GRANTOR LETTER

TRUSTEE

Tax Year Ending: 12/31/20

Grantor Name & Address	Name of Trust				
	LIFE PARTNERS POSITION HOLDER TRUST				
Social Security Number:	Employer ID Number: 81-6950788				

THE FOLLOWING INCOME, DEDUCTIONS AND CREDITS ARE TO BE REPORTED ON THE FEDERAL INCOME TAX RETURN OF THE ABOVE NAMED GRANTOR, IF REQUIRED.

FEDERAL INFORMATION	
INCOME	
INTEREST INCOME	165.
OTHER INCOME	543.
OTHER INFORMATION	
LEGAL AND PROFESSIONAL FEES	733.

LIFE PARTNERS POSITION HOLDER TRUST

FEDERAL FOOTNOTES

DESCRIPTION

THE TOTAL AMOUNT OF OTHER INCOME SHOULD BE REPORTED ON LINE 3 OF PAGE 1 OF SCHEDULE E FOR FORM 1040. IN THAT REGARD, PLEASE NOTE: -THIS INCOME IS NOT SUBJECT TO SELF-EMPLOYMENT. -THE ACTIVITY IS NOT A PASSIVE ACTIVITY. -SELECT "8"" FOR THE TYPE OF PROPERTY AND INPUT ""OTHER PORTFOLIO INCOME"".

LEGAL AND PROFESSIONAL FEES SHOULD BE DEDUCTED ON LINE 10 OF PAGE 1 OF SCHEDULE E FOR FORM 1040.

EVEN THOUGH YOU DID NOT ACTUALLY RECEIVE FUNDS FROM THE TRUST EQUAL TO THE AMOUNTS SET FORTH IN THIS GRANTOR LETTER YOU ARE REQUIRED TO REPORT THE TAXABLE ITEMS ON YOUR TAX RETURN. THE AMOUNT OF THE DISTRIBUTION, IF ANY, MADE TO YOU BY THE TRUST DOES NOT MATCH ANY OF THESE AMOUNTS. IF YOU USE A TAX SOFTWARE TO PREPARE YOUR TAX RETURN, YOU MAY FIND IT DIFFICULT TO INPUT THE FOREGOING INFORMATION. IN THAT CASE PLEASE CONSULT YOUR TAX ADVISER OR CALL THE CUSTOMER SUPPORT NUMBER FOR YOUR TAX SOFTWARE. PLEASE DO NOT CALL THE TRUST OR ITS TAX PREPARER AS THERE IS NOTHING WE CAN DO TO ASSIST YOU IN THESE MATTERS. 81-6950788

