INTERNAL REVENUE SERVICE **OMB Control Number: 1545-2256**

INSTRUMENT 09

Tax Professional Digital Feedback Participant Screener

Feedback activity: [INSERT EXACT IRS TAX-PROFESSIONAL DIGITAL SERVICE, TASK, CONCEPT, OR PROTOTYPE]

Session format and length: [INSERT REMOTE, TELEPHONE, OR IN-PERSON FORMAT] / [INSERT DURATION]

Screening dates: [MM/DD/YYYY - MM/DD/YYYY]

Thank you for your interest in an IRS digital feedback activity for tax professionals and firm staff. These questions help us determine whether the activity matches your role and experience and help us recruit a varied group of participants. The screener is voluntary and should take about 5 minutes. You may skip any question or stop at any time, and your decision will not affect your taxes, professional authorizations, or access to IRS services. The screener does not ask for your name, firm name, or client names. If you qualify and choose to continue, contact and scheduling information will be collected separately.

Important: Do not include names of clients or firms; SSNs, TINs, EINs, or CAF numbers; passwords or verification codes; contact information; account, card, notice, case, or authorization numbers; or other specific client or tax-account information.

Paperwork Reduction Act Burden Statement. Public reporting burden for this collection of information is estimated to average 5 minutes per response. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information to the Internal Revenue Service, Office of Online Services, User Experience Services, ashley.n.webb2@irs.gov. OMB Control Number 1545-2256.

Screening questions

Programming notes appear in gray italics and are not shown to respondents.

Q1. Are you 18 years of age or older?

☐ Yes
☐ No
☐ Prefer not to answer

If “No” or “Prefer not to answer,” show the not-eligible closing message.

Q2. Which of the following describes your current or former work relationship with the IRS or the U.S. Department of the Treasury?

☐ I currently work for the IRS
☐ I currently work for another Treasury office or bureau
☐ I currently work for a contractor supporting the IRS or Treasury
☐ I previously worked for the IRS or Treasury
☐ None of these
☐ Prefer not to answer

Current IRS or Treasury employees and current support contractors are not eligible for this external screener. Former personnel may continue when allowed by the approved quota plan.

Q3. Which of the following best describes your tax-professional or firm role? Select all that apply.

☐ Certified Public Accountant (CPA)
☐ Enrolled Agent
☐ Attorney
☐ Enrolled Actuary or Enrolled Retirement Plan Agent
☐ Annual Filing Season Program participant or another limited-representation preparer
☐ Unenrolled return preparer
☐ Firm staff member or delegate performing assigned client work
☐ Firm owner, partner, principal, manager, or administrator
☐ Operations, technology, or administrative support for a tax practice
☐ VITA/TCE or another volunteer tax-assistance role only
☐ Another tax-related professional role
☐ None of these
☐ Prefer not to answer

If the respondent selects only the volunteer role, “None of these,” or “Prefer not to answer,” show the not-eligible closing message unless another listed private-sector role is also selected.

Q4. How long have you performed tax-related work?

☐ Less than 1 year

☐ 1 to 5 years
☐ 6 to 10 years
☐ 11 to 20 years
☐ 21 years or more
☐ Prefer not to answer

Use for quotas and analysis. Do not exclude newer professionals unless the approved activity requires prior experience.

Q5. Which statement best describes your experience with [INSERT TAX-PROFESSIONAL SERVICE OR EXPERIENCE] during the past 12 months?

☐ I used it and completed at least part of a professional task
☐ I tried to use it but could not access it or complete the task
☐ I knew about it but used another IRS service or channel instead
☐ I have not used it, but my work may reasonably require it during the next 12 months
☐ It is not relevant to my work
☐ I am not sure

The first four responses may qualify. If the service is not relevant, show the not-eligible closing message. Use "I am not sure" only when the approved activity includes an account-status-uncertain or prospective-user group.

Q6. Which types of authority or access do you use in your work? Select all that apply.

☐ Power of Attorney or other authority to represent a taxpayer
☐ Tax Information Authorization or other authority to receive information
☐ Limited representation authority
☐ Delegated or assigned work under another professional or firm
☐ Responsibility for firm access, employee access, or Business CAF-related administration
☐ I prepare returns but do not use these authorities
☐ None of these
☐ Not sure
☐ Prefer not to answer

Do not request CAF numbers, client identifiers, authorization numbers, or documents.

Q7. Which tax-professional workflows did you handle during the past 12 months? Select all that apply.

