

Thank you for participating in our customer satisfaction survey. Your answers will be kept private and will only be used in order for our office to make improvements to our products and services. Please only reflect on your most recent data request when answering the questions below. If necessary for fully completing the open-ended responses, please attach another sheet.

1. Which of the following best describes your function? (Please choose only one.)

- Academia
- Association / Society
- Congress
- Consultant / Research
- Corporation
- Federal Government
- Financial Services
- Foreign
- Internal Revenue Service
- Legal Services
- Library
- Media
- Non-Profit
- Private Citizen
- State / Local Government
- Other: \_\_\_\_\_

2. How often do you contact the SIS office?

- Weekly
- Monthly
- Quarterly
- Once every 6 months
- Annually
- First Time

3. Did the SIS staff satisfy your data request? (If only partially or not at all, please explain why in the space provided below.)

- Yes
- Partially, \_\_\_\_\_
- No, \_\_\_\_\_

4. When did SIS initially contact you after you submitted your most recent data request?

- Same day
- 2-3 business days
- 4-5 business days
- 6 or more business days

5. The product(s) or service(s) provided by the SIS office met your needs.

- |                          |                          |                          |                          |                          |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Strongly Disagree        | Disagree                 | Not Sure / Neither       | Agree                    | Strongly Agree           |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

6. If you could change one thing about your experience with the SIS office, what would it be?

\_\_\_\_\_

7. What types of new products / data releases would you be most interested in receiving?

\_\_\_\_\_

	Totally Dissatisfied	Dissatisfied	Neither	Satisfied	Totally Satisfied
8. Please rate your overall satisfaction with your most recent data request.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please use the scale below for questions 9 and 10.

	Strongly Disagree	Disagree	Not Sure / Neither	Agree	Strongly Agree	Not Applicable
9. The SOI Tax Stats website is user-friendly.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

10. The information from the SOI Tax Stats website met your needs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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11. Please provide any comments and / or suggestions on ways we may better serve your data needs.

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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