

Information Referral

(See instructions on reverse)

Use this form to report suspected tax law violations by a person or a business.

CAUTION: READ THE INSTRUCTIONS BEFORE COMPLETING THIS FORM. There may be other more appropriate forms specific to your complaint. (For example, if you suspect your identity was stolen, use Form 14039.)

Section A – Information About the Person or Business You Are Reporting

Complete 1, if you are reporting an Individual. Complete 2, if you are reporting a business only. Complete 1 and 2 if you are reporting a business and its owner. (Leave blank any lines you do not know.)

| | | | | | |
|--|--|--|--|---|----------------------|
| 1a. Name of individual MALCOLM NEIL SCHROYER SCHOEN | | b. Social Security Number/TIN UNKNOWN | | c. Date of birth UNKNOWN | |
| d. Street address UNKNOWN | | e. City LA PAZ, BAJA CALIFORNIA SUR, MEXICO | | f. State | g. ZIP code |
| h. Occupation CORRUPT PSUEDO POLITICIAN/MARINA OWNER | | i. Email address UNKNOWN | | | |
| j. Marital status (check one, if known) <input checked="" type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Head of Household <input type="checkbox"/> Divorced <input type="checkbox"/> Separated | | | | k. Name of spouse MARY | |
| 2a. Name of business MARINA DE LA PAZ (AND OTHERS) | | b. Employer Tax ID number (EIN) UNKNOWN | | c. Telephone number +52 (612) 122-1646 | |
| d. Street address TOPETE 3040 Y LEGASPI | | e. City LA PAZ, BAJA CALIFORNIA SUR, MEXICO | | f. State | g. ZIP code 23000 |
| h. Email address MARINADELAPAZ@PRODIGY.NET | | i. Website HTTP://WWW.MARINADELAPAZ.COM | | | |

Section B – Describe the Alleged Violation of Income Tax Law

3. Alleged violation of income tax law. (Check all that apply.)

| | | | |
|---|---|---|--|
| <input type="checkbox"/> False Exemption | <input type="checkbox"/> Unsubstantiated Income | <input checked="" type="checkbox"/> Unreported Income | <input type="checkbox"/> Failure to Withhold Tax |
| <input type="checkbox"/> False Deductions | <input type="checkbox"/> Eamed Income Credit | <input checked="" type="checkbox"/> Narcotics Income | <input checked="" type="checkbox"/> Failure to File Return |
| <input type="checkbox"/> Multiple Filings | <input checked="" type="checkbox"/> Public/Political Corruption | <input checked="" type="checkbox"/> Kickback | <input checked="" type="checkbox"/> Failure to Pay Tax |
| <input checked="" type="checkbox"/> Organized Crime | <input type="checkbox"/> False/Altered Documents | <input type="checkbox"/> Wagering/Gambling | <input type="checkbox"/> Other (describe in 5) |

4. Unreported income and tax years
Fill in Tax Years and dollar amounts, if known (e.g., TY 2010- \$10,000)

TY _____ \$ _____ TY _____ \$ _____ TY _____ \$ _____ TY _____ \$ _____ TY _____ \$ _____ TY _____ \$ _____

5. Comments (Briefly describe the facts of the alleged violation-Who/What/Where/When/How you learned about and obtained the information in this report. Attach another sheet, if needed.)

I DO NOT KNOW THE FACTS OF THIS MATTER EXCEPT AS I HAVE SEEN WITH REGARDS TO SPECIFIC CORRUPTION, AND GENERAL CORRUPT/ORGANIZED CRIMINAL ACTIVITY IN MARINA DE LA PAZ. SCHOEN WAS MADE DIRECTOR OF API, A PRIVATE ENTITY WHICH ACTS AS A GOVERNMENT BODY. I HAVE DIRECT EVIDENCE OF HIM VIOLATING MEXICAN LAW GIVING LAND DESIGNATED FOR COMMERCIAL USE TO A FRIEND FOR PRIVATE USE. I AM ALSO AWARE THAT MARINA DE LA PAZ MAKES INCREDIBLE AMOUNTS OF MONEY AND HOSTS BUSINESSES WHICH DO NOT PAY US OR MEXICAN TAXES TO THE TUNE OF MILLIONS OF TAX DOLLARS PER YEAR. UNLESS HE IS NO LONGER A US CITIZEN, THIS GUY IS YOUR NUMBER ONE TAX DODGER AND ORGANIZED CRIMINAL!!! HE IS RESPONSIBLE FOR MOST CORRUPTION IN LA PAZ! HE LEFT THE USA IN THE 1960S.

