

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code). <p style="text-align: center;">▶ Complete all entries in accordance with the instructions to the Form 5500.</p>	OMB Nos. 1210-0110 1210-0089 <div style="text-align: center; font-size: 1.2em; font-weight: bold;">2020</div> This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2020 or fiscal plan year beginning <u>01/01/2020</u> and ending <u>12/31/2020</u>	
A This return/report is for:	☐ a multiemployer plan ☐ a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.) ☒ a single-employer plan ☐ a DFE (specify) ____
B This return/report is:	☐ the first return/report ☐ the final return/report ☐ an amended return/report ☐ a short plan year return/report (less than 12 months)
C If the plan is a collectively-bargained plan, check here.	☐
D Check box if filing under:	☒ Form 5558 ☐ automatic extension ☐ the DFVC program ☐ special extension (enter description)

Part II	Basic Plan Information —enter all requested information				
1a Name of plan <u>PARTNERS GROUP (USA) INC. 401(K) PLAN</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">1b Three-digit plan number (PN) ▶</td> <td style="width: 20%; text-align: center;"><u>001</u></td> </tr> <tr> <td colspan="2">1c Effective date of plan <u>01/01/2001</u></td> </tr> </table>	1b Three-digit plan number (PN) ▶	<u>001</u>	1c Effective date of plan <u>01/01/2001</u>	
1b Three-digit plan number (PN) ▶	<u>001</u>				
1c Effective date of plan <u>01/01/2001</u>					
2a Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) <u>PARTNERS GROUP (USA) INC.</u> <u>1200 ENTREPRENEURIAL DRIVE</u> <u>BROOMFIELD, CO 80021</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>2b Employer Identification Number (EIN) <u>13-4118892</u></td> </tr> <tr> <td>2c Plan Sponsor's telephone number <u>212-908-2840</u></td> </tr> <tr> <td>2d Business code (see instructions) <u>523900</u></td> </tr> </table>	2b Employer Identification Number (EIN) <u>13-4118892</u>	2c Plan Sponsor's telephone number <u>212-908-2840</u>	2d Business code (see instructions) <u>523900</u>	
2b Employer Identification Number (EIN) <u>13-4118892</u>					
2c Plan Sponsor's telephone number <u>212-908-2840</u>					
2d Business code (see instructions) <u>523900</u>					

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE	Filed with authorized/valid electronic signature.	10/12/2021	GEORGETTE THOMAS
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

For Paperwork Reduction Act Notice, see the Instructions for Form 5500.

Form 5500 (2020)
v. 200204

3a Plan administrator's name and address ☒ Same as Plan Sponsor		3b Administrator's EIN	
		3c Administrator's telephone number	
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name		4b EIN 4d PN	
5 Total number of participants at the beginning of the plan year		5	420
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d).			
a(1) Total number of active participants at the beginning of the plan year.....		6a(1)	294
a(2) Total number of active participants at the end of the plan year		6a(2)	341
b Retired or separated participants receiving benefits.....		6b	0
c Other retired or separated participants entitled to future benefits		6c	97
d Subtotal. Add lines 6a(2) , 6b , and 6c		6d	438
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.		6e	0
f Total. Add lines 6d and 6e		6f	438
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)		6g	429
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested		6h	3
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item).....		7	
8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions: 2S 2T 3D 2E 2F 2G 2J 2K			
b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:			
9a Plan funding arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor		9b Plan benefit arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	
10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)			
a Pension Schedules (1) ☒ R (Retirement Plan Information) (2) ☐ MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) ☐ SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary		b General Schedules (1) ☒ H (Financial Information) (2) ☐ I (Financial Information – Small Plan) (3) ☐ <u>0</u> A (Insurance Information) (4) ☒ C (Service Provider Information) (5) ☐ D (DFE/Participating Plan Information) (6) ☐ G (Financial Transaction Schedules)	

Part III Form M-1 Compliance Information (to be completed by welfare benefit plans)

11a If the plan provides welfare benefits, was the plan subject to the Form M-1 filing requirements during the plan year? (See instructions and 29 CFR 2520.101-2.) ☐ Yes ☐ No

If "Yes" is checked, complete lines 11b and 11c.

11b Is the plan currently in compliance with the Form M-1 filing requirements? (See instructions and 29 CFR 2520.101-2.) ☐ Yes ☐ No

11c Enter the Receipt Confirmation Code for the 2020 Form M-1 annual report. If the plan was not required to file the 2020 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code _____

SCHEDULE C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110
		2020
		This Form is Open to Public Inspection.

For calendar plan year 2020 or fiscal plan year beginning 01/01/2020 and ending 12/31/2020		
A Name of plan PARTNERS GROUP (USA) INC. 401(K) PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 PARTNERS GROUP (USA) INC.	D Employer Identification Number (EIN) 13-4118892	

Part I	Service Provider Information (see instructions)
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You must complete this Part, in accordance with the instructions, to report the information required for **each person** who received, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of monetary value) in connection with services rendered to the plan or the person's position with the plan during the plan year. If a person received **only** eligible indirect compensation for which the plan received the required disclosures, you are required to answer line 1 but are not required to include that person when completing the remainder of this Part.

1 Information on Persons Receiving Only Eligible Indirect Compensation

- a** Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions).. ☒ Yes ☐ No
- b** If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL
04-2647786

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

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2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
37 60 64 65	RECORDKEEPER	1810	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☒ No ☐

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
			Yes ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
			Yes ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
			Yes ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
			Yes ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
			Yes ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

Part I Service Provider Information (continued)

3. If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received \$1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
VICTORY S SM CO OP I - FIS INVESTO 4249 EASTON WAY SUITE 400 COLUMBUS, OH 43219	0.10%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

Part II Service Providers Who Fail or Refuse to Provide Information

4 Provide, to the extent possible, the following information for each service provider who failed or refused to provide the information necessary to complete this Schedule.

