

## [Exhibit A -TAS Survey – Pre-Note Letter]

{TAS Logo placeholder}

John Doe  
123 Main Street  
Anytown, CT 66666

Date: September 25, YYYY

Re: [Taxpayer's Name]

As the National Taxpayer Advocate, I lead TAS in helping taxpayers resolve problems with the IRS. You were selected to participate in a survey, which will take about 10 minutes to complete. Your participation is voluntary. By completing and returning the voluntary survey you can let us know what we did well and what we could have done to make your experience with us even better.<sup>1</sup>

### How you can take the survey

You will receive a survey package from TAS within the next couple of weeks that will include the TAS Customer Satisfaction Survey and a self-addressed, stamped return envelope. Please have the person in your household who knows the most about your recent experience with TAS complete the survey. Reflect upon the concern a TAS case advocate assisted you in addressing when responding to the questions. Return the completed survey as soon as possible using the included envelope.

### Questions or assistance

If you have any questions or need assistance in completing this survey please contact John Casstevens at 904-665-1023.

### Verification

To verify the authenticity of our survey, please visit [www.irs.gov](http://www.irs.gov) and enter the search term "[customer surveys](#)". The IRS Customer Satisfaction Survey webpage contains a list of current IRS surveys and includes a reference to the TAS survey.

### Privacy Act Notice

The primary purpose for requesting this information is to help the IRS improve its service to taxpayers. Our authority for requesting the information is 5 USC and 26 USC 7801. Providing information is voluntary. However, if you do not answer all or part of the survey questions, the IRS and TAS may lack information it could use to improve taxpayer service. TAS is required to follow confidentiality protections required by the Privacy Act and /or Internal Revenue Code section 6103.

I am committed to providing the best possible service to every taxpayer and I look forward to hearing about your experience with TAS.

Sincerely,

Nina E. Olson  
National Taxpayer Advocate

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<sup>1</sup> **Paperwork Reduction Act:** We are required by law to report to you the OMB Control Number for this public information request. That number is 1545-1432. If you have any comments about the time estimate for completing the survey or about ways to improve the survey, 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.

## [Exhibit B-TAS Survey – Cover Ltr with Questions]

{TAS Logo placeholder}

John Doe  
123 Main Street  
Anytown, CT 66666

Date: September 25, YYYY

Re: [Taxpayer's Name]

We recently sent you a letter asking for your help with an important survey we are conducting. The Taxpayer Advocate Service wants to learn how to improve service to taxpayers.

You were selected to participate in this survey, which will take about 10 minutes to complete. Your participation is voluntary.

Included in the package you've received are the TAS Customer Satisfaction survey and the self-addressed, stamped return envelope. Please have the person in your household who knows the most about your recent experience with TAS complete the survey. Reflect upon the concern a TAS case advocate assisted you in addressing when responding to the questions. Return the completed survey as soon as possible using the included envelope.

If you have any questions or need assistance in completing this survey please contact John Casstevens at 904-665-1023.

To verify the authenticity of our survey, please visit [www.irs.gov](http://www.irs.gov) and enter the search term "[customer surveys](#)". The IRS Customer Satisfaction Survey webpage contains a list of current IRS surveys and includes a reference to the TAS survey.

### **Privacy Act Notice**

The primary purpose for requesting this information is to help the IRS improve its service to taxpayers. Our authority for requesting the information is 5 USC and 26 USC 7801. Providing information is voluntary. However, if you do not answer all or part of the survey questions, the IRS and TAS may lack information it could use to improve taxpayer service. TAS is required to follow confidentiality protections required by the Privacy Act and /or Internal Revenue Code section 6103.

I am committed to providing the best possible service to every taxpayer and I look forward to hearing about your experience with TAS.

Sincerely,

Nina E. Olson  
National Taxpayer Advocate

Enclosures: Survey Questionnaire  
Postage Paid Envelope

## Exhibit C –Reminder Card

TAXPAYER ADVOCATE SERVICE

ATTN:

P.O. BOX

INDIANAPOLIS, IN

PRESORTED

FIRST-CLASS MAIL

Postage & Fees Paid

Internal Revenue Service

PERMIT NO. XXX

[Taxpayer or POA Representative Name & Address]

## Exhibit C –Reminder Card

Dear Taxpayer or POA:

In the last few weeks we sent you a survey asking for your help to improve service to taxpayers.

- If you have already completed and sent the survey back to us, ***thank you.***
- If not, please have the person in your household who is most familiar with your recent experience with the Taxpayer Advocate Service take a few minutes today to complete and return the survey.

We appreciate your participation. Thank you for your help.

Placeholder: L3 EITC-AB Form 13725 (9-2006) Catalog Number 47480A Department of the Treasury-Internal Revenue Service

## [Exhibit D - TAS Survey – 3rd Ltr with Questions]

{TAS Logo placeholder}

John Doe  
123 Main Street  
Anytown, CT 66666

Date: September 25, YYYY

Re: [Taxpayer's Name]

In the last few weeks we sent you a survey asking for your help to improve service to taxpayers. We are interested in your thoughts and opinions about your experience with the Taxpayer Advocate Service.