IF YOU GOOGLE "MALCOLM NEIL SCHROYER SCHOEN" AND SET THE COUNTRY TO MEXICO, YOU WILL FIND ALL OF THE PRESENT POSITIONS OCCUPIED BY SCHOEN, INCLUDING ON THE BCS TRANSPARANCY BOARD FOR ANTI CORRUPTION. THIS MAN IS HIGHLY CORRUPT, HIGHLY DANGEROUS WELL CONNECTED INDIVIDUAL. HIS FRIEND HE GAVE THE LAND TO USED ARMED MEN TO THREATEN ME FOR EXAMPLE!

6. Additional information. Answer these questions, if possible. Otherwise, leave blank.

a. Are book/records available? (If available, do not send now. We will contact you, if they are needed for an investigation.) Yes No

b. Do you consider the taxpayer dangerous? Yes No

c. Banks, Financial Institutions used by the taxpayer

| | | | | | |
|-----------------|-------|----------|-----------------|-------|----------|
| Name UNKNOWN | | | Name UNKNOWN | | |
| Street address | | | Street address | | |
| City | State | ZIP code | City | State | ZIP code |

Section C – Information About Yourself

(We never share this information with the person or business you are reporting.)

This information is not required to process your report, but would be helpful if we need to contact you for any additional information.

| | | | | | |
|--|--|---------------------------------------|--|--|-------------|
| 7a. Your name MICHAEL WOLF | | b. Telephone number (843) 695-9653 | | c. Best time to call VOICEMAIL ONLY | |
| d. Street address I LIVE IN LA PAZ, MEXICO TOO, MY LOCATION WILL REMAIN ANONYMOU. | | e. City | | f. State | g. ZIP code |

Please print and send your completed form to: Internal Revenue Service
Stop 31313
Fresno, CA 93888

Instructions for Form 3949-A, Information Referral

General Instructions

Purpose of the Form

Use Form 3949-A to report alleged tax law violations by an individual, a business, or both.

CAUTION: DO NOT USE Form 3949-A:

- o If you suspect your **identity was stolen**. Use [Form 14039](#). Follow "Instructions for Submitting this Form" on Page 2 of Form 14039.
- o To report suspected **misconduct by your tax return preparer**. Use [Form 14157](#). Submit to the address on the Form 14157.
- o If your **paid preparer** filed a return or made changes to your return **without your authorization**. Instead, use [Form 14157](#) AND [Form 14157-A](#). Submit both to the address on the Form 14157-A.
- o If **you received a notice** from the IRS about **someone claiming your exemption or dependent**. Follow the instructions on the notice. Do not complete Form 3949-A.
- o To report an **abusive tax avoidance scheme, promotion, or a promoter** of such a scheme. Use [Form 14242](#). Mail or FAX to the address or FAX number on the Form 14242.
- o To report misconduct or **wrongdoing by a tax exempt organization** or its officers, directors, or authorized persons. Use [Form 13909](#). Submit by mail, FAX, or email, according to the instructions on the Form 13909.

Have information and want to claim a reward? Use Form 211, Application For Award For Original Information. Mail it to the address in the Instructions for the form.

Specific Instructions

Section A – Provide Information About the Person/Business You Are Reporting, if known.

Provide as much information as you know about the person or business you are reporting.

1. **Complete if you are reporting an individual.** Include their name, street address, city, state, ZIP code, social security number or taxpayer identification number, occupation, date of birth, marital status, name of spouse (if married), and email address. Include as much information as you know.
2. **Complete if you are reporting a business.** Include the business name, business street address, city, state, ZIP code, employer identification number (EIN), telephone number(s), email address, and website, if known.
Note: Complete both parts if you are reporting a business and its owner.

Section B – Use to Describe the Alleged Tax Law Violation(s)

3. Check all Tax Violations That Apply to Your Report.

False Exemption- Claimed persons as dependents they are not entitled to claim.

False Deductions- Claimed false or exaggerated deductions to reduce their taxable income.