AMOUNT

1040		rtment of the Treasury–Internal Revenue Servi S. Individual Income Tax		(99) turn	20	20	OMB No. 1545	5-0074	IRS Use Only	–Do not v	vrite or staple	in this space.
Filing Status Check only one box.	lf yo] Mari name of	ried filing	•) Head of ked the HOH c		hold (HOH)	🗌 Qua	alifying wid	low(er) (QW)
Your first name	and mi	ddle initial	Last n	ame						Your so	ocial securi	ty number
Joe			Invest	tor						000	0 0 0	000
If joint return, sp	first name and middle initial	Last n	ame						Spouse	's social se	curity number	
Home address (numbe	r and street). If you have a P.O. box, see	instruc	tions.				ŀ	Apt. no.	Check	here if you,	
City, town, or po	ce. If you have a foreign address, also co	omplete	spaces be	low.	Sta	ate	ZIP co	ode	to go to		ntly, want \$3 Checking a t change	
Foreign country	name			Foreign p	rovince/st	ate/cour	ity	Foreig	n postal code	1	x or refund	-
At any time dur	ing 20	20, did you receive, sell, send, exc	hange,	or otherv	vise acqu	uire any	financial intere	est in a	ny virtual cu	irrency?	🗌 Yes	🗌 No
Standard Deduction	_	eone can claim:	•		•		a dependent					
Age/Blindness	You:	Were born before January 2, 1	956	🗌 Are b	lind	Spouse	e: 📃 Was bo	rn befo	ore January	2, 1956	🗌 ls b	lind
Dependents	(see	instructions):		(2) 5	Social sec	urity	(3) Relations	hip	(4) 🖌 if q	ualifies fo	or (see instru	uctions):
If more	(1) Fi	rst name Last name			number		to you		Child tax c	redit	Credit for of	ther dependents
than four	. <u></u>			-								
dependents, see instructions				_			-					
and check												
here 🕨 📋											L	
Attach	1	Wages, salaries, tips, etc. Attach F		W-2 ,		1 2 2	2002 62 62 62 62	ж ж	94 - 94 - 94 - 14 1	× 1		
Attach Sch. B if	2a		2a			Ь٦	Taxable interes	t	8 8 X	. <u>2</u> t)	165
required.	<u>3a</u>	Qualified dividends	3a			1	Ordinary divide		a .a. a.	. <u>3t</u>)	
	4a	IRA distributions	4a			b	Faxable amour	nt. 👔	$(\mathbf{x}_{i},\mathbf{x}_{i}) \in \mathbf{A}_{i}$. 4t	>	
	5a	Pensions and annuities	5a			ЬТ	Faxable amour	nt. 🦽	2 (A. 199	. <u>5t</u>)	
Standard	6a	Social security benefits	6a			b 1	Faxable amour	nt. 🦽	a ar ar	. <u>6</u> t)	
Single or	7	Capital gain or (loss). Attach Sche	dule D	if require	d. If not i	required	l, check here		_a_, ► [7		
Married filing	8	Other income from Schedule 1, lin	e9.	(k) k; k;	× *	x a a	(A) (C) (A) (A)	$\rightarrow \infty$	(a - 2a) (a)	. 8		1810
separately, \$12,400	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8.	This is yo	our total	income			a - 500 / 600	▶ 9		1975
Married filing	10	Adjustments to income:										
jointly or Qualifying	а	From Schedule 1, line 22	6. 61				10	a				
widow(er), \$24,800	b	Charitable contributions if you take	the sta	andard de	duction.	See inst	tructions 10	b				
 Head of 	с	Add lines 10a and 10b. These are	your t o	otal adjus	stments	to inco	me			▶ 10	c	
household, \$18,650	11	Subtract line 10c from line 9. This	is your	adjusted	d gross i	income				▶ 11		
 If you checked 	12	Standard deduction or itemized	deduc	tions (fro	m Sched	dule A)			a	. 12	2	
any box under Standard	13	Qualified business income deduct	ion. At	tach Form	n 8995 o	r Form 8	8995-A			. 13	3	
Deduction,	14	Add lines 12 and 13							N	. 14	1	
see instructions.	15	Taxable income. Subtract line 14					er -0		91 39 990	15		
For Disclosure,		Act, and Paperwork Reduction Act N							No. 11320B			m 1040 (2020)

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form **1040** (2020)

Form 1040 (2020))									Page 2
	16	Tax (see instructions). Check	t if any from Form	(s): 1 📃 881	4 2 🗌 4972	3 🗌			16	
	17	Amount from Schedule 2, lin	ne3						17	
	18	Add lines 16 and 17							18	
	19	Child tax credit or credit for	other dependent	ts					19	
	20	Amount from Schedule 3, lin	ne7						20	
	21	Add lines 19 and 20							21	
	22	Subtract line 21 from line 18	3. If zero or less,	enter -0					22	
	23	Other taxes, including self-e	employment tax,	from Schedule	2, line 10 .				23	
	24	Add lines 22 and 23. This is	your total tax					. 🕨	24	
	25	Federal income tax withheld	from:							
	а	Form(s) W-2				25a				
	b	Form(s) 1099				25b				
	С	Other forms (see instruction	s)			25c				
	d	Add lines 25a through 25c							25d	
• If you have a	26	2020 estimated tax paymen	ts and amount a	pplied from 20	19 return .				26	
qualifying child,	27	Earned income credit (EIC)				27				
attach Sch. EIC.	28	Additional child tax credit. A	ttach Schedule	3812		28				
nontaxable combat pay,	29	American opportunity credit	from Form 8863	s, line 8		29				
see instructions.	30	Recovery rebate credit. See	instructions .			30				
	31	Amount from Schedule 3, lin	ne 13			31				
	32	Add lines 27 through 31. Th	ese are your tot a	al other paym	ents and refund	able credi	s	. 🕨	32	
	33	Add lines 25d, 26, and 32. 1	hese are your to	tal payments		<u></u>		. 🕨	33	
Refund	34	If line 33 is more than line 24	4, subtract line 2	4 from line 33.	This is the amou	unt you ove	rpaid		34	
	35a	Amount of line 34 you want			is attached, che	eck here .			35a	
Direct deposit?	►b	Routing number			► c Type:	Checking	🗌 S	avings		
See instructions.	►d	Account number								
	36	Amount of line 34 you want	applied to your	2021 estimate	dtax 🕨	36				
Amount	37	Subtract line 33 from line 24	I. This is the amo	ount you owe	now			. 🕨	37	
You Owe		Note: Schedule H and Sch	nedule SE filers,	line 37 may r	ot represent all	of the taxe	s you c	we for		
For details on how to pay, see		2020. See Schedule 3, line								
instructions.	38	Estimated tax penalty (see i				38				
Third Party		you want to allow another								—
Designee		structions				. 🕨 📋		-		
		signee's me ►		Phone no.				nal identi er (PIN) 🖡		
Sign		der penalties of perjury, I declare	that I have examine		accompanying sc	hedules and				t of my knowledge and
		lief, they are true, correct, and con								
Here	Yo	ur signature		Date	Your occupation					nt you an Identity
	Ν.								ection Pl inst.) 🕨	IN, enter it here
Joint return? See instructions.					<u> </u>				/-	
Keep a copy for	Sp	ouse's signature. If a joint return,	both must sign.	Date	Spouse's occupa	tion				nt your spouse an ection PIN, enter it here
your records.									inst.) 🕨	
	Ph	one no.		Email address						
Deid	Pre	eparer's name	Preparer's signat	ure		Date		PTIN		Check if:
Paid										Self-employed
Preparer	Firi	m's name 🕨	•				1	Phor	ne no.	
Use Only	Firi	m's address 🕨						Firm	's EIN ▶	•