(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
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(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide

Part III Termination Information on Accountants and Enrolled Actuaries (see instructions)
(complete as many entries as needed)

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2020 This Form is Open to Public Inspection
For calendar plan year 2020 or fiscal plan year beginning <u>01/01/2020</u> and ending <u>12/31/2020</u>		
A Name of plan <u>PARTNERS GROUP (USA) INC. 401(K) PLAN</u>	B Three-digit plan number (PN) ►	<u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>PARTNERS GROUP (USA) INC.</u>	D Employer Identification Number (EIN) <u>13-4118892</u>	

Part I	Asset and Liability Statement		
1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.			
Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash.....		1a	0
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions		1b(1)	277833
(2) Participant contributions.....		1b(2)	273852
(3) Other		1b(3)	0
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)		1c(1)	1786520
(2) U.S. Government securities		1c(2)	0
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred		1c(3)(A)	0
(B) All other.....		1c(3)(B)	0
(4) Corporate stocks (other than employer securities):			
(A) Preferred		1c(4)(A)	0
(B) Common		1c(4)(B)	0
(5) Partnership/joint venture interests		1c(5)	0
(6) Real estate (other than employer real property)		1c(6)	0
(7) Loans (other than to participants).....		1c(7)	0
(8) Participant loans		1c(8)	150916
(9) Value of interest in common/collective trusts		1c(9)	0
(10) Value of interest in pooled separate accounts		1c(10)	0
(11) Value of interest in master trust investment accounts		1c(11)	0
(12) Value of interest in 103-12 investment entities		1c(12)	0
(13) Value of interest in registered investment companies (e.g., mutual funds)		1c(13)	19263237
(14) Value of funds held in insurance company general account (unallocated contracts).....		1c(14)	0
(15) Other.....		1c(15)	0

		(a) Beginning of Year	(b) End of Year
1d	Employer-related investments:		
(1)	Employer securities.....	1d(1) 0	0
(2)	Employer real property.....	1d(2) 0	0
e	Buildings and other property used in plan operation	1e 0	0
f	Total assets (add all amounts in lines 1a through 1e)	1f 21752358	29944621
Liabilities			
g	Benefit claims payable	1g 0	0
h	Operating payables	1h 0	0
i	Acquisition indebtedness.....	1i 0	0
j	Other liabilities.....	1j 0	0
k	Total liabilities (add all amounts in lines 1g through 1j)	1k 0	0
Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l 21752358	29944621

Part II Income and Expense Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

		(a) Amount	(b) Total
a	Contributions:		
(1)	Received or receivable in cash from: (A) Employers	2a(1)(A) 1535151	
	(B) Participants	2a(1)(B) 4096506	
	(C) Others (including rollovers).....	2a(1)(C) 802633	
(2)	Noncash contributions	2a(2) 0	6434290
(3)	Total contributions. Add lines 2a(1)(A), (B), (C), and line 2a(2)	2a(3)	
b	Earnings on investments:		
(1)	Interest:		10167
(A)	Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A) 670	
(B)	U.S. Government securities	2b(1)(B) 0	
(C)	Corporate debt instruments	2b(1)(C) 0	
(D)	Loans (other than to participants)	2b(1)(D) 0	
(E)	Participant loans.....	2b(1)(E) 9497	
(F)	Other	2b(1)(F) 0	
(G)	Total interest. Add lines 2b(1)(A) through (F).....	2b(1)(G)	10167
(2)	Dividends: (A) Preferred stock.....	2b(2)(A) 0	598101
	(B) Common stock	2b(2)(B) 0	
	(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C) 598101	
(D)	Total dividends. Add lines 2b(2)(A), (B), and (C)	2b(2)(D)	598101
(3)	Rents	2b(3)	0
(4)	Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A) 0	0
	(B) Aggregate carrying amount (see instructions).....	2b(4)(B) 0	
	(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)	
(5)	Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A) 0	0
	(B) Other	2b(5)(B) 0	
	(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)	

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts.....	2b(6)		0
(7) Net investment gain (loss) from pooled separate accounts.....	2b(7)		0
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		0
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		3236950
c Other income	2c		-618
d Total income. Add all income amounts in column (b) and enter total.....	2d		10278890

Expenses**e** Benefit payment and payments to provide benefits:

(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	2020185	
(2) To insurance carriers for the provision of benefits	2e(2)	0	
(3) Other.....	2e(3)	0	
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		2020185
f Corrective distributions (see instructions)	2f		16825
g Certain deemed distributions of participant loans (see instructions).....	2g		47790
h Interest expense.....	2h		0
i Administrative expenses: (1) Professional fees	2i(1)	0	
(2) Contract administrator fees	2i(2)	0	
(3) Investment advisory and management fees	2i(3)	17	
(4) Other.....	2i(4)	1810	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		1827
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		2086627

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		8192263
l Transfers of assets:			
(1) To this plan.....	2l(1)		0
(2) From this plan	2l(2)		0

Part III Accountant's Opinion

3 Complete lines 3a through 3c if the opinion of an independent qualified public accountant is attached to this Form 5500. Complete line 3d if an opinion is not attached.

a The attached opinion of an independent qualified public accountant for this plan is (see instructions):

(1) ☐ Unmodified (2) ☐ Qualified (3) ☒ Disclaimer (4) ☐ Adverse

b Check the appropriate box(es) to indicate whether the IQPA performed an ERISA section 103(a)(3)(C) audit. Check both boxes (1) and (2) if the audit was performed pursuant to both 29 CFR 2520.103-8 and 29 CFR 2520.103-12(d). Check box (3) if pursuant to neither.

(1) ☒ DOL Regulation 2520.103-8 (2) ☐ DOL Regulation 2520.103-12(d) (3) ☐ neither DOL Regulation 2520.103-8 nor DOL Regulation 2520.103-12(d).

c Enter the name and EIN of the accountant (or accounting firm) below:

(1) Name: WITHUMSMITHBROWN, PC

(2) EIN: 22-2027092

d The opinion of an independent qualified public accountant is **not attached** because:

(1) ☐ This form is filed for a CCT, PSA, or MTIA. (2) ☐ It will be attached to the next Form 5500 pursuant to 29 CFR 2520.104-50.

Part IV Compliance Questions

4 CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete lines 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete lines 4j and 4l. MTIAs also do not complete line 4l.

During the plan year:

a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)

	Yes	No	Amount
4a		X	

	Yes	No	Amount
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)			
4b		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)			
4c		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)			
4d		X	
e Was this plan covered by a fidelity bond?	X		500000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
4f		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?			
4g		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?			
4h		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
4i	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)			
4j		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?			
4k		X	
l Has the plan failed to provide any benefit when due under the plan?			
4l		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)			
4m	X		
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			
4n	X		

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? ☐ Yes ☒ No
If "Yes," enter the amount of any plan assets that reverted to the employer this year _____.

