21 June 2021

Jonathan Kent Lee & Associates Suite 801A 100 WILLIAM STREET Woolloomooloo, NSW 2011

Dear Jonathan

#### Establishment of the PAPAMICHELE Super Fund (Fund)

Thank you for choosing our superannuation fund trust deed. The trust deed is fully up to date and incorporates all significant legislative developments under the Superannuation Industry (Supervision) Act 1993 (SIS Act).

The deed has been drafted in "plain English", and explains how the fund should operate and the powers of, and restrictions applying to, the trustee(s) of the fund when operating the fund, such as when:

- · Investing the assets of the fund;
- · Accepting contributions; and
- · Paying out benefits;

as well as administrative issues such as how changes to the trustee, or the deed itself, are to be made.

Part 1 of the deed ("How to read this deed") provides an overview of the contents of the deed.

For further information about registering and running a self managed superannuation fund (SMSF), please refer to the Australian Taxation Office's document "Register your fund", available at <a href="https://www.ato.gov.au/Super/Self-managed-super-funds/Setting-up/Register-your-fund/">https://www.ato.gov.au/Super/Self-managed-super-funds/Setting-up/Register-your-fund/</a>.

#### What do you or your clients need to do now?

A Documentation Summary is enclosed which identifies each document and specifies what is required to be done with each.

In summary, have the following documents signed or completed (all references are to the Documentation Summary):

- Initial trustee(s) or director(s) to read and sign the consent to act as Trustees/Directors of the Corporate Trustee (see item 1);
- Initial trustee(s) or director(s) to complete, sign and date a trustee declaration form in front of a witness (see item 2);
- Trustee(s) to complete and sign the Resolution of the Trustee in relation to the acceptance of Trusteeship and other procedural matters (see item 3). The Trustee(s) must also resolve to admit the members of the Fund once an application form has been received (see item 6);
- Trustee(s) must complete the application form for an Australian Business Number (ABN) registration for superannuation entities (also electing that the Fund is to become a regulated superannuation fund) and lodge the form with the Australian Taxation Office (see item 4);

- Trustee(s) must sign and date the product disclosure statement (PDS) and consider adopting the enclosed draft investment strategy before providing the PDS and membership application form to any prospective members (see item 5);
- Initial member(s) should complete, sign and date the enclosed application form for membership of the Fund. The member(s) should also consider making a non binding or binding death benefit nomination (see item 6);
- The trust deed for the Fund should be signed for and on behalf of the Fund by the Trustee(s) (see item 7). The Trustee(s) should also consider whether stamp duty is payable on the trust deed; and
- Sample Notice of Compliance to be completed and provided to any employer that is to contribute to the Fund.

The trust deed and accompanying documents should be kept in a safe place with the Fund's records and used as a reference tool by the Trustees in the administration of the Fund.

#### The fund will also need to comply with the SIS Requirements

As the Fund is a regulated SMSF, the trustee(s) are also required to, among other things:

- establish an investment strategy for the Fund (information about establishing an investment strategy can be obtained from the ATO's website: <a href="https://www.ato.gov.au/Super/Self-managed-super-funds/Investing/Your-investment-strategy/">https://www.ato.gov.au/Super/Self-managed-super-funds/Investing/Your-investment-strategy/</a>);
- ensure, in most cases, that all members are also trustees/directors of the corporate trustee for the Fund, and that no member may be an employee of another member (unless they are related);
- ensure that any trustees (or directors of the corporate trustee) are not disqualified from continuing to act as trustees (or directors of the corporate trustee) after they are appointed. Note that persons so disqualified include those who have been convicted of an offence involving dishonesty and those who are insolvent, those who have entered into arrangements with their creditors or who are bankrupt.

Please note that, since any employer is able to contribute to a superannuation fund, we do not set up these personal SMSFs with a participating employer (even if an employer is included on the instruction sheet). With regard to the Choice of Superannuation Fund rules, a Superannuation (super) – standard choice form can be obtained from the ATO from the following link: https://www.ato.gov.au/forms/superannuation-%28super%29-standard-choice-form/

Thank you again for choosing our service. If we can be of any assistance please do not hesitate to contact us.

Yours sincerely

&

NTAA Corporate

#### MEMBERSHIP APPLICATION FORM

# MICHELE PAPA and FRANCESCO CANDINI as trustees for PAPAMICHELE Super Fund (Trustees)

To the Trustees

I, MICHELE PAPA, of Unit 14, 127 Cook Road, Centennial Park, NSW 2021, apply to the Trustees to become a member of the PAPAMICHELE Super Fund (Fund) and agree that, should I be accepted as a member by the Trustees, I will be bound by the trust deed establishing the Fund (Trust Deed) and any subsequent amendments to the Trust Deed and that I will make any and all full disclosures in writing of information required by the Trustees.

# I acknowledge that:

- if I am an employee of any other member, I am also a relative of the other member(s); and
- I am not disqualified under the Superannuation Industry (Supervision) Act 1993 from holding the office of a Trustee or as a director of the Trustee.

I understand that it is not compulsory to provide the Trustees with my tax file number (TFN), but if I do not provide my TFN, concessional contributions will be taxed at the highest marginal tax rate plus the Medicare levy and the Fund will not be able to accept non-concessional contributions. In doing so, I acknowledge that the Trustees may use my TFN for lawful purposes, including disclosing my TFN to another superannuation fund where I request that my benefits in the Fund are transferred to that other superannuation fund.