Multiple Filings- Filed more than one tax return to receive fraudulent refunds.

Organized Crime- Member of a group of persons who engaged in illegal enterprises such as drugs, gambling, loansharking, extortion, or laundering illegal money through a legitimate business.

Unsubstantiated Income- Reported false income from an unverifiable source in order to get a false refund.

Earned Income Credit- Claimed Earned Income Credit which they were not entitled to receive. They may have reported income they did not earn or claimed children they were not entitled to claim.

Public/Political Corruption- Public official or politician violated laws against using their position illegally for personal gain.

False/Altered Documents- Changed documents, such as a W-2 or Form 1099, or created fake documents to substantiate a false refund.

Unreported Income- Received cash or other untraceable payments, such as goods or services, and did not report the income.

Narcotics Income- Received income from illegal drugs or narcotics.

Kickback- Received illegal payments or kickbacks in exchange for referring the business of a government agency or other business towards a company or for influencing business decisions that result in part of the payment for the business received or service performed being returned to the person who made the referral.

Wagering/Gambling- Did not report income received from wagering or gambling.

Failure to Withhold Tax- Individual or business did not withhold legally owed taxes from income paid to their employee(s), such as Social Security or Medicare taxes. Example: A business treated employees as independent contractors and issued Forms 1099, with no tax withheld, instead of a W-2.

Failure to File Return- Individual or business has not filed returns legally due.

Failure to Pay Tax- Individual or business has not paid taxes legally due.

Other- Describe in 5.

4. If your report involves unreported income, indicate the year(s) and the dollar amount(s).
5. Briefly describe the facts of the alleged tax law violation(s) as you know them. Please attach another sheet, if you need more room.
6. Additional Information, if known. Attach another sheet, if you need more room.

Section C – Provide Information about Yourself

7. Note: Information about yourself is NOT required to process your report, but may be helpful if we need additional information.

Please print and send your completed form to the Internal Revenue Service at:

Internal Revenue Service
Stop 31313
Fresno, CA 93888

Paperwork Reduction Notice

We ask for the information on this form to carry out the Internal Revenue laws of the United States. This report is voluntary and the information requested helps us determine if there has been a violation of Income Tax Law. We need it to insure that taxpayers are complying with these laws and to allow us to figure and collect the right amount of tax.

You are not required to provide the information on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administrations of any Internal Revenue laws. Generally, tax returns and tax return information are confidential, as required by Code section 6103.

The time required to complete this form will vary depending on individual circumstances. The estimated average time is 15 minutes.

Privacy Act Notice

We are requesting this information under authority of 26 U.S.C. 7801. The primary purpose of this form is to report potential violations of the Internal Revenue laws. The information may be disclosed to the Department of Justice to enforce the tax laws. Providing the information is voluntary. Not providing all or part of the information will not affect you.

Form **211**
(July 2018)

Department of the Treasury - Internal Revenue Service

Application for Award for Original Information

OMB Number 1545-0409

Date Claim received

Claim number (completed by IRS)