5b If, during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) to which assets or liabilities were transferred. (See instructions.)

5b(1) Name of plan(s)	5b(2) EIN(s)	5b(3) PN(s)

5c Was the plan a defined benefit plan covered under the PBGC insurance program at any time during this plan year? (See ERISA section 4021 and instructions.) ☐ Yes ☐ No ☐ Not determined
If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year _____.

<div>SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation</div>	<div>Retirement Plan Information</div> <div>This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code).</div> <div>▶ File as an attachment to Form 5500.</div>	<div>OMB No. 1210-0110</div> <div>2020</div> <div>This Form is Open to Public Inspection.</div>
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For calendar plan year 2020 or fiscal plan year beginning 01/01/2020 and ending 12/31/2020

<div>A Name of plan PARTNERS GROUP (USA) INC. 401(K) PLAN</div>	<div>B Three-digit plan number (PN) ▶ 001</div>
<div>C Plan sponsor's name as shown on line 2a of Form 5500 PARTNERS GROUP (USA) INC.</div>	<div>D Employer Identification Number (EIN) 13-4118892</div>

Part I	Distributions
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All references to distributions relate only to payments of benefits during the plan year.

<div>1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....</div>	<div>1</div>
<div>2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): 04-6568107</div>	
<div>Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.</div>	
<div>3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year</div>	<div>3</div>

Part II	Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part.)
---------	--

<div>4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)?</div>	<div>☐ Yes ☐ No ☐ N/A</div>
<div>If the plan is a defined benefit plan, go to line 8.</div>	
<div>5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month _____ Day _____ Year _____ If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.</div>	
<div>6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived)</div>	<div>6a</div>
<div>b Enter the amount contributed by the employer to the plan for this plan year</div>	<div>6b</div>
<div>c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount).....</div>	<div>6c</div>
<div>If you completed line 6c, skip lines 8 and 9.</div>	
<div>7 Will the minimum funding amount reported on line 6c be met by the funding deadline?</div>	<div>☐ Yes ☐ No ☐ N/A</div>
<div>8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change?</div>	<div>☐ Yes ☐ No ☐ N/A</div>

Part III	Amendments
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<div>9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box.....</div>	<div>☐ Increase ☐ Decrease ☐ Both ☐ No</div>
--	--

Part IV	ESOPs (see instructions). If this is not a plan described under section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.
---------	--

<div>10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan?</div>	<div>☐ Yes ☐ No</div>
<div>11 a Does the ESOP hold any preferred stock?</div>	<div>☐ Yes ☐ No</div>
<div>b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.)</div>	<div>☐ Yes ☐ No</div>
<div>12 Does the ESOP hold any stock that is not readily tradable on an established securities market?</div>	<div>☐ Yes ☐ No</div>

For Paperwork Reduction Act Notice, see the Instructions for Form 5500.

Schedule R (Form 5500) 2020
v. 200204

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that contributed more than 5% of total contributions to the plan during the plan year (measured in dollars). See instructions. *Complete as many entries as needed to report all applicable employers.*

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

14 Enter the number of deferred vested and retired participants (inactive participants), as of the beginning of the plan year, whose contributing employer is no longer making contributions to the plan for:		
a The current plan year. Check the box to indicate the counting method used to determine the number of inactive participants: ☐ last contributing employer ☐ alternative ☐ reasonable approximation (see instructions for required attachment).....	14a	
b The plan year immediately preceding the current plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment).....	14b	
c The second preceding plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment).....	14c	
15 Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:		
a The corresponding number for the plan year immediately preceding the current plan year.....	15a	
b The corresponding number for the second preceding plan year.....	15b	
16 Information with respect to any employers who withdrew from the plan during the preceding plan year:		
a Enter the number of employers who withdrew during the preceding plan year.....	16a	
b If line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers.....	16b	
17 If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment. ☐		

Part VI	Additional Information for Single-Employer and Multiemployer Defined Benefit Pension Plans
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18 If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole or in part) of liabilities to such participants and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see instructions regarding supplemental information to be included as an attachment..... ☐	
19 If the total number of participants is 1,000 or more, complete lines (a) through (c)	
a Enter the percentage of plan assets held as: Stock: _____% Investment-Grade Debt: _____% High-Yield Debt: _____% Real Estate: _____% Other: _____%	
b Provide the average duration of the combined investment-grade and high-yield debt: ☐ 0-3 years ☐ 3-6 years ☐ 6-9 years ☐ 9-12 years ☐ 12-15 years ☐ 15-18 years ☐ 18-21 years ☐ 21 years or more	
c What duration measure was used to calculate line 19(b)? ☐ Effective duration ☐ Macaulay duration ☐ Modified duration ☐ Other (specify): _____	
20 PBGC missed contribution reporting requirements. If this is a multiemployer plan or a single-employer plan that is not covered by PBGC, skip line 20.	
a Is the amount of unpaid minimum required contributions for all years from Schedule SB (Form 5500) line 40 greater than zero? ☐ Yes ☐ No	
b If line 20a is "Yes," has PBGC been notified as required by ERISA sections 4043(c)(5) and/or 303(k)(4)? Check the applicable box: ☐ Yes. ☐ No. Reporting was waived under 29 CFR 4043.25(c)(2) because contributions equal to or exceeding the unpaid minimum required contribution were made by the 30th day after the due date. ☐ No. The 30-day period referenced in 29 CFR 4043.25(c)(2) has not yet ended, and the sponsor intends to make a contribution equal to or exceeding the unpaid minimum required contribution by the 30th day after the due date. ☐ No. Other. Provide explanation _____	

PARTNERS GROUP (USA) INC. 401(K) PLAN
Financial Statements
December 31, 2020 and 2019
With Independent Auditor's Report

Partners Group (USA) Inc. 401(k) Plan
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December 31, 2020 and 2019

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INDEPENDENT AUDITOR'S REPORT

To the Trustees,
Partners Group (USA) Inc. 401(k) Plan:

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of Partners Group (USA) Inc. 401(k) Plan (the "Plan"), which comprise the statements of net assets available for benefits as of December 31, 2020 and 2019, and the related statement of changes in net assets available for benefits for the year ended December 31, 2020, and the related notes to financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on conducting the audits in accordance with auditing standards generally accepted in the United States of America. Because of the matter described in the Basis for Disclaimer of Opinion paragraph, however, we were not able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion.

