARTMENT LETTERHEAD]

[DATE]  
CCE012010001

IRS Customer Survey  
P.O. Box 64529  
St. Paul, MN 55164-9610

[DATE]  
CCE012010001

JOHN DOE  
SAMPLE ADDRESS 1  
ANYTOWN, US 12345-6789

Dear John Doe:

Recently you received a survey requesting your feedback about your experiences during a recent IRS audit. So far, we have not received your completed survey. If you have already completed the survey, thank you. If you have not completed the survey, please take a few minutes to fill in your responses. If another person was primarily responsible for dealing with the IRS on this matter, please direct the survey to that person and encourage him or her to respond.

As described in our previous communication, we are administering a nationwide survey among people who had a recent audit conducted by the IRS. Your name was selected for this survey through a random sample of those who were audited. We want to know your opinions regarding the audit process and the service you received. Your responses are critical to the accuracy of our evaluation of the IRS's service.

Contractor will hold your identity anonymous and will not provide any of your identifying information to the IRS. Your answers will be grouped with others, so that no individual reply can be traced back to a person or case number. Your participation is voluntary.

The survey should take less than 5 minutes to complete. We have included a postage-paid reply envelope for you to return your completed survey. If you have any questions or concerns, please feel free to contact Contractor Survey Helpline at 1-888-260-0052. Thank you in advance for your cooperation. The IRS is committed to improving its performance and service to the American public. A vital step in this process is to gather reliable information from those who have had contact with IRS employees and services. Your honest opinions will help bring about these changes. Thank you in advance for your cooperation.

Sincerely,  
Project Director



OMB Clearance Package 2011

OMB # 1545-1432

NO POSTAGE  
NECESSARY  
IF MAILED  
IN THE  
UNITED STATES

# BUSINESS REPLY MAIL

FIRST-CLASS MAIL PERMIT NO. 12686 WASHINGTON DC  
POSTAGE WILL BE PAID BY INTERNAL REVENUE SERVICE-TREASURY

Contractor  
IRS CUSTOMER SURVEY  
PO BOX 65429

ST PAUL MN

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**AUTOMATED UNDER REPORTER MAIL Wage and Investment  
Survey**

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

OMB # 1545-1432

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 5 minutes to complete. Your responses will be kept completely anonymous to the IRS. If you have any questions about this survey, you may call the Survey Helpline at 1-866-960-7897.

**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 answer by checking the box that best represents your opinion.

- |   | Very<br>Dissatisfied     | Somewhat<br>Dissatisfied | Neither<br>Satisfied<br>Nor<br>Dissatisfied | Somewhat<br>Satisfied    | Very<br>Satisfied        |
|---|--------------------------|--------------------------|---|--------------------------|--------------------------|
| <b>How would you rate the ...</b>   |                          |                          |   |                          |                          |
| 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 "Very Dissatisfied" or "Somewhat Dissatisfied" rating): Why did you give this item a low rating?</i> |                          |                          |   |                          |                          |
|   |                          |                          |   |                          |                          |
| 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 "Very Dissatisfied" or "Somewhat Dissatisfied" rating): Why did you give this item a low rating?</i> |                          |                          |   |                          |                          |
|   |                          |                          |   |                          |                          |
| 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 "Very Dissatisfied" or "Somewhat Dissatisfied" rating): Why did you give this item a low rating?</i> |                          |                          |   |                          |                          |
|   |                          |                          |   |                          |                          |
| 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 number listed in the AUR notice?