Go to www.irs.gov/Form1040 for instructions and the latest information.

Form **1040** (2020)

SCHEDULE	В
(Form 1040)	

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

Interest and Ordinary Dividends

2020

OMB No. 1545-0074

▶ Go to www.irs.gov/ScheduleB for instructions and the latest information.
 ▶ Attach to Form 1040 or 1040-SR.

Attachment Sequence No. 08 Your social security number

Part I	1	List name of payer. If any interest is from a seller-financed mortgage and the buyer used the property as a personal residence, see the instructions and list this		Amo	ount	
Interest		interest first. Also, show that buyer's social security number and address ►				
(See instructions and the instructions for Forms 1040 and 1040-SR, line 2b.))	Interest from the PHT (Life Partners Trust)				165
Note: If you received a Form 1099-INT, Form 1099-OID, or substitute statement from a brokerage firm, list the firm's name as the payer and enter the total interest shown on that form.			1			
	2	Add the amounts on line 1	2			165
	3	Excludable interest on series EE and I U.S. savings bonds issued after 1989. Attach Form 8815	3			0
	4	Subtract line 3 from line 2. Enter the result here and on Form 1040 or 1040-SR, line 2b	4			165
	Note:	line 2b		Ame	ount	165
Part II	5	List name of payer				
Ordinary Dividends						
(See instructions and the instructions for Forms 1040 and 1040-SR, line 3b.))		5			
Note: If you received a Form 1099-DIV or substitute statement from a brokerage firm, list the firm's						
name as the payer and enter the ordinary dividends shown						
on that form.	6	Add the amounts on line 5. Enter the total here and on Form 1040 or 1040-SR, line 3b	6			
B		If line 6 is over \$1,500, you must complete Part III.				
Part III		nust complete this part if you (a) had over \$1,500 of taxable interest or ordinary dividen a account; or (c) received a distribution from, or were a grantor of, or a transferor to, a			Yes	No
Foreign Accounts and Trusts	7a	At any time during 2020, did you have a financial interest in or signature authority account (such as a bank account, securities account, or brokerage account) locat country? See instructions	ed in			
Caution: If required, failure to file FinCEN		If "Yes," are you required to file FinCEN Form 114, Report of Foreign Bank Accounts (FBAR), to report that financial interest or signature authority? See Find and its instructions for filing requirements and exceptions to those requirements.	CEN F	Form 114		
Form 114 may result in substantial	b	If you are required to file FinCEN Form 114, enter the name of the foreign cou financial account is located ▶	ntry v	where the		
penalties. See instructions.	8	During 2020, did you receive a distribution from, or were you the grantor of, or foreign trust? If "Yes," you may have to file Form 3520. See instructions	transfe	eror to, a		

SCHEDULE	Ε
(Form 1040)	