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the Plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 3, which was certified by Fidelity Management Trust Company ("Fidelity") and Ascensus Trust Company ("Ascensus"), the Trustees of the Plan, except for comparing such information with the related information included in the financial statements. We have been informed by the Plan administrator that the Trustees hold the Plan's investment assets and executes investment transactions. The Plan administrator has obtained certifications from Fidelity and Ascensus as of December 31, 2020 and for the year ended December 31, 2020 and from Ascensus as of December 31, 2019 that the information provided to the Plan administrator by the Trustees is complete and accurate.

Disclaimer of Opinion

Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we have not been able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion on the financial statements. Accordingly, we do not express an opinion on the accompanying financial statements.

Other Matter - Supplementary Schedule

The supplementary schedule, schedule H, part IV, line 4i - schedule of assets (held at end of year) as of December 31, 2020, is required by the Department of Labor's ("DOL") Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 and is presented for the purpose of additional analysis and are not a required part of the financial statements. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on this supplementary schedule.

Report on Form and Content in Compliance With DOL Rules and Regulations

The form and content of the information included in the financial statements and supplementary schedule, other than that derived from the information certified by the trustees, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

Withum Smith & Brown, PC

October 7, 2021

Partners Group (USA) Inc. 401(k) Plan
Statements of Net Assets Available for Benefits
December 31, 2020 and 2019

	<u>2020</u>	<u>2019</u>
Assets		
Investments, at fair value	\$ 29,614,920	\$ 21,049,757
Receivables		
Notes receivable from participants	133,716	150,916
Employer contributions receivable	193,985	277,833
Employee contributions receivable	<u>2,000</u>	<u>273,852</u>
Total receivables	<u>329,701</u>	<u>702,601</u>
Net assets available for benefits	<u>\$ 29,944,621</u>	<u>\$ 21,752,358</u>

The Notes to Financial Statements are an integral part of these statements.

Partners Group (USA) Inc. 401(k) Plan
Statement of Changes in Net Assets Available for Benefits
Year Ended December 31, 2020

Additions

Additions to net assets attributed to	
Investment income	
Net appreciation in fair value of investments	\$ 3,236,950
Dividend and interest income	<u>598,153</u>
	<u>3,835,103</u>
 Interest income on notes receivable from participants	 <u>9,497</u>
 Contributions	
Employee	4,096,506
Employer	1,535,151
Rollover	<u>802,633</u>
	<u>6,434,290</u>
 Total additions	 <u>10,278,890</u>

Deductions

Deductions from net assets attributed to	
Benefits paid	2,084,800
Administrative expenses	<u>1,827</u>
Total deductions	<u>2,086,627</u>

Net change in net assets available for benefits 8,192,263

Net assets available for benefits

Beginning of year	<u>21,752,358</u>
 End of year	 <u>\$ 29,944,621</u>

The Notes to Financial Statements are an integral part of this statement.

Partners Group (USA) Inc. 401(k) Plan
Notes to Financial Statements
December 31, 2020 and 2019

1. DESCRIPTION OF PLAN

The following brief description of the Partners Group (USA) Inc. 401(k) Plan (the “Plan”) is provided for general information purposes only. Participants should refer to the Plan agreement for more complete information.

General

The Plan is a participant directed, defined contribution plan qualifying under section 401(k) of the Internal Revenue Code (“IRC”) and is subject to the provisions of the Employee Retirement Income Security Act of 1974 (“ERISA”). The Plan was established for the purpose of providing eligible employees of Partners Group (USA) Inc. (the “Employer”) and their beneficiaries funds for retirement.

Eligibility

An employee of the Employer becomes an eligible participant in the Plan upon completing 3 consecutive months of service and the attainment of the age of 21. Employees may join the Plan on the first day of each month once they meet the eligibility requirements.

Employee Contributions

A participant in the Plan may annually contribute through payroll deductions, any amount up to 90% of pretax compensation not exceeding amounts as determined by the Internal Revenue Service (“IRS”). Any participant, age 50 or over, may make an additional “catch up” contribution as determined by the IRS. Participants direct the investment of their contributions into various investment options offered by the Plan. Rollover contributions are permitted into the Plan in accordance with IRS regulations and Plan provisions.

Employer Contributions

The Employer may annually elect to make a matching contribution equal to a discretionary percentage of the participant’s elective deferrals and/or a discretionary profit-sharing contribution. The Employer has elected to make discretionary matching contributions of \$1,535,151 for the year ended December 31, 2020 equal to 50% of eligible compensation up to 6%. The Employer has not elected to make a discretionary nonelective contribution for the year ended December 31, 2020.

Participant Accounts

Individual accounts are established for each participant. The Plan offers a variety of investments, with varying investment objectives as investment options. Each participant’s account is credited with the participant’s contributions, the Employer contributions, if any, and the proportionate share of dividends, interest, and investment gains since the preceding valuation date. The participant’s account is reduced by withdrawals, losses on investments, expenses of the Plan, and any forfeitures. The benefit to which a participant is entitled is the benefit that can be provided from the participant’s vested account.

Distributions and Withdrawals

Prior to the retirement age of 59½, distributions and withdrawals are not permitted from the Plan except in the instances of death, disability, termination of employment, or hardship as defined in the Plan document. A participant shall be considered 100% vested upon termination of service due to death or disability. Participants or their beneficiaries may receive a lump-sum amount equal to the value of the participant’s vested account balance. After attaining age 59½, 100% of the participant’s account may be withdrawn for any reason.

During 2020, the Plan operated in conformity with distribution provisions set forth under the Coronavirus Aid, Relief and Economic Security (“CARES”) Act. Such provisions included the ability for participants to withdraw up to \$100,000 tax-free and penalty-free between March 27, 2020 and December 31, 2020 if the participant determined he or she was a qualified individual under the CARES Act.