Section A – Information About the Person or Business You Are Reporting

| | | | |
|---|--|--|--|
| 1. Is this <input type="checkbox"/> New submission or <input checked="" type="checkbox"/> Supplemental submission If a supplemental submission, list previously assigned claim number(s) prior claim not processed or not given claim number - form 3494A filed 2 February 2018 | | 2. Last 4 digits of Taxpayer Identification Number(s) (e.g., SSN, ITIN, or EIN) | |
| 3. Name of taxpayer (include aliases) and any related taxpayers who committed the violation MALCOLM NEIL SHROYER SCHOEN | | 5. Taxpayer's date of birth or approximate age AGE APPROXIMATELY 95 | |
| 4. Taxpayer's address, including ZIP code TAXPAYER LIVES IN LA PAZ, BAJA CALIFORNIA SUR, MEXICO. HIS ADDRESS IS PUBLIC RECORD | | 6. Name and title and contact information of IRS employee to whom violation was first reported, if known UNKNOWN, NO RESPONSE GIVEN | |
| 7. Alleged Violation of Tax Law (check all that apply) | | | |
| <input checked="" type="checkbox"/> Income Tax <input type="checkbox"/> Employment Tax <input type="checkbox"/> Estate & Gift Tax <input type="checkbox"/> Tax Exempt Bonds <input type="checkbox"/> Employee Plans <input type="checkbox"/> Governmental Entities <input type="checkbox"/> Exempt Organizations <input type="checkbox"/> Excise <input checked="" type="checkbox"/> Other (identify) <u>ORGANIZED CRIME, CORRUPTION, TREASON</u> | | | |
| 8. Describe the Alleged Violation. State all pertinent facts to the alleged violation. (Attach a detailed explanation and include all supporting information in your possession and describe the availability and location of any additional supporting information not in your possession.) Explain why you believe the act described constitutes a violation of the tax laws ATTACHED | | | |
| 9. Describe how you learned about and/or obtained the information that supports this claim. (Attach sheet if needed) ATTACHED | | | |
| 10. What is your relationship (current and former) to the alleged noncompliant taxpayer(s)? Check all that apply. (Attach sheet if needed) | | | |
| <input type="checkbox"/> Current Employee <input type="checkbox"/> Former Employee <input type="checkbox"/> Attorney <input type="checkbox"/> CPA <input type="checkbox"/> Relative/Family Member <input checked="" type="checkbox"/> Other (describe) <u>FIRSTHAND RESEARCH INTO PUBLIC RECORDS - FRAUD IS WELL DOCUMENTED</u> | | | |
| 11. Do you still maintain a relationship with the taxpayer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | |
| 12. If yes to number 11, describe your relationship with the taxpayer | | | |
| 13. Are you involved with any governmental or legal proceeding involving the taxpayer <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| 14. If yes to number 13, Explain in detail. (Attach sheet if needed) | | | |
| 15. Describe the amount of tax owed by the taxpayer(s). Provide a summary of the information you have that supports your claim as to the amount owed (i.e. books, ledgers, records, receipts, tax returns, etc). (Attach sheet if needed) UNKNOWN - TAXPAYER HAS BEEN IN MEXICO SINCE 1960S | | | |
| 16. Fill in Tax Year (TY) and Dollar Amount (\$), if known TY _____ \$ _____ TY _____ \$ _____ TY _____ \$ _____ TY _____ \$ _____ TY _____ \$ _____ | | | |

Section B – Information About Yourself

| | | | | | |
|--|--|---|--|---|--|
| 17. Name of individual claimant MICHAEL WOLF | | 18. Claimant's date of birth (MMDDYYYY) 07101968 | | 19. Last 4 digits of Claimant's SSN or ITIN 2647 | |
| 20. Are you currently an IRS employee <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | 21. Are you the spouse or a dependent of an IRS employee <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | |
| 22. Are you currently an IRS contractor <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | 23. Are you a Federal, State or Local Government employee <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | |
| 24. Address of claimant, including ZIP code LAP 145 PO BOX 439056 SAN YSIDRO, CA 92143-9056 | | | 25. Telephone number (including area code) 8436959653 | | |
| | | | 26. Email address | | |
| 27. Declaration under Penalty of Perjury I declare that I have examined this application, all accompanying statement and supporting documentation, and, to the best of my knowledge and belief, they are true, correct, and complete | | | | | |

Signature of Claimant

Date

Instructions for Form 211, Application for Award for Original Information

General Information: The Whistleblower Office has responsibility for the administration of the whistleblower award program under section 7623 of the Internal Revenue Code. Section 7623 authorizes the payment of awards from the proceeds of amounts the Government collects as a result of the information provided by the whistleblower. A claimant must file a formal claim for award by completing and sending Form 211, Application for Award for Original Information, to be considered for the Whistleblower Program.

Send completed form along with any supporting information to: Internal Revenue Service
Whistleblower Office - ICE
1973 N. Rulon White Blvd.
M/S 4110
Ogden, UT 84404

Instructions for Completion of Form 211:

Question 1 If you have not previously submitted a Form 211 regarding the same or similar non-compliant activities, or the taxpayer(s) identified in this information have no known relationship to the taxpayer(s) identified in a previously submitted Form 211, check the box for "new submission."

If you are providing additional information regarding the same or similar non-compliant activities, and are identifying additional non-complaint activities by the same taxpayer(s), check the box for "supplemental submission." If you are identifying additional taxpayers involved in the same or similar tax non-compliance identified on a previously submitted Form 211, and those additional taxpayers are related to the taxpayer(s) identified on a previously submitted Form 211, check the box for "supplemental submission." If this is supplemental information, list previously assigned claim number(s).

