# **LB&I Compliance Assurance Process (CAP) 2012**

# **CUSTOMER SATISFACTION SURVEY**

###### Intro Text – First Web Screen

As part of its continuing effort to improve the CAP review process, the IRS is conducting ongoing research to understand customer satisfaction with the review process. The voluntary survey takes about 10 minutes to complete. Your individual responses will be kept completely confidential, and the results will be presented to IRS’s Large Business and International (LB&I) division only in aggregate form. If you have any questions about this survey, please e-mail the survey coordinator at mailto:jleighty@traintech.com.

Our contract with IRS-LB&I authorizes us to collect taxpayer specific information. Therefore responding to the survey is not an unauthorized disclosure of taxpayer information.  Prior to taking the survey, if you would like to verify the authenticity of the survey request, you may contact Jim Morton, LB&I Program Analyst by phone (513-518-4905) or by email (keith.fowler@irs.gov).

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 contact the Internal Revenue Service, Tax Products Coordinating Committee, SE:W:CAR:MP:T:T:SP, 1111 Constitution Ave. NW, Washington, DC 20224.

A. Is this your first year participating in Compliance Assurance (CAP) process?

 1—Yes

 2—No

B. Have you filed a return in CAP?

 1—Yes

 2—No

C. *(Only state this sentence if No to A*) Please complete the following questions as it relates to your experience with CAP during the last 12 months.

#### CAP

1. Please rate your satisfaction with the following aspects of your experience with CAP; if some items do not apply, please select N/A.

| Item | **Very Dissatisfied 1** | **Somewhat Dissatisfied 2** | **Neither Dissatisfied nor Satisfied** **3** | **Somewhat Satisfied** **4** | **Very Satisfied 5** | **Not Applicable 9** |
| --- | --- | --- | --- | --- | --- | --- |
| 1. CAP Preparation |  |  |  |  |  |  |
| a. Appropriate level of training/orientation into the CAP program provided by IRS |  |  |  |  |  |  |
| b. The level of mutual understanding between you and the IRS obtained at the opening conference |  |  |  |  |  |  |
| c. Your level of involvement in the CAP planning process |  |  |  |  |  |  |
| d. The responsiveness of the review team to your suggestions in planning for the CAP review |  |  |  |  |  |  |
| e. Overall satisfaction with opening conference |  |  |  |  |  |  |
| 2. CAP Features |  |  |  |  |  |  |
| a. Degree of tax certainty obtained |  |  |  |  |  |  |
| b. IRS ability to handle issues in real-time |  |  |  |  |  |  |
| c. Reduction of burden in your organization’s *personnel time* compared to traditional post-file audit |  |  |  |  |  |  |
| d. Reduction of burden in *administrative costs* compared to traditional post-file audit |  |  |  |  |  |  |
| e. Discussing open issues with agents or with National Office |  |  |  |  |  |  |
| f. Overall satisfaction with CAP features |  |  |  |  |  |  |
| 3. Issue Identification |  |  |  |  |  |  |
| a. The threshold for material effect |  |  |  |  |  |  |
| b. IRS process for requesting information through Information Document Requests |  |  |  |  |  |  |
| c. Clarity of information requested from Information Document Requests  |  |  |  |  |  |  |
| d. Your involvement in deciding the appropriate information necessary |  |  |  |  |  |  |
| e. Adequacy of IRS staffing dedicated to CAP review |  |  |  |  |  |  |
| f. Responsiveness of IRS team overall |  |  |  |  |  |  |
| g. Overall satisfaction with Issue Identification |  |  |  |  |  |  |
| 4. **(Programming: Skip Section 4 if No to QB – have not filed a return)** Issue Resolution – *Please respond to the questions in this section relating to the CAP year with the* ***most recently filed return*** |  |  |  |  |  |  |
| a. Resolution of significant issues prior to filing return |  |  |  |  |  |  |
| b. Resolution of significant issues after filing return |  |  |  |  |  |  |
| c. Efficiency of Appeals process (if applicable) |  |  |  |  |  |  |
| d. Assistance from Counsel |  |  |  |  |  |  |
| e. Length of time to resolve significant issues ***before*** filing your return |  |  |  |  |  |  |
| f. Length of time to resolve significant issues ***after*** filing your return |  |  |  |  |  |  |
| g. Appropriateness of questions raised by IRS in post-filing review |  |  |  |  |  |  |
| h. Overall satisfaction with Issue Resolution |  |  |  |  |  |  |
| 5. Account Coordinator –The following questions are about the IRS Account Coordinator |  |  |  |  |  |  |
| a. Knowledge of tax law |  |  |  |  |  |  |
| b. Knowledge of your industry |  |  |  |  |  |  |
| c. Knowledge of your company |  |  |  |  |  |  |
| d. Responsiveness to your questions/concerns |  |  |  |  |  |  |
| e. Ability to facilitate communication between IRS personnel and your staff |  |  |  |  |  |  |
| f. Ability of the Account Coordinator to resolve your case without needing further approval |  |  |  |  |  |  |
| g. Overall satisfaction with Account Coordinator (knowledge, responsiveness, etc.) |  |  |  |  |  |  |
| 6. Team Manager –The following questions are about the IRS Team Manager |  |  |  |  |  |  |
| a. Knowledge of tax law |  |  |  |  |  |  |
| b. Knowledge of your industry |  |  |  |  |  |  |
| c. Knowledge of your company |  |  |  |  |  |  |
| d. Responsiveness to your questions/concerns |  |  |  |  |  |  |
| e. Ability to facilitate communication between IRS personnel and your staff |  |  |  |  |  |  |
| f. Overall satisfaction with Team Manager (knowledge, responsiveness, etc.) |  |  |  |  |  |  |
| 7. Specialists –The following questions are about the IRS Specialists  |  |  |  |  |  |  |
| a. Knowledge of tax law |  |  |  |  |  |  |
| b. Knowledge of your industry |  |  |  |  |  |  |
| c. Knowledge of your company |  |  |  |  |  |  |
| d. Responsiveness to your questions/concerns |  |  |  |  |  |  |
| e. Specialists’ understanding/knowledge of CAP  |  |  |  |  |  |  |
| f. Ability to effectively communicate with your staff |  |  |  |  |  |  |
| g. Overall satisfaction with specialists (knowledge, responsiveness, etc.) |  |  |  |  |  |  |
| 8. **(Programming: Skip Section 4 if No to QB – have not filed a return)** Proposed Adjustments *Please respond to the questions in this section relating to the CAP year with the* ***most recently filed return*** |  |  |  |  |  |  |
| a. Timeliness of the final notification of proposed adjustments |  |  |  |  |  |  |
| b. Clarity of explanations provided for adjustments made to tax return |  |  |  |  |  |  |
| c. Overall satisfaction with proposed adjustment process |  |  |  |  |  |  |