Partners Group (USA) Inc. 401(k) Plan
Notes to Financial Statements
December 31, 2020 and 2019

Notes Receivable from Participants

Any participant may borrow from their account a minimum of \$1,000 up to a maximum equal to the lesser of \$50,000 or 50% of their vested account balance. All loans are considered a direct investment of the participant and payments of principal and interest are credited to the participant's account. Interest is charged at a reasonable rate (as defined in the Plan agreement). Outstanding loans as of December 31, 2020 had interest rates ranging from 4.25% to 7.25%, with maturity dates through 2048.

Restrictions and repayment terms are described in the Plan document. A participant will only be permitted to have one outstanding loan at a given time. Principal and interest are paid ratably through bi-weekly payroll deductions.

During 2020, the Plan operated in conformity with loan provisions set forth under the CARES Act. Such provisions included the ability for participants to obtain a loan of up to the lesser of \$100,000 or 100% of the participant's vested balance between March 27, 2020 and September 23, 2020 if the participant determined he or she was a qualified individual under the CARES Act. A qualified individual could also delay repayments for up to 1 year for loan payments due between March 27, 2020 and December 31, 2020.

Vesting

A participant's interest in his or her contributions to the Plan will always be fully vested and nonforfeitable. A participant is vested in the Employer's contribution, if any, after one year of service.

A participant's "vested percentage" is based on vesting years of service. A participant earns and accumulates a year of vesting after 12 months of continuous service.

2. SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

The accounting records of the Plan are maintained under the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America. Under this method of accounting, contributions and investment income are recorded when earned, and expenses are recorded when incurred.

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires the Plan administrator to make estimates and assumptions that affect certain reported amounts of assets, liabilities, and changes therein, and disclosure of contingent assets and liabilities. Accordingly, actual results may differ from those estimates.

Valuation of Investments and Income Recognition

The Plan's investments are stated at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. Fair value measurements are discussed in Note 4.

The Plan presents, in the statement of changes in net assets available for benefits, the net appreciation or depreciation, including realized gains and losses on those investments. In addition, certain investment related fees have been reflected as an offset of net investment income and are not readily determinable.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation includes the Plan's gains and losses on investments bought and sold, as well as held during the year.

Partners Group (USA) Inc. 401(k) Plan
Notes to Financial Statements
December 31, 2020 and 2019

Administrative Expenses

The expenses necessary to administer the Plan, including but not limited to retaining necessary professional assistance from an attorney, an accountant, an actuary, or an investment advisor are paid by the Employer. All expenses except for account maintenance fees, transaction fees and investment fund management fees have been paid by the Employer. Transaction fees incurred by the trustees and registered investment companies are absorbed in investment income and are not readily determinable.

Participants are charged service fees for any loan and distribution transactions they request.

Payment of Benefits

Benefit payments to participants are recorded when paid.

Risks and Uncertainties

The Plan invests in various investment securities. Investment securities are exposed to various risks such as interest rate, market, and credit risks, and overall market volatility. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and those changes could materially affect participant's account balances and the amounts reported in the statements of net assets available for benefits.

Forfeited Accounts

Forfeited accounts are retained in the Plan and will be applied first to pay administrative costs of the Plan, with any excess used to reduce future Employer contributions. As of December 31, 2020 and 2019, the Plan had \$71,764 and \$53,245, respectively, of forfeited non-vested accounts. No forfeitures were applied to Plan expenses during the year ended December 31, 2020.

Notes Receivable from Participants

Notes receivable from participants are measured at their unpaid principal balance, plus any accrued but unpaid interest. Delinquent participant loans are reclassified as distributions based upon the terms of the Plan document.

3. INFORMATION CERTIFIED BY THE TRUSTEES

No auditing procedures were performed by the independent public accountants as permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA with respect to information certified as complete and accurate by Fidelity and Ascensus, the trustees of the Plan, except for comparing such information with the related information included in the financial statements. Based on information provided and certified by the trustees, there are no fixed income obligations, leases, or debt instruments in default or deemed uncollectible, as defined by ERISA, as of December 31, 2020 and 2019.

Partners Group (USA) Inc. 401(k) Plan
Notes to Financial Statements
December 31, 2020 and 2019

The following information as of and for the years ended December 31, 2020 and 2019 was prepared from reports certified by the trustees as complete and accurate:

	<u>2020</u>	<u>2019</u>
Investments, at fair value	\$ 29,614,920	\$ 21,049,757
Notes receivable from participants	\$ 133,716	\$ 150,916
Investment income		
Net appreciation in fair value of investments	\$ 3,236,950	\$ -
Dividend and interest income	\$ 598,153	\$ -
Interest income on notes receivable from participants	\$ 9,497	\$ -

4. FAIR VALUE MEASUREMENTS

The Financial Accounting Standards Board established a framework for measuring fair value. This framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value.

The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy are described as follows:

Level 1 - Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.

Level 2 - Observable inputs other than Level 1 prices, such as quoted prices for similar assets or liabilities; or other inputs that are observable or can be corroborated by observable market data for substantially the full term of the assets or liabilities.

Level 3 - Unobservable inputs that are supported by little or no market activity and that are financial instruments whose values are determined using pricing models, discounted cash flow methodologies, or similar techniques, as well as instruments for which the determination of fair value requires significant judgment or estimation.

The asset or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs.

The following is a description of the valuation methodologies used for the Plan's assets measured at fair value. There have been no changes in the methodologies used for the periods presented in these financial statements.

Money Market Funds: Money market funds are valued at quoted market prices which represent the fair value of the amount invested into the fund plus interest earned.

Mutual Funds: Valued at the daily closing price as reported by the fund. Mutual funds held by the Plan are open-end mutual funds that are registered with the Securities and Exchange Commission. These funds are required to publish their daily net asset value ("NAV") and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded.

Partners Group (USA) Inc. 401(k) Plan
Notes to Financial Statements
December 31, 2020 and 2019

The methods described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, while the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2020:

	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
Money market	\$ 1,243,931	\$ -	\$ -	\$ 1,243,931
Mutual funds	28,370,989	-	-	28,370,989
	<u>\$ 29,614,920</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ 29,614,920</u>

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2019:

	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
Money market	\$ 1,786,520	\$ -	\$ -	\$ 1,786,520
Mutual funds	19,263,237	-	-	19,263,237
	<u>\$ 21,049,757</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ 21,049,757</u>

The availability of observable market data is monitored to assess the appropriate classification of financial instruments within the fair value hierarchy. Changes in economic conditions or model-based valuation techniques may require the transfer of financial instruments from one fair value level to another. In such instances, the transfer is reported at the beginning of the reporting period. Plan management evaluated the significance of transfers between levels based upon the nature of the financial instrument and size of the transfer relative to total assets available for benefits. For the year ended December 31, 2020, there were no transfers in or out of Levels 1, 2 or 3.