If my TFN is quembership App	uoted below, I have consider plication Form: TFN 437	ed the above and decided to pro	vide my TFN to the Trustee(s) on my
		e to receive any death benefits pay	
- or -			
I nominate to	he following persons to be my	nominated superannuation depend	ants:
Surname	Given names	Relationship	% of total benefits

I acknowledge that the above nomination is not binding on the Trustee, and that if I so wish, I may prepare and provide to the Trustee a binding death benefit nomination.

I acknowledge that I have received a Product Disclosure Statement for the Fund, which details the nature of the Fund and the rights, benefits and risks that attach to my membership of the Fund.

I declare that the information I will provide to the Trustees and the contents of this application are true and correct.

Deted: 21/06/2021

COLOR

MICHELE PAPA

# BINDING DEATH BENEFIT NOMINATION FORM

#### **PAPAMICHELE Super Fund**

To: The Trustees of the PAPAMICHELE Super Fund

# I, MICHELE PAPA, of Unit 14, 127 Cook Road, Centennial Park, NSW 2021:

- 1 revoke all former binding death benefit nominations i have made (if any) in respect of my membership in the Fund and declare this to be my last binding death benefit notice; and
- 2 nominate the following persons to receive all benefits payable in respect of my membership in the Fund on or after my death:

Surname	Given name	Relationship	Specify \$ or % amount	Manner of Payment*
PAPA	GRAZIA	SISTER	100%	
		No.		
				*

If any person nominated in the above table should predecease me, then I direct the Trustees of the Fund to distribute the benefits allocated to that person equally among the remaining nominated persons. If there are no remaining nominated persons at the time of my death, I direct that the Trustees pay my superannuation benefits to the following persons or, if there are no persons nominated in the below table, to my legal personal representative.

Given name	Relationship	Specify \$ or % amount	Manner of Payment*
VINGEN 20	TATHER	50%	
ANNA	NOTHER	501	
	NINGEN 30	VINGENZO FATHER	VINDENZO FATHER 50%

<sup>\*</sup> If no Manner of Payment is specified, the Trustees of the Fund will have the discretion to pay the death benefits as one or more lump sums or as a pension.

- 3 I acknowledge that the nominated persons are:
  - (a) my dependants for the purposes of superannuation law being:
    - (i) a spouse
    - (ii) a child;
    - (iii) a person who is financially dependent on me; or
    - (IV) a person with whom I am in an interdependency relationship; or
  - (b) my legal personal representative.

Dated:02 108 12021

MICHELE PAPA

# Witness declaration

#### First witness

confirm that:

- this binding death benefit nomination form was signed and dated by MICHELE PAPA in my presence; and
- I am 18 years or more and am not a person nominated in this binding death benefit nomination form.

Dated: 2 / 06/21 Signature of witness

TIZIANA DE SANTIS

Name of witness (please print)

1-3 DALLEY ST. BOND JUNGION 2022

#### Second witness

Loonfirm that:

- this binding death benefit nomination form was signed and dated by MICHELE PAPA in my presence; and
- I am 18 years or more and am not a person nominated in this binding death benefit nomination form.

Dated: 2 18121

MIK KEGEV

BRELLA STREET, COOGEE NSW 2034

Address of witness (please print)

Important notice

You should seek legal advice if your personal or financial circumstances change or if you wish to amend or revoke your existing binding death benefit nomination. You should regularly review your binding death benefit nomination to ansure it still matches your carcumstances

If you wish to amend or revoke your binding death benefit nomination, the Trustees of the Fund can provide you with a form on request. The form should be witnessed by two people 18 years or over who are not named in the original binding nomination or the subsequent amendment or revocation.

We recommend the date the member signs the form should also be the date the witnesses sign the declaration to ensure the binding death benefit nomination is not challenged.

# BINDING DEATH BENEFIT NOMINATION CHECKLIST

# Checklist for the PAPAMICHELE Super Fund

mem	Der: MICI	HELE	PAPA				
Mem	ber requi	rement					
V	The	a nomin	ation must be in writing				
团	The	The nomination must be signed					
凼	The nomination must be dated						
図	The	nomin	ated dependants must be:				
	(a)	your !	superannuation dependants, which are:				
		(i)	your spouse;				
		(ii)	your children;				
		(iii)	a person who is financially dependent on you; or				
		(iv)	a person with whom you are in an interdependency relationship; or				
	764	your k	egal personal representative				
团	An i	nterdep	endency relationship is characterised by:				
	AIO.	a clos	e personal relationship with another person;				
	(b)	you liv	e together;				
	(c)	either	of you provides the other with financial support; and				
	(d)	either	of you provides the other with domestic support and personal care.				
团	You the b	will still pasis of	be considered to be in an interdependency relationship if you do not satisfy the above requirements on the physical, intellectual or psychiatric disability of either party.				
V	The	percent	ages allocated to the nominated beneficiary or beneficiaries must total 100%.				
Witnes	s require	ments					
凼	The	nominal	tion form must be signed by two witnesses				
V	The	witness	es must be at least 18 years				
Ø	The	The witnesses cannot be a nominated beneficiary					
V)	The v	vitnesse	es must sign a declaration stating that the member signed the nomination form in their presence				
Amend	ing the n						
V	The n	ominat	ion form should be revised if your personal or financial circumstances change				
egal a							
力	Yous	hould re	sceive legal advice every time you amend or revoke your binding death benefit nomination				
rust de							
d	You si and do	hould o	heck your superannuation deed to ensure that it allows you to make binding death benefit nominations impose any additional requirements				
ime fre	me						
J	The tru	ust dee	d for a self managed superannuation fund provides for a binding death benefit nomination to apply				