2. Considering all the aspects discussed in the survey, but excluding the outcome of the CAP review, please rate your **overall satisfaction with CAP**. Are you:

1 Very dissatisfied

2 Somewhat dissatisfied

3 Neither dissatisfied nor satisfied

4 Somewhat satisfied

5 Very satisfied

2a. (If CODE 1, or 2 in Q2) Why are you dissatisfied overall with the process? Please be specific (i.e. dissatisfaction with process and/or review team, etc.).

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. To what degree has CAP increased tax certainty for your corporation?

* A lot
* Somewhat
* Little
* Not at all

4. What are the benefits received by having tax certainty? *(Check all that apply)*

* Less overall time spent on CAP reviews compared to traditional post-file audits
* Reduced staff burden compared to traditional post-file audits
* Reduced administrative costs compared to traditional post-file audits
* Other (specify)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

7. How are you measuring the success of the CAP ?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

8. Please note any barriers you’ve experienced in the CAP review process since your organization began participating?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

9. How likely are you to recommend CAP to another organization? Are you:

1 Not at all likely

2 Not very likely

3 Neither likely nor unlikely

4 Somewhat likely

5 Very likely

10. What changes or improvements would you like to see made in CAP? Please consider anything related to training, opening conference, the review process, IDRs, the Account Coordinator, Team Manager, Specialists, tax return filing process, or any other improvement areas.

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

###### Demographic Questions

The final question will allow us to group the data for analysis purposes.

11. For which review year did your organization first begin to participate in CAP? (Select one only)

1 2005

2 2006

3 2007

4 2008

5 2009

6 2010

7 2011

Thank you for your participation!