5. PLAN TERMINATION

The Employer intends to continue the Plan indefinitely for the benefit of its employees, but reserves the right to modify, amend, or terminate the Plan at any time by resolution of its Board of Directors. In the event of termination of the Plan, all amounts credited to participant's accounts shall be 100% vested and non-forfeitable. All participants shall receive a total distribution of their accounts as described in the Plan. Any amount in the forfeiture account upon termination which has not been applied to reduce the Employer contribution shall be allocated on a pro rata basis to the participant's accounts.

6. INCOME TAX STATUS

The Plan obtained its latest opinion letter on March 31, 2014, in which the IRS stated that the Plan, as then designed, was in compliance with the applicable sections of the IRC. The Plan has been amended since receiving the opinion letter. However, the Plan administrator and the Plan's tax counsel believe that the Plan is currently designed and being operated in compliance with the applicable requirements of the IRS. Therefore, no provision for income taxes has been included in the Plan's financial statements.

Partners Group (USA) Inc. 401(k) Plan
Notes to Financial Statements
December 31, 2020 and 2019

Accounting principles generally accepted in the United States of America require Plan management to evaluate tax positions taken by the Plan and recognize a tax liability if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. The Plan administrator has analyzed the tax positions taken by the Plan, and has concluded that as of December 31, 2020 and 2019, there are no uncertain positions taken or expected to be taken that would require recognition of a liability or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

7. PARTY-IN-INTEREST TRANSACTIONS

Certain Plan investments are shares of money market funds and mutual funds managed by Fidelity Management Trust Company. In addition, the Plan has paid administrative expenses of \$1,827 to Fidelity Management Trust Company and certain expenses to the trustees have been offset with investment income during the year ended December 31, 2020. These transactions qualify as party-in-interest transactions. The notes receivable from participants also qualifies as party-in-interest transactions.

8. SUBSEQUENT EVENTS

The Plan has evaluated subsequent events occurring after the statement of net assets available for benefits date through the date of October 7, 2021, the date for which the financial statements were available to be released. Based upon this evaluation, the Plan has determined that no subsequent events have occurred, which require adjustment to or disclosure in the financial statements.

SUPPLEMENTARY INFORMATION

Partners Group (USA) Inc. 401(k) Plan
Schedule H, Part IV, Line 4i - Schedule of Assets (Held at End of Year)
ID #13-4118892, Plan #001
December 31, 2020

(a)	(b) Identity of Issuer, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(d) Cost (**)	(e) Current Value
	<u>Money Market</u>			
*	Fidelity	Government Money Market Fund Class K6		\$ 1,243,931
	<u>Mutual Funds</u>			
	AllianceBernstein	Discovery Growth Fund Class Z		165,816
	Alger	Spectra Fund Class Z		369,809
	American Funds	International Growth and Income Fund Class R6		329,124
	Cohen & Steers	Real Estate Securities Fund Class Z		243,007
	Columbia	Balanced Fund Class I3		63,571
	Columbia	Contrarian Core Fund Class I3		189,634
	Delaware	Emerging Markets Fund Institutional Class R6		365,877
*	Fidelity	Freedom Index Income Fund		1,024
*	Fidelity	Freedom Index 2015 Fund		99,321
*	Fidelity	Freedom Index 2020 Fund		8,348
*	Fidelity	Freedom Index 2025 Fund		206,645
*	Fidelity	Freedom Index 2030 Fund		1,942,116
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*	Fidelity	500 Index Fund		2,165,486
*	Fidelity	Global Ex US Index Fund		330,404
*	Fidelity	Mid-Cap Index Fund		778,300
*	Fidelity	Small-Cap Index Fund		481,093
*	Fidelity	Inflation-Protected Bond Index Fund		21,793
	Janus Henderson	Triton Fund Class N		357,445
	JPMorgan	Equity Income Fund Class R6		356,842
	Lord Abbett	High Yield Fund Class R6		17,298
	PGIM	Total Return Bond Fund R6		82,109
	T. Rowe Price	New Era Fund Class I		115,381
	Vanguard	Growth Index Fund Admiral Class		1,194,400
	Vanguard	Mid-Cap Value Index Fund Admiral Shares		259,672
	Victory	Sycamore Small Company Opportunity Fund Class I		163,379
				<u>28,370,989</u>
*	<u>Notes Receivable From Participants</u>			
		Interest rates ranging from 4.25% to 7.25% maturing through 2048		<u>133,716</u>
				<u>\$ 29,748,636</u>

* Represents a party-in-interest to the Plan.

** Cost information is not applicable for participant directed investments.

See Independent Auditor's Report.

PARTNERS GROUP (USA) INC. 401(K) PLAN
Financial Statements
December 31, 2020 and 2019
With Independent Auditor's Report

Partners Group (USA) Inc. 401(k) Plan
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December 31, 2020 and 2019

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INDEPENDENT AUDITOR'S REPORT

To the Trustees,
Partners Group (USA) Inc. 401(k) Plan:

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of Partners Group (USA) Inc. 401(k) Plan (the "Plan"), which comprise the statements of net assets available for benefits as of December 31, 2020 and 2019, and the related statement of changes in net assets available for benefits for the year ended December 31, 2020, and the related notes to financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on conducting the audits in accordance with auditing standards generally accepted in the United States of America. Because of the matter described in the Basis for Disclaimer of Opinion paragraph, however, we were not able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion.

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the Plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 3, which was certified by Fidelity Management Trust Company ("Fidelity") and Ascensus Trust Company ("Ascensus"), the Trustees of the Plan, except for comparing such information with the related information included in the financial statements. We have been informed by the Plan administrator that the Trustees hold the Plan's investment assets and executes investment transactions. The Plan administrator has obtained certifications from Fidelity and Ascensus as of December 31, 2020 and for the year ended December 31, 2020 and from Ascensus as of December 31, 2019 that the information provided to the Plan administrator by the Trustees is complete and accurate.