Questions 2 – 5 Information about the Taxpayer – Provide the taxpayer's name, address, taxpayer identification number – last 4 digits (if known), and the taxpayer's date of birth or approximate age.

Question 6 If you reported the violation to an IRS employee; please provide the employee's name, title and the date the violation was reported. If known, provide contact information.

Questions 7 - 8 Indicate the type of tax that has not been paid or the tax liability that has not been reported and describe the alleged violation. Explain why you believe the act described constitutes a violation of the tax laws. Attach all supporting documentation (for example, books and records) to substantiate the claim. If documents or supporting evidence are not in your possession, describe these documents and their location.

Questions 9 - 14 These questions ask how and when you learned of the alleged violation and what relationship, if any, you have to the taxpayer.

Questions 15 – 16 These questions are asking for an estimate of the tax owed and the years/periods that the tax applies.

Questions 17 – 26 Information about the claimant – Provide the claimant's name, address, date of birth, SSN or ITIN (last 4 digits), email address, and telephone number.

Question 27 Information provided in connection with a claim under this provision of law must be made under an original signed Declaration under Penalty of Perjury. For joint or multiple claimants. Form 211 must be signed by each claimant.

Privacy Act and Paperwork Reduction Act Notice

We ask for the information on this form to carry out the internal revenue laws of the United States. Our authority to ask for this information is 26 USC 6109 and 7623. We collect this information for use in determining the correct amount of any award payable to you under 26 USC 7623. We may disclose this information as authorized by 26 USC 6103, including to the subject taxpayer(s) as needed in a tax compliance investigation and to the Department of Justice for civil and criminal litigation. You are not required to apply for an award. However, if you apply for an award you must provide as much of the requested information as possible. Failure to provide information may delay or prevent processing your request for an award; providing false information may subject you to penalties.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any internal revenue law. Generally, tax returns and return information are confidential, as required by 26 U.S.C. 6103.

The time needed to complete this form will vary depending on individual circumstances. The estimated average time is 45 minutes. If you have comments concerning the accuracy of these time estimates or suggestions for making this form simpler, we would be happy to hear from you. You can email us at "taxforms@irs.gov (please type "Forms Comment" on the subject line) or write to the Internal Revenue Service, Tax Forms Coordinating Committee, SE: W: CAR: MP: T: T: SP, 1111 Constitution Ave. NW, IR-6406, Washington, DC 20224.

Send the completed Form 211 to the above Ogden address of the Whistleblower Office. Do NOT send the Form 211 to the Tax Forms Coordinating Committee.

FORM 211

8. Alleged violations:

Taxpayer came to Mexico in the 1960s (see attached convenient biography). He started a panga business, which failed, then started a marina. He is at the top of a large web of corruption which encompasses the whole of the state and local governments and includes many federal entities as well. He also created API, a corrupt private corporation which, in violation of international laws, claims private property rights to shorelines and seabeds, and prevents public use of public waterways. Malcolm, or "Mac" Shroyer is also involved in many government bodies such as ITAI, the local anti-corruption body, as well as the marina and tourism trade organizations.

This complaint is based on the assumption that Mr. Shroyer is still a US citizen, and is not paying taxes on all of his income.

9. How Discovered:

Violations were fairly obvious to any intelligent person. Mac Shroyer is an American. He is corrupt. He runs a marina. That marina is the most important in the state. Mac Shroyer is on the board of ITAI, a corrupt organization that hides corruption on the part of the state government. AND, the attached documents demonstrate a corrupt transaction wherein Mac Shroyer gave coastal land to a foreigner for private use in violation of every law and the constitution of Mexico. The specific law is attached, as is the contract giving use of the land to the foreigner. What is missing is the document which shows title transfer, because it does not exist and never did. The son of the man given the property threatened me and tried to extort money from me after I went on the property to photograph it for a proposal to the state, the titled owner according to public records search. Further, an internet search for "Malcolm Neil Shroyer Schoen" will reveal his public dealings. The only real investigation on the part of the IRS necessary for this case is determining if Mac Shroyer is still liable for US taxes or not, or if he denounced his citizenship and is just a corrupt Mexican now.