

# Taxpayer Assistance Center Customer Expectations Survey



You can help the IRS improve its service to you and other taxpayers by answering the questions below. This anonymous and voluntary survey takes about 10 minutes to complete.

Please answer questions 1–20 prior to receiving service and the last 13 questions after receiving service.

## Instructions: Please mark the box next to your answer.

1. Is this your **first visit ever** to a local IRS office?

- Yes  
 No, I have visited a local IRS office previously

2. About how many times, including today, have you visited this local IRS office, in the past 2 years?

- 1 time (today's visit)                       4 times  
 2 times     5 times  
 3 times     6 or more times

3. How did you **first learn** about local IRS offices, like this one? (Please mark only **one**)

- |   |   |
|---|---|
| <input type="checkbox"/> Friend, family member, co-worker                             | <input type="checkbox"/> IRS web site (IRS.gov)           |
| <input type="checkbox"/> Telephone book   | <input type="checkbox"/> IRS telephone representative     |
| <input type="checkbox"/> Saw the office   | <input type="checkbox"/> Other IRS representative         |
| <input type="checkbox"/> Tax preparation company<br>(e.g., H&R Block, Jackson-Hewitt) | <input type="checkbox"/> Volunteer tax preparation clinic |
| <input type="checkbox"/> Accountant/tax professional                                  | <input type="checkbox"/> Other (please specify): _____    |
|   | <input type="checkbox"/> I do not remember                |

4. About how long did it take you to travel to this local IRS office?

- |  |   |
|--|---|
| <input type="checkbox"/> 0 – 5 minutes   | <input type="checkbox"/> 31 – 45 minutes      |
| <input type="checkbox"/> 6 – 10 minutes  | <input type="checkbox"/> 46 – 60 minutes      |
| <input type="checkbox"/> 11 – 20 minutes | <input type="checkbox"/> 61 – 90 minutes      |
| <input type="checkbox"/> 21 – 30 minutes | <input type="checkbox"/> More than 90 minutes |

5. What is your **main** reason for visiting this IRS office today? (Please mark only **one**)

- |   |  |
|---|--|
| <input type="checkbox"/> Get a copy of a <b>prior year return</b>           | <input type="checkbox"/> Get a <b>lien or levy released</b>              |
| <input type="checkbox"/> Make a <b>payment</b>                              | <input type="checkbox"/> Ask about <b>Identity Theft</b>                 |
| <input type="checkbox"/> Set up a <b>payment plan</b>                       | <input type="checkbox"/> Drop off a <b>completed tax return</b>          |
| <input type="checkbox"/> Resolve an IRS <b>notice or letter</b>             | <input type="checkbox"/> Request <b>tax form or instruction booklets</b> |
| <input type="checkbox"/> Ask a <b>tax law question</b> (not about a notice) | <input type="checkbox"/> File Form 2290 ( <b>Heavy Vehicle Use Tax</b> ) |
| <input type="checkbox"/> Have a tax <b>return prepared</b>                  | <input type="checkbox"/> Other (please specify): _____                   |
| <input type="checkbox"/> Check on <b>refund status</b>                      |  |

6. Thinking of the **main reason** that brought you to the local IRS office **today**, approximately how many times did you contact the IRS to try to resolve it? (Please enter zero if you did not contact the IRS by this method.)

Called IRS Toll-Free Line → \_\_\_\_\_ Times  
 Used IRS.gov → \_\_\_\_\_ Times  
 Visited IRS Office (include today's visit) → \_\_\_\_\_ Times  
 Sent IRS Mail → \_\_\_\_\_ Times  
 Sent IRS E-mail → \_\_\_\_\_ Times  
 Faxed IRS → \_\_\_\_\_ Times

7. What made you decide to come to the local IRS office **today**, instead of using a different IRS service (such as the IRS website, IRS Toll-Free line, Mail or Email)?

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8. About how long do you think you will wait before meeting with an IRS representative to discuss your **main issue**?

Immediately (no wait)                       21 – 30 minutes  
 1 – 5 minutes                                       31 – 45 minutes  
 6 – 10 minutes                                    More than 45 minutes  
 11 – 20 minutes

9. After you start talking to an IRS representative, about how long do you think it will take to complete your **main issue**?

Less than 5 minutes                               21 – 30 minutes  
 5 – 10 minutes                                       31 – 45 minutes  
 11 – 20 minutes                                    More than 45 minutes

10. What category describes your current age?

18 to 24 years                                       55 to 64 years  
 25 to 34 years                                       65 to 74 years  
 35 to 44 years                                       75 to 84 years  
 45 to 54 years                                       85 years and over

11. What is the highest level of education you have completed?

Less than 9<sup>th</sup> grade                               Some college, no degree  
 9<sup>th</sup> grade to 12<sup>th</sup> grade, no diploma       Associate Degree  
 High school graduate (or GED)               Bachelor's Degree  
 Some technical or vocational school         Master's Degree  
 Technical or vocational school graduate    Post-Master's Degree

12. What category best describes your annual household income?

- Less than \$15,000
- \$15,000 but less than \$25,000
- \$25,000 but less than \$35,000
- \$35,000 but less than \$50,000
- \$50,000 but less than \$75,000
- \$75,000 but less than \$100,000
- \$100,000 or more

13. What is the primary language spoken at home? (Please select **one**)

- English
- Spanish
- Chinese
- Vietnamese
- Korean
- Russian
- Other (please specify): \_\_\_\_\_

14. For the following aspects of a convenient location for IRS local offices, please identify the most important and least important.