☐ Submit, manage, or track Power of Attorney or Tax Information Authorization requests
☐ Represent clients on notices, cases, examinations, or unresolved issues
☐ Access transcripts, records, or information for return preparation
☐ Manage Business CAF, firm access, employee access, or firm workflow
☐ Complete delegated or assigned client work
☐ Handle business or entity clients
☐ Handle estate, trust, decedent, international, or ITIN-related work
☐ Manage a high volume of clients, authorizations, or cases
☐ Use public IRS.gov professional forms, guidance, or service entry points
☐ Another tax-professional workflow
☐ None of these
☐ Not sure

Treat the final two options as exclusive. Do not request client names, TINs, case numbers, notice numbers, or documents.

Q8. Which of those workflows was most important or most frequent?

☐ Carry forward the workflow categories selected in Q7
☐ Not sure

Q9. About how many Power of Attorney or Tax Information Authorization requests do you personally submit or manage in a typical year?

☐ None
☐ 1 to 9
☐ 10 to 49
☐ 50 to 199
☐ 200 or more
☐ Not sure
☐ Prefer not to answer

Use broad ranges for workload quotas. "None" does not automatically exclude respondents from information-access, firm, delegated, or prospective-user activities.

Q10. Which device do you use most often for IRS professional digital tasks?

☐ Smartphone
☐ Tablet
☐ Laptop
☐ Desktop computer
☐ Shared or firm-managed computer
☐ Another device
☐ Not sure

Q11. Which of the following, if any, describe how you use websites, apps, or digital services? Select all that apply.

☐ I use a screen reader, magnification, enlarged text, or high-contrast settings
☐ I use a keyboard without a mouse, voice control, switch access, or another input method
☐ I use captions, transcripts, sign language, or text-based communication
☐ I use reading, memory, attention, or other cognitive supports
☐ I primarily or only use a mobile device
☐ I use a shared or public device
☐ I have limited or unreliable internet access
☐ None of these
☐ Prefer not to answer

Use these answers for inclusion, accessibility planning, and quotas. Do not exclude someone solely because one of these applies.

Q12. Would you be able to participate in a [INSERT FORMAT] feedback session lasting about [INSERT DURATION] during [INSERT DATE OR TIME WINDOW]?

☐ Yes
☐ Yes, with an accommodation or scheduling adjustment
☐ No
☐ Not sure

Q13. Would any of the following help you participate? Select all that apply.

☐ Captions, text chat, or text-based communication
☐ A sign language interpreter
☐ Materials compatible with a screen reader, keyboard, magnification, or another assistive technology
☐ Additional time, pauses, or breaks
☐ Telephone or in-person participation instead of video
☐ Another adjustment that can be discussed with the scheduler
☐ No adjustment needed
☐ Not sure
☐ Prefer not to answer

Do not ask for a diagnosis. Keep detailed accommodation information in the restricted scheduling or accessibility file.

Q14. This feedback activity may record [INSERT AUDIO, VIDEO, SCREEN, OR INTERACTION DATA]. Which option best describes your preference?

☐ I am willing to participate with the described recording
☐ I would participate in a notes-only session if available
☐ I am not willing to participate if recording is required
☐ I am not sure and would like more information

Show this question only when recording is part of the approved activity. Reconfirm consent at the session.

Programming and disposition instructions - not shown to respondents

Disposition	Fixed rule and use
QUALIFY	Q1 = Yes; Q2 does not indicate current IRS/Treasury employment or support-contractor work; Q3 confirms a private-sector tax-professional or firm role; Q5 and Q7 confirm a relevant current, attempted, or approved prospective workflow; and Q12 confirms an available participation path.
QUOTA_HOLD	The person is eligible, but the applicable role, experience, authority, workflow, workload, device, success/failure, or other approved quota is full.
INELIGIBLE	A fixed required criterion is not met. Do not infer credential validity, representation authority, client status, or IRS-account eligibility from the disposition.
DECLINED / BREAKOFF	The person declines or does not finish. Count the response for burden reporting and retain only what is permitted by the approved retention plan.
CONTACT SEPARATION	Do not place names, firm names, client information, email addresses, telephone numbers, incentive-

Disposition	Fixed rule and use
	payment information, or detailed scheduling or accommodation information in the analytic screener file.

Respondent-facing closing messages

Condition	Message shown
Eligible or quota available	Thank you. Based on your answers, you may be eligible for this feedback activity. If you choose to continue, contact and scheduling information may be requested in a separate approved system.
Eligible but quota full	Thank you for your interest. The current participant group is full, but your response has been recorded as eligible for this activity.
Not eligible	Thank you for your interest. This feedback activity is not the right fit based on the participant criteria. Your decision to participate or not participate will not affect your taxes or access to IRS services.
Declined or breakoff	Thank you. You may stop at any time. Information that is no longer needed will be handled according to the approved retention and deletion procedures.