- Yes (Continue below)       No (Skip to question 5)

- |  | Very<br>Dissatisfied     | Somewhat<br>Dissatisfied | Neither<br>Satisfied<br>Nor<br>Dissatisfied | Somewhat<br>Satisfied    | Very<br>Satisfied        |
|--|--------------------------|--------------------------|---|--------------------------|--------------------------|
| <b>How would you rate the ...</b>                                      |                          |                          |   |                          |                          |
| a. Usefulness of the automated telephone system? .....                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>                    | <input type="checkbox"/> | <input type="checkbox"/> |
| 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 only one response)*

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

*Please continue on back*

**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        | Somewhat Dissatisfied    | Neither Satisfied Nor Dissatisfied | Somewhat Satisfied       | Very Satisfied           |
| 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 the IRS representative? .....                                   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>           | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Ability of the 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? .....

|  |                          |                          |                                    |                          |                          |
|--|--------------------------|--------------------------|------------------------------------|--------------------------|--------------------------|
|  | Very Dissatisfied        | Somewhat Dissatisfied    | Neither Satisfied Nor Dissatisfied | Somewhat Satisfied       | Very Satisfied           |
|  | <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<br>1st | 2nd                      | 3rd                      | 4th                      | Lowest Preference<br>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"/> |
| E-mail .....    | <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    **→** Why did you disagree?  
 Not sure

Why did you disagree?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**10** Did you ...?  
 Use a tax professional to resolve this discrepancy  
 Represent yourself  
 Both

**11** Use this space for comments or suggestions for improvement.

Occasionally, we conduct additional in-depth IRS-related research. Research participants may receive a small monetary incentive to participate depending on the research. If you are interested in participating in future research, please provide us with your telephone number and your e-mail address (if available). This information will not be shared with the IRS and will be used only for the purpose of survey research.  
 Telephone number: \_\_\_\_\_ E-mail 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.

*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 to P.O. Box 64530, St. Paul, MN 55164-9610 USA.

COMPLIANCE CENTER EXAM MAIL Wage and Investment Survey



CCEWIXXX08129999200812

OMB # 1545-1432

**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 5 minutes to complete. Your responses will be kept completely anonymous to the IRS. If you have any questions about this survey, you may call the Survey Helpline at 1-866-960-7897.

**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 answer by checking the box that best represents your opinion.

|  | Very Dissatisfied        | Somewhat Dissatisfied    | Neither Satisfied Nor Dissatisfied | Somewhat Satisfied       | Very Satisfied           | Don't Know/Not Applicable |
|--|--------------------------|--------------------------|------------------------------------|--------------------------|--------------------------|---------------------------|
| <b>How would you rate the ...</b>  | ▼                        | ▼                        | ▼                                  | ▼                        | ▼                        | ▼                         |
| 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. Clarity of notices in explaining 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 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"/>  |
| f. 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"/>  |
| g. The length of time 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"/>  |
| h. Representative's willingness to help you with your issue? .....                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  |
| i. Courtesy and professionalism of IRS employees? .....                                | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  |
| j. IRS employees' knowledge of your case? .....  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  |
| k. 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"/>  |
| l. 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"/>  |
| m. Consistency of information received from the IRS? .....                             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>  |
| n. IRS 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? .....

**3** Did you contact the IRS Toll-free Exam number listed on the letter you received?  
 Yes  
 No  
 Don't recall

**4** Approximately how many times did you contact the IRS (by mail or by phone) before your issue was resolved?  
 \_\_\_\_\_ Times

*Please continue on back*

**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 site
- Other

Occasionally, we conduct additional in-depth IRS-related research. Research participants may receive a small monetary incentive to participate depending on the research. If you are interested in participating in future research, please provide us with your telephone number and your e-mail address (if available). This information will not be shared with the IRS and will be used only for the purpose of survey research.

Telephone number: \_\_\_\_\_ E-mail 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.

**7** 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 to P.O. Box 64530, St. Paul, MN 55164-9610 USA.**

**INNOCENT SPOUSE MAIL Wage and Investment Survey. 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 5 minutes to complete. Your responses will be kept completely anonymous to the IRS. If you have any questions about this survey, you may call the Survey Helpline at 1-866-960-7897. 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 answer by checking the box that best represents your opinion.**

OMB # 1545-1432

### IRS WAGE AND INVESTMENT CUSTOMER SATISFACTION SURVEY INNOCENT SPOUSE

Please provide the IRS with your feedback on the Innocent Spouse Claims Process so the IRS can provide better service in the future. Your participation is voluntary, and your responses will be completely anonymous to the IRS. If you have any questions about this survey, you may call the Survey Helpline at 1-866-960-7897.