Disclaimer of Opinion

Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we have not been able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion on the financial statements. Accordingly, we do not express an opinion on the accompanying financial statements.

Other Matter - Supplementary Schedule

The supplementary schedule, schedule H, part IV, line 4i - schedule of assets (held at end of year) as of December 31, 2020, is required by the Department of Labor's ("DOL") Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 and is presented for the purpose of additional analysis and are not a required part of the financial statements. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on this supplementary schedule.

Report on Form and Content in Compliance With DOL Rules and Regulations

The form and content of the information included in the financial statements and supplementary schedule, other than that derived from the information certified by the trustees, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

Withum Smith + Brown, PC

October 7, 2021

Partners Group (USA) Inc. 401(k) Plan
Statements of Net Assets Available for Benefits
December 31, 2020 and 2019

	<u>2020</u>	<u>2019</u>
Assets		
Investments, at fair value	\$ 29,614,920	\$ 21,049,757
Receivables		
Notes receivable from participants	133,716	150,916
Employer contributions receivable	193,985	277,833
Employee contributions receivable	<u>2,000</u>	<u>273,852</u>
Total receivables	<u>329,701</u>	<u>702,601</u>
Net assets available for benefits	<u>\$ 29,944,621</u>	<u>\$ 21,752,358</u>

The Notes to Financial Statements are an integral part of these statements.

Partners Group (USA) Inc. 401(k) Plan
Statement of Changes in Net Assets Available for Benefits
Year Ended December 31, 2020

Additions

Additions to net assets attributed to	
Investment income	
Net appreciation in fair value of investments	\$ 3,236,950
Dividend and interest income	<u>598,153</u>
	<u>3,835,103</u>
Interest income on notes receivable from participants	
	<u>9,497</u>
Contributions	
Employee	4,096,506
Employer	1,535,151
Rollover	<u>802,633</u>
	<u>6,434,290</u>
Total additions	<u>10,278,890</u>

Deductions

Deductions from net assets attributed to	
Benefits paid	
	2,084,800
Administrative expenses	<u>1,827</u>
Total deductions	<u>2,086,627</u>

Net change in net assets available for benefits	8,192,263
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Net assets available for benefits

Beginning of year	<u>21,752,358</u>
End of year	<u>\$ 29,944,621</u>

The Notes to Financial Statements are an integral part of this statement.

Partners Group (USA) Inc. 401(k) Plan
Notes to Financial Statements
December 31, 2020 and 2019

1. DESCRIPTION OF PLAN

The following brief description of the Partners Group (USA) Inc. 401(k) Plan (the “Plan”) is provided for general information purposes only. Participants should refer to the Plan agreement for more complete information.

General

The Plan is a participant directed, defined contribution plan qualifying under section 401(k) of the Internal Revenue Code (“IRC”) and is subject to the provisions of the Employee Retirement Income Security Act of 1974 (“ERISA”). The Plan was established for the purpose of providing eligible employees of Partners Group (USA) Inc. (the “Employer”) and their beneficiaries funds for retirement.

Eligibility

An employee of the Employer becomes an eligible participant in the Plan upon completing 3 consecutive months of service and the attainment of the age of 21. Employees may join the Plan on the first day of each month once they meet the eligibility requirements.

Employee Contributions

A participant in the Plan may annually contribute through payroll deductions, any amount up to 90% of pretax compensation not exceeding amounts as determined by the Internal Revenue Service (“IRS”). Any participant, age 50 or over, may make an additional “catch up” contribution as determined by the IRS. Participants direct the investment of their contributions into various investment options offered by the Plan. Rollover contributions are permitted into the Plan in accordance with IRS regulations and Plan provisions.

Employer Contributions

The Employer may annually elect to make a matching contribution equal to a discretionary percentage of the participant’s elective deferrals and/or a discretionary profit-sharing contribution. The Employer has elected to make discretionary matching contributions of \$1,535,151 for the year ended December 31, 2020 equal to 50% of eligible compensation up to 6%. The Employer has not elected to make a discretionary nonelective contribution for the year ended December 31, 2020.

Participant Accounts

Individual accounts are established for each participant. The Plan offers a variety of investments, with varying investment objectives as investment options. Each participant’s account is credited with the participant’s contributions, the Employer contributions, if any, and the proportionate share of dividends, interest, and investment gains since the preceding valuation date. The participant’s account is reduced by withdrawals, losses on investments, expenses of the Plan, and any forfeitures. The benefit to which a participant is entitled is the benefit that can be provided from the participant’s vested account.

Distributions and Withdrawals

Prior to the retirement age of 59½, distributions and withdrawals are not permitted from the Plan except in the instances of death, disability, termination of employment, or hardship as defined in the Plan document. A participant shall be considered 100% vested upon termination of service due to death or disability. Participants or their beneficiaries may receive a lump-sum amount equal to the value of the participant’s vested account balance. After attaining age 59½, 100% of the participant’s account may be withdrawn for any reason.

During 2020, the Plan operated in conformity with distribution provisions set forth under the Coronavirus Aid, Relief and Economic Security (“CARES”) Act. Such provisions included the ability for participants to withdraw up to \$100,000 tax-free and penalty-free between March 27, 2020 and December 31, 2020 if the participant determined he or she was a qualified individual under the CARES Act.

Partners Group (USA) Inc. 401(k) Plan
Notes to Financial Statements
December 31, 2020 and 2019

Notes Receivable from Participants

Any participant may borrow from their account a minimum of \$1,000 up to a maximum equal to the lesser of \$50,000 or 50% of their vested account balance. All loans are considered a direct investment of the participant and payments of principal and interest are credited to the participant's account. Interest is charged at a reasonable rate (as defined in the Plan agreement). Outstanding loans as of December 31, 2020 had interest rates ranging from 4.25% to 7.25%, with maturity dates through 2048.

Restrictions and repayment terms are described in the Plan document. A participant will only be permitted to have one outstanding loan at a given time. Principal and interest are paid ratably through bi-weekly payroll deductions.

During 2020, the Plan operated in conformity with loan provisions set forth under the CARES Act. Such provisions included the ability for participants to obtain a loan of up to the lesser of \$100,000 or 100% of the participant's vested balance between March 27, 2020 and September 23, 2020 if the participant determined he or she was a qualified individual under the CARES Act. A qualified individual could also delay repayments for up to 1 year for loan payments due between March 27, 2020 and December 31, 2020.