- If you have already completed and sent the survey back to us, thank you!
- If not, please take a few minutes today to complete and return the survey. A postage paid envelope is included.

If you have any questions or need assistance in completing this survey please contact John Casstevens at 904-665-1023.

### **Privacy Act Notice**

The primary purpose for requesting this information is to help the IRS improve its service to taxpayers. Our authority for requesting the information is 5 USC and 26 USC 7801. Providing information is voluntary. However, if you do not answer all or part of the survey questions, the IRS and TAS may lack information it could use to improve taxpayer service. TAS is required to follow confidentiality protections required by the Privacy Act and /or Internal Revenue Code section 6103.

We appreciate your participation. Thank you for your help.

Sincerely,

Nina E. Olson  
National Taxpayer Advocate

Enclosures: Survey Questionnaire  
Postage Paid Envelope



## Exhibit E-Survey Questionnaire

**5** If question 4 is "Yes", how satisfied are you with the helpfulness of the letters you received? (If you did not receive any correspondence please mark N/A).

Very Satisfied	Somewhat Satisfied	Neither	Somewhat Dissatisfied	Very Dissatisfied	N/A
<input type="radio"/>					

**6** To what extent did the Taxpayer Advocate Service solve your problem?

- Completely
- Partially
- Not at all
- Case is still open

**7** If you answered "Partially" or "Not at all to Question 6, how satisfied are you with your Advocate's explanation of why the Taxpayer Advocate Service couldn't solve your problem?

Very Satisfied	Somewhat Satisfied	Neither	Somewhat Dissatisfied	Very Dissatisfied
<input type="radio"/>				

**8** Thinking only of your interactions with the Taxpayer Advocate Service and not other parts of the IRS, overall how satisfied are you with your Taxpayer Advocate Service experience?

<input type="radio"/>				
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**9** If you marked "Somewhat Dissatisfied" or "Very Dissatisfied" to Question 8, what are the main reasons you are dissatisfied with the Taxpayer Advocate Service? You can mark more than one response or enter a short comment.

- Employee didn't do enough to help me (Gave up)
- Employee did not keep me informed
- Problem isn't resolved
- Employee was not concerned about my issues (Lack of empathy)
- Took too long to solve my problem
- Didn't receive the outcome I wanted (No refund/No adjustment)
- The process was unfair
- The laws/rules are unfair
- Employee was not fair

Other \_\_\_\_\_

**10** If you marked "Very Satisfied" or "Somewhat Satisfied" to Question 8, what are the main reasons you are Satisfied with the Taxpayer Advocate Service? You can mark more than one response or enter a short comment.

- Problem was resolved to my satisfaction
- Problem was resolved in a timely manner
- Employee was very informative (Communicative)
- Employee was very helpful
- Employee was concerned about resolving my issues (Empathy)
- Employee followed through very well
- Other

**11** How could the Taxpayer Advocate Service improve the service you received? Please include—a brief written comment below.

\_\_\_\_\_

**12** As a result of your experience with the Taxpayer Advocate Service, would you say your impression of the IRS is:

- Much more positive
- More positive
- About the same

## Exhibit E-Survey Questionnaire

  

More negative

Much more negative

### Demographics Section

[Please respond to these questions ONLY if you are the taxpayer, not a taxpayer's representative/POA or business. You can skip any questions you don't want to answer in this section.]

  
  
  
  

13

Which of the following do you have in your household?

Personal Computer (such as desktop, laptop or tablet)

Access to the internet

Cell Phone

Landline home telephone

  
  
  
  

14

Which of the following describes the highest level of education that you have attained?

Less than high school diploma

High school graduate (or GED)

Technical or vocational school graduate

College degree

Graduate degree

  
  
  
  
  
  

15

What is your household income?

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

  
  
  
  
  
  
  

16

What is your age?

Under 18

18-24

25-34

35-44

45-54

55-64

65+

  

17

What is your gender?

Male

Female

  
  
  

18

How many people in your household?

1

2

3 to 4

5 or more

19

How would you define your marital status or domestic status?

Married

## Exhibit E-Survey Questionnaire

<input type="radio"/>	Divorced
<input type="radio"/>	Separated
<input type="radio"/>	Widowed
<input type="radio"/>	Domestic Partnership
<input type="radio"/>	Single
<input type="radio"/>	Other _____

20	What is the primary language spoken in your household?
<input type="radio"/>	English
<input type="radio"/>	Spanish
<input type="radio"/>	Chinese
<input type="radio"/>	French
<input type="radio"/>	Tagalog
<input type="radio"/>	Vietnamese
<input type="radio"/>	Korean
<input type="radio"/>	Other _____

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