



BUSINESS ACTIVITY TAX

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Salaries, Wages and other Compensation Paid to Navajos

Check box if AMENDED and enter correct PERIOD ENDED (below) being "amended"

Γaxpayer Name (Employer)					Reporting Period (Quarter)				
	Please Enter Whole Dollar Amounts in Columns 2, 3 and 4								
I.	1. Employee Name	Navajo Census Number	2. Salaries or Wages Paid	3. Other Compensation (e.g. fringe benefits)		4. Total of Column 2 and Column 3			
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II. Total from any Additional Pages									
Total Salaries and Wages Paid, Total Column 2									
Total Other Compensation (e.g. fringe benefits), Total Column 3									
III. Total Salaries, Wages, and Other Compensation, Total Column 4 and enter on Form 401, Line 5									