- A. Distance travelled
  - B. Available parking nearby
  - C. Free parking
  - D. Neighborhood safety
  - E. Easy to find
- Most** important \_\_\_\_\_
- Least** important \_\_\_\_\_

15. Are there any other aspects of the IRS office’s location that are more important to you than those mentioned in question 14?

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16. For the following aspects of building condition for IRS local offices, please identify the most important and least important.

- A. Office layout
  - B. Privacy
  - C. Seating
  - D. Cleanliness
  - E. Security/Screening
- Most** important \_\_\_\_\_
- Least** important \_\_\_\_\_

17. Are there any other aspects of the IRS office’s building condition that are important to you that are not mentioned in the question 16?

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I am willing to use a payment ATM/kiosk placed in other government agencies (e.g., Post Office, DMV) to submit payments to the IRS.

**Please Wait...**  
**Complete the last questions AFTER you have received service.**

## Post-Service Questions

21. **Overall**, how satisfied were you with today's visit?

Very Dissatisfied    Dissatisfied    Neutral    Satisfied    Very Satisfied

22. What would have made your visit today better?

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23. How long did you **actually** wait before meeting with an IRS representative today?

Immediately (no wait)                       21 – 30 minutes  
 1 – 5 minutes                                       31 – 45 minutes  
 6 – 10 minutes                                   More than 45 minutes  
 11 – 20 minutes

24. How long did you **actually spend** with the IRS representative on your **main issue**?

Less than 5 minutes                               21 – 30 minutes  
 5 – 10 minutes                                     31 – 45 minutes  
 11 – 20 minutes                                   More than 45 minutes

25. Were you provided the assistance you needed to resolve your main reason for visiting today?

Yes  
 No  
 Don't know

26. Did the IRS representative answer all of your questions today?

Yes  
 No

27. Will the information you received today eliminate the need for further contact with the IRS regarding your main issue?

Yes

No      If 'No', please explain: \_\_\_\_\_

28. Were your **expectations** for the following aspects of a visit to a local IRS office met during today’s visit?

	Much Worse Than Expected		As Expected		Much Better Than Expected
	1	2	3	4	5
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Aspects of Visit</b>					
Wait time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Getting my issue resolved today	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Getting all my questions answered	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Eliminating the need for further IRS contact	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Professionalism of staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Courtesy of staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Skill of staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Knowledge of staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Overall</b> , were your expectations for this visit met?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

29. Please rate your satisfaction with the following aspects of the **location of the office** visited today?

	Very Dissatisfied		Neutral		Very Satisfied
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Satisfaction with Location</b>					
Distance travelled	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Available parking nearby	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Free parking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Neighborhood safety	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Easy to find	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

30. Please rate your satisfaction with the following aspects of the **office’s building condition** today?

	Very Dissatisfied		Neutral		Very Satisfied
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Satisfaction with Building Condition</b>					
Office layout	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Privacy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Seating		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Security/Screening	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cleanliness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

31. Please rate your satisfaction with the following aspects of your **interaction with the IRS staff** today?

	<b>Very Dissatisfied</b>		<b>Neutral</b>		<b>Very Satisfied</b>
	1	2	3	4	5
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Satisfaction with IRS Staff**

Professionalism of staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Courtesy of staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Skill of staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Knowledge of staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Staff listened to your concerns	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Staff treated you with respect	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

32. Please rate your satisfaction with the following aspects of the *service received* today?

	<b>Very Dissatisfied</b>		<b>Neutral</b>		<b>Very Satisfied</b>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Satisfaction with Service**

Wait time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Getting my issue resolved today	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Getting all my questions answered	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Eliminating the need for further IRS contact	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

33. Please share your opinions about how we can improve the service provided at local IRS offices?

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**Thank you for completing this survey.**  
**Please return the questionnaire to the survey administrator.**

*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. 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.*



## Privacy Statement

*The authority requesting the information is 5 USC 301. The primary purpose of asking for the information is to determine steps IRS can take to improve our service to you. The information may be disclosed as authorized by the routine uses published for the Privacy Act System of Records entitled, Treas/IRS 00.001 Correspondence Files, including Stakeholder Partnership File, and Correspondence Control Files, as published in the Federal Register: December 10, 2001 (Volume 66, Number 237)] [Notices] pages 63785-6. Providing the information is voluntary. Not answering some or all of the questions will not affect you.*