**1** The questions that follow ask your opinion regarding the Innocent Spouse process. For each question, *regardless of whether you agree or disagree with the outcome*, please indicate your answer by checking the box that best represents your opinion.

|   | Very<br>Dissatisfied     | Somewhat<br>Dissatisfied | Neither<br>Satisfied<br>Nor<br>Dissatisfied | Somewhat<br>Satisfied    | Very<br>Satisfied        | Don't<br>Know/Not<br>Applicable |
|---|--------------------------|--------------------------|---|--------------------------|--------------------------|---------------------------------|
| <b>How would you rate the ...</b>   |                          |                          |   |                          |                          |                                 |
| a. Ease of finding out about the Innocent Spouse Program? .....   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>        |
| b. Ease of understanding and completing Form 8857, <i>Request for Innocent Spouse Relief (And Separation of Liability and Equitable Relief)</i> ? ..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>        |
| c. Ease of understanding the instructions on Form 8857? .....   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>        |
| d. Getting through to the right IRS employee by phone? .....  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>        |
| e. IRS employees' knowledge about the Innocent Spouse process? .....  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>        |
| f. Courtesy and professionalism of IRS employees? .....   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>        |
| g. Ease of collecting information requested by the IRS? .....   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>        |
| h. Consideration by the IRS of the information you sent? .....  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>        |
| i. 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"/>        |
| j. Being kept informed of the status of your claim? .....   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>        |
| k. Ease of understanding the letter explaining the outcome of your claim? .....   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>        |
| l. Amount of time you spent on this claim? .....  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>        |
| m. Length of claim process from start to finish? .....  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>        |
| n. Fairness of treatment by the IRS employees? .....  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>        |

If you answered "Very Dissatisfied" or "Dissatisfied" to any of the above questions, explain why:

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

|       | Very<br>Dissatisfied     | Somewhat<br>Dissatisfied | Neither<br>Satisfied<br>Nor<br>Dissatisfied | Somewhat<br>Satisfied    | Very<br>Satisfied        | Don't<br>Know/Not<br>Applicable |
|-------|--------------------------|--------------------------|---|--------------------------|--------------------------|---------------------------------|
| ..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>        |

**3** How did you find out about the possibility of obtaining Innocent Spouse Relief? (Check all that apply.)

|  |   |   |
|--|---|---|
| <input type="checkbox"/> IRS Agent/Revenue Officer           | <input type="checkbox"/> IRS Web site     | <input type="checkbox"/> Publicity in the news or advertisement |
| <input type="checkbox"/> IRS Customer Service Representative | <input type="checkbox"/> Friend/Colleague | <input type="checkbox"/> Lawyer or legal counsel                |
| <input type="checkbox"/> IRS Taxpayer Advocate Office        | <input type="checkbox"/> Tax professional | <input type="checkbox"/> Other – specify: _____                 |

*Please continue on back*

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Form 13423 (Rev. 2-2009)      Cat. No. 36121A      Department of the Treasury – Internal Revenue Service

- 4** Where did you obtain the forms and instructions for filing your claim? (Check all that apply.)
- IRS via telephone
  - IRS office
  - IRS Web site
  - Lawyer or legal counsel
  - Tax professional
  - Other – specify: \_\_\_\_\_

- 6** Which of the following methods do you prefer to use when contacting the IRS? (Check all that apply.)
- IRS Toll-free Customer Service number
  - IRS number listed on the letter you received
  - IRS Web site
  - Local IRS office by phone
  - Local IRS office in person
  - Mail
  - Through tax professional
  - Other – specify: \_\_\_\_\_