OMB No. 1545-0074

Supplemental Income and Loss (From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

Department of the Treasury
Internal Revenue Service (9
Name(s) shown on return

(Form 1	040)	(From	renta	l real estate, ro	yalties, partners	hips, S	6 corpora	ations,	estates,	trusts, REM	Cs, etc.)	ବ	020	`
Departme	partment of the Treasury Attach to Form 1040, 1040-SR, 1040-NR, or 1041.											/		
	levenue Service (99)			Go to www.irs.g	gov/ScheduleE f	or inst	tructions	and th	ne latest	information.		Seque	nce No. 1	3
Name(s)	shown on return										Your socia	al security	y number	
Joe Inv												000-00-		
Part					Estate and Ro	-		-						se
-				-	an individual, rep									
	•				ld require you to		• •							
					(s) 1099?			(Si (- 1633)		4 9 9 (6)	16 F F	φ Γ Υ	′es ⊔	NO
<u>1a</u>	Physical addr	ess of e	eacn p	property (street	t, city, state, ZIF	coa	e)							
B	-													
- C														
1b	Type of Prop	portv	2			n a who i l	lated		Fair	Rental	Persona			
10	(from list be		_	above, report t	l real estate pro the number of fa	iir rent	al and		· · ·	Days	Days		QJ	v
Α	8	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	a internet	personal use d	lays. Check the requirements to	QJV b	pox only	Α						
B	†		9	qualified joint v	enture. See inst	tructic	ons.	B						
C			-					C						
	of Property:													
	le Family Resid	dence	3	Vacation/Shor	rt-Term Rental	5 La	nd		7 Self-	Rental				
-	i-Family Reside		4	Commercial		6 Rc	oyalties		8 Othe	r (describe)	Other P	ortfolio I	ncome	
Incom	e:				Properties:			Α		B			С	
3	Rents received	d a a	90.76		04 580 0382 ¥0	3								
4	Royalties recei	ived .	NG 199	* * * * *	56 1960 - 1961 - 186	4			3543					
Expen	ses:													
5	Advertising .					5				1				
6	Auto and trave					6			10	<u>17</u>				
7	Cleaning and r					7								
8	Commissions.					8								
9	Insurance					9	7 0							
10	Legal and othe	•				10			1733					
11	Management f					11				<u>.</u>				
12	Mortgage inter					12	-			(d				
13 14	Other interest.				• • • •	14	<u>.</u>			<u>, 1</u>				
14	Repairs Supplies				05 - 850 - 1093 - 50	15				<u></u>				
16	Taxes				3• 395 31 <u>8</u> 3 •	16	1			2				
17	Utilities					17	5 / ·			9				
18	Depreciation e				· · · ·	18				- V-				
19	Other (list)	mponioe				19				-				
20	Total expenses	s. Add I		5 through 19		20			1733)
21					4 (royalties). If									
					out if you must									
	file Form 6198	3				21			1810					
22	Deductible ren				nitation, if any,		3.8		j)	2	J			
	on Form 8582				(* (*): (*) *)	22	()	()	(
23a			-		all rental prope		3 A		23a	-	3543			
b			•		all royalty prop	erties	÷ 0	61 - 193 1	23b					
C d			•		or all properties	8			23c					
d			•		or all properties	: :	• •	•	23d 23e		4700			
е 24					or all properties n line 21. Do no	t inclu	ide anv	100000		ŝ.	1733 . 24			1010
24 25					rental real estate		-			al losses her		(<u>1810</u>
												`		
26					ome or (loss). Dage 2 do not									
					e, include this a						. 26			1810
For Par					ate instructions				. No. 1134			nedule E (Form 104	
				,				2.00						,

