



Tribal Sales Tax Report
Tohono O'odham Nation
 P.O. Box 837
 Sells, Arizona 85634

Tribal License No.

 Report Month Year

Business Name
 Business Address

Where to file: Tohono O'odham Nation, Accounting Department
 P. O. Box 837
 Sells, Arizona 85634

FOR RETAIL SALES ONLY

Monthly Returns: This statement must be filed and the taxes are due and payable on or before the first day of the second month next succeeding the month in which the tax accrues (i.e. January's tax liability is due on or before March 1). Any taxpayer who shall fail to pay such tax within five days from the date upon which such payment shall become due and payable is subject to a penalty of up to twenty-five percent (25%) of the amount of such tax, plus interest, at a rate of one percent (1%) per month or fraction thereof until paid.

Treasurer to correct error: If the taxpayer makes an error in computing the tax assessable against him, the Treasurer will correct such error, re-assess the proper amount of taxes and notify the taxpayer of this action by mailing to him a copy of the corrected assessment, and any additional tax for which such taxpayer may be liable must be paid within ten days after the receipts of such statement.

1) Gross Sales or Rentals.....	<input type="text"/>		
<u>Less Deductions:</u>			
2) Sales for Resale	<input type="text"/>	[Hatched Area]	
3) Motor Fuel (state tax already imposed)	<input type="text"/>		
4) Discounts and Refunds	<input type="text"/>		
5) Bad Debts (accrual reporting only)	<input type="text"/>		
6) Prescription drugs, eyeglasses and prosthesis.....	<input type="text"/>		
7) Miscellaneous Deductions	<input type="text"/>		
Explain: _____			
8) Other Misc. Deds.	<input type="text"/>		
Explain: _____			
9) Total Deductions (total of line 2 through 8)	<input type="text"/>		
10) Total Taxable Sales (1 - 9)	<input type="text"/>		
11) Tax Rate (5%)05
12) Tax Liability (10 x 11)	<input type="text"/>		

Tohono O'Odham Nation
Tribal Sales Tax
(Page 2)

12) Tax Liability (line 12 on pg. 1)		
13) Excess Tax Collected		[Hatched Area]
14) Penalty & Interest		
15) Total Additions to Liability (13 + 14)		
16) Net Tax Due (12 + 15)		
17) TOTAL REMITTANCE		

Please mail this return at least five (5) days prior to due date to prevent late penalties.

I _____ (print) affirm that this return has been examined by me and to the best of my knowledge is true and complete.

Signature: _____ Date: _____ Title: _____