



# JUNK FOOD TAX RETURN

EIN/SSN : \_\_\_\_\_

Check box if AMENDED and enter correct Reporting Period being "amended"

Reporting Period : 1st 2nd 3rd 4th 20\_\_\_\_  
*Circle One*

Business Name	Mailing Address <i>Check here if mailing address has changed</i>
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Line	Business Description	Bus. Class	Chpt. Code	Column 1	ONTC OFFICE USE ONLY
				Gross Receipts	
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.	<b>Total from Form 1101</b> .....			\$	

15. <b>Subtotal</b> (Add Lines 1 thru 14) .....	\$				
16. <b>Tax</b> (Multiply Line 15, Column 1 by 2%) .....	\$				
17. <b>Tax paid with extension request</b> [Form 145 must have been timely filed] .....	-	(		)	
18. <b>TOTAL TAX DUE</b> (Subtract Line 17 from Line 16) .....	=	\$			

Check here if payment was wire transferred

I declare that the information contained in this document and any attachments thereto is true and correct to the best of my knowledge and belief pursuant to all Navajo Nation laws and regulations.

\_\_\_\_\_  
Taxpayer or Duly Authorized Agent Signature

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Print or Type Name

\_\_\_\_\_  
Date

A signature is required to make this return valid. This return must be filed even if you have no taxes to report.