- 5** Which of the following methods did you use to contact the IRS throughout the Claims Process? (Check all that apply.)
- IRS Toll-free Customer Service number
  - IRS number listed on the letter you received
  - IRS Web site
  - Local IRS office by phone
  - Local IRS office in person
  - Mail
  - Through tax professional
  - Other – specify: \_\_\_\_\_

- 7** Who prepared your Form 8857, Request for Innocent Spouse Relief (And Separation of Liability and Equitable Relief)? (Check only one response.)
- Self
  - Paid tax professional
  - Volunteer Income Tax Assistance (VITA)
  - Friend/relative
  - IRS office

- 8** Which of the following statements best describes you? (Check only one response.)
- I am the taxpayer
  - I am a tax professional who represented the taxpayer
  - I am someone else who represented the taxpayer

Occasionally, we conduct additional in-depth IRS-related research. Research participants may receive a small monetary incentive to participate depending on the research. If you are interested in participating in future research, please provide us with your telephone number and your e-mail address (if available). This information will not be shared with the IRS and will be used only for the purpose of survey research.

Telephone number: \_\_\_\_\_ E-mail address: \_\_\_\_\_

**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 to P.O. Box 64530, St. Paul, MN 55164-9610 USA.

## Mail Surveys for Compliance Center Examination, Compliance Center Examination Toll-Free, and Automated Under Reporter

### IRS WAGE AND INVESTMENT CUSTOMER SATISFACTION SURVEY

### COMPLIANCE CENTER EXAM & TOLL FREE

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 5 minutes to complete. Your responses will be kept completely anonymous to the IRS. If you have any questions about this survey, you may call the Survey Helpline at 1-866-960-7897.

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 answer by checking the box that best represents your opinion.

Very Dissatisfied    Somewhat Dissatisfied    Neither Satisfied Nor Dissatisfied    Somewhat Satisfied  
Very Satisfied    Don't Know/Not Applicable

**How would you rate the ...**

- a. Explanation of why your tax return was being audited? .....
- b. Clarity of notices in explaining what records you needed to send in?
- c. Ease of understanding the letter you received with the examination report? .....
- d. Ease of understanding the examination report you received? .....
- e. Ease of collecting the information requested by the IRS? .....
- f. Ease of using the automated phone system to get help? .....
- g. The length of time you had to wait to talk to an IRS representative by phone? .....
- h. Representative's willingness to help you with your issue? .....
- i. Courtesy and professionalism of IRS employees? .....
- j. IRS employees' knowledge of your case? .....
- k. Time you were given to respond to the IRS? .....
- l. Consideration given to the information you sent to the IRS? .....
- m. Consistency of information received from the IRS? .....
- n. IRS keeping you informed of the status of your case? .....



- o. Length of the audit process, from start to finish? .....
- p. Amount of time you had to spend on this audit? .....
- q. Explanation of why adjustments were made? .....
- r. Fairness of treatment by the IRS? .....

**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?** .....

**Did you contact the IRS Toll-free Exam number listed on the letter you received?**

- Yes
- No
- Don't recall

**Approximately how many times did you contact the IRS (by mail or by phone) before your issue was resolved?**

Times

***Please continue on back***

OMB # 1545-1432

Form **13257** (Rev. 2-2009) Cat. No. 34051T Department of the Treasury - **Internal Revenue Service**

**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

**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 site
- Other

Occasionally, we conduct additional in-depth IRS-related research.

Research participants may receive a small monetary incentive to participate depending on the research. If you are interested in participating in future research, please provide us with your telephone number and your e-mail address (if available). This information will not be shared with the IRS and will be used only for the purpose of survey research.

Telephone number: \_\_\_\_\_ E-mail 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.

**Use this space for comments or suggestions for improvement.**

**Thank you for completing the survey.**

**Please return the questionnaire to P.O. Box 64530, St. Paul, MN 55164-9610 USA.**

***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.*

Form **13257** (Rev. 2-2009) Cat. No. 34051T Department of the Treasury - **Internal Revenue Service**