										n on Schedule(s) K				
Part	_			-						If you report a loss,				
										t in column (e) on line o t at risk, you must o				
			orm 6198. See ins				non any a	noun	. 15 11	or at hox, you muse				
27	Are vo		loss not allowe	d in a n	rior year	dua	to the at-r	iek or	r has	sis limitations, a pr	orvoa		ed loss from	
21										d partnership expe				
			re completing th									. <u> </u>		
28		(a) Nan			(b) Enter F		(c) Check	: if		(d) Employer		Check if	(f) Check if any amount	
20					partnership or S corpo		foreign partnersh	ip		identification number		omputation equired	not at risk	
Α														
В														
С												<u> </u>		
D		Dessive Inc.	ome and Loss						Na	nnanaiva Incomo	and L			
	(-) D					(1) N -				npassive Income				
		ssive loss allowed rm 8582 if required		ssive inco chedule K			onpassive los ee Schedule		/ed	(j) Section 179 exp deduction from Form			passive income Schedule K-1	э
Α		· · ·												
B														
C														
D														
29a	Totals													
b	Totals													
30		umns (h) and (k	•								30			
31	Add columns (g), (i), and (j) of line 29b							31	()			
32			S corporation			;). Co	mbine line	es 30 a	and	31	32			
Part	III Inc	come or Loss	s From Estate	s and	Irusts									
33				(a)	Name								nployer ion number	
Δ														
A B														
		Pass	ive Income and	Loss						Nonpassive Ir	ncome	and Los	SS	
	(c) Pas	sive deduction or l	oss allowed		(d) Passiv	e inco	me		(e)	Deduction or loss		(f) Other in	ncome from	
	(at	tach Form 8582 if r	required)		from Sche	edule I	K-1		fro	m Schedule K-1		Sched	lule K-1	
Α														
В														
34a	Totals										_			_
b	Totals											1		
35		umns (d) and (f)		• •		• •		• •	•		35	(
36 37		imns (c) and (e)	income or (los	 N. Com	 hina lina		 and 26	• •	•		36 37	(
Part			-	-				t Co	ndu	 uits (REMICs)—F		ual Hold	ler	
			(b) Employer ider			-	inclusion fro			Faxable income (net loss			ome from	
38	(a)	Name	number				les Q, line 20 Istructions)	;		m Schedules Q, line 1b			s Q, line 3b	
							/							
39	Combine	e columns (d) a	nd (e) only. Ente	r the rea	sult here	and	include in	the to	otal	on line 41 below	39			
Part		mmary												
40			or (loss) from Fe								40			0
41	Total inco	me or (loss). Com	bine lines 26, 32, 37,	39, and 4	0. Enter the	e result	there and on	Sched	dule 1	(Form 1040), line 5►	41		1	810
42			ning and fishing											
			ne reported on F											
			le B; Schedule K orm 1041), box 1					42						
40								Taia	-					
43			te professionals. If net income or (loss											
			m 1040-NR from all											

43

Attachment Sequence No. 13

Page **2**

Your social security number

			a roa ootato	aoun	 	
you materially pa	articipated under the	e passive activity	loss rules .			

Schedule E (Form 1040) 2020

Name(s) shown on return. Do not enter name and social security number if shown on other side.

Department of the Treasury

Additional Income and Adjustments to Income

OMB No. 1545-0074

Attachment Sequence No. 01

Attach to Form 1040, 1040-SR, or 1040-NR.
 Go to www.irs.gov/Form1040 for instructions and the latest information.

Internal Revenue Service Go to www.irs.gov/F Name(s) shown on Form 1040, 1040-SR, or 1040-NR

Your social security number

Part I	Additional	Income
	/ (

1	Taxable refunds, credits, or offsets of state and local income taxes	1	
2a	Alimony received	2a	
b	Date of original divorce or separation agreement (see instructions)		
3	Business income or (loss). Attach Schedule C	3	
4	Other gains or (losses). Attach Form 4797	4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	5	1810
6	Farm income or (loss). Attach Schedule F	6	
7	Unemployment compensation	7	
8	Other income. List type and amount ►	8	
9	Combine lines 1 through 8. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8	9	1810
Par	t II Adjustments to Income		
10	Educator expenses	10	
11	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106	11	
12	Health savings account deduction. Attach Form 8889	12	
13	Moving expenses for members of the Armed Forces. Attach Form 3903	13	
14	Deductible part of self-employment tax. Attach Schedule SE	14	
15	Self-employed SEP, SIMPLE, and qualified plans	15	
16	Self-employed health insurance deduction	16	
17	Penalty on early withdrawal of savings	17	
18a	Alimony paid	18a	
b	Recipient's SSN		
С	Date of original divorce or separation agreement (see instructions)		
19	IRA deduction	19	
20	Student loan interest deduction	20	
21	Tuition and fees deduction. Attach Form 8917	21	
22	Add lines 10 through 21. These are your adjustments to income. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 10a	22	
For Pa	perwork Reduction Act Notice, see your tax return instructions. Cat. No. 71479F	Schedule 1 (Fo	orm 1040) 2020