Vesting

A participant's interest in his or her contributions to the Plan will always be fully vested and nonforfeitable. A participant is vested in the Employer's contribution, if any, after one year of service.

A participant's "vested percentage" is based on vesting years of service. A participant earns and accumulates a year of vesting after 12 months of continuous service.

2. SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

The accounting records of the Plan are maintained under the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America. Under this method of accounting, contributions and investment income are recorded when earned, and expenses are recorded when incurred.

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires the Plan administrator to make estimates and assumptions that affect certain reported amounts of assets, liabilities, and changes therein, and disclosure of contingent assets and liabilities. Accordingly, actual results may differ from those estimates.

Valuation of Investments and Income Recognition

The Plan's investments are stated at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. Fair value measurements are discussed in Note 4.

The Plan presents, in the statement of changes in net assets available for benefits, the net appreciation or depreciation, including realized gains and losses on those investments. In addition, certain investment related fees have been reflected as an offset of net investment income and are not readily determinable.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation includes the Plan's gains and losses on investments bought and sold, as well as held during the year.

Partners Group (USA) Inc. 401(k) Plan
Notes to Financial Statements
December 31, 2020 and 2019

Administrative Expenses

The expenses necessary to administer the Plan, including but not limited to retaining necessary professional assistance from an attorney, an accountant, an actuary, or an investment advisor are paid by the Employer. All expenses except for account maintenance fees, transaction fees and investment fund management fees have been paid by the Employer. Transaction fees incurred by the trustees and registered investment companies are absorbed in investment income and are not readily determinable.

Participants are charged service fees for any loan and distribution transactions they request.

Payment of Benefits

Benefit payments to participants are recorded when paid.

Risks and Uncertainties

The Plan invests in various investment securities. Investment securities are exposed to various risks such as interest rate, market, and credit risks, and overall market volatility. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and those changes could materially affect participant's account balances and the amounts reported in the statements of net assets available for benefits.

Forfeited Accounts

Forfeited accounts are retained in the Plan and will be applied first to pay administrative costs of the Plan, with any excess used to reduce future Employer contributions. As of December 31, 2020 and 2019, the Plan had \$71,764 and \$53,245, respectively, of forfeited non-vested accounts. No forfeitures were applied to Plan expenses during the year ended December 31, 2020.

Notes Receivable from Participants

Notes receivable from participants are measured at their unpaid principal balance, plus any accrued but unpaid interest. Delinquent participant loans are reclassified as distributions based upon the terms of the Plan document.

3. INFORMATION CERTIFIED BY THE TRUSTEES

No auditing procedures were performed by the independent public accountants as permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA with respect to information certified as complete and accurate by Fidelity and Ascensus, the trustees of the Plan, except for comparing such information with the related information included in the financial statements. Based on information provided and certified by the trustees, there are no fixed income obligations, leases, or debt instruments in default or deemed uncollectible, as defined by ERISA, as of December 31, 2020 and 2019.

Partners Group (USA) Inc. 401(k) Plan
Notes to Financial Statements
December 31, 2020 and 2019

The following information as of and for the years ended December 31, 2020 and 2019 was prepared from reports certified by the trustees as complete and accurate:

	<u>2020</u>	<u>2019</u>
Investments, at fair value	\$ 29,614,920	\$ 21,049,757
Notes receivable from participants	\$ 133,716	\$ 150,916
Investment income		
Net appreciation in fair value of investments	\$ 3,236,950	\$ -
Dividend and interest income	\$ 598,153	\$ -
Interest income on notes receivable from participants	\$ 9,497	\$ -

4. FAIR VALUE MEASUREMENTS

The Financial Accounting Standards Board established a framework for measuring fair value. This framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value.

The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy are described as follows:

Level 1 - Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.

Level 2 - Observable inputs other than Level 1 prices, such as quoted prices for similar assets or liabilities; or other inputs that are observable or can be corroborated by observable market data for substantially the full term of the assets or liabilities.

Level 3 - Unobservable inputs that are supported by little or no market activity and that are financial instruments whose values are determined using pricing models, discounted cash flow methodologies, or similar techniques, as well as instruments for which the determination of fair value requires significant judgment or estimation.

The asset or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs.

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Mutual Funds: Valued at the daily closing price as reported by the fund. Mutual funds held by the Plan are open-end mutual funds that are registered with the Securities and Exchange Commission. These funds are required to publish their daily net asset value ("NAV") and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded.

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Money market	\$ 1,243,931	\$ -	\$ -	\$ 1,243,931
Mutual funds	28,370,989	-	-	28,370,989
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Partners Group (USA) Inc. 401(k) Plan
Notes to Financial Statements
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The Plan has evaluated subsequent events occurring after the statement of net assets available for benefits date through the date of October 7, 2021, the date for which the financial statements were available to be released. Based upon this evaluation, the Plan has determined that no subsequent events have occurred, which require adjustment to or disclosure in the financial statements.

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December 31, 2020

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*	Fidelity	Freedom Index 2040 Fund		2,298,892
*	Fidelity	Freedom Index 2045 Fund		5,047,132
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*	Fidelity	Freedom Index 2055 Fund		3,605,187
*	Fidelity	Freedom Index 2060 Fund		1,515,504
*	Fidelity	Freedom Index 2065 Fund		204,362
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*	Fidelity	Global Ex US Index Fund		330,404
*	Fidelity	Mid-Cap Index Fund		778,300
*	Fidelity	Small-Cap Index Fund		481,093
*	Fidelity	Inflation-Protected Bond Index Fund		21,793
	Janus Henderson	Triton Fund Class N		357,445
	JPMorgan	Equity Income Fund Class R6		356,842
	Lord Abbett	High Yield Fund Class R6		17,298
	PGIM	Total Return Bond Fund R6		82,109
	T. Rowe Price	New Era Fund Class I		115,381
	Vanguard	Growth Index Fund Admiral Class		1,194,400
	Vanguard	Mid-Cap Value Index Fund Admiral Shares		259,672
	Victory	Sycamore Small Company Opportunity Fund Class I		163,379
				<u>28,370,989</u>
*	<u>Notes Receivable From Participants</u>	Interest rates ranging from 4.25% to 7.25% maturing through 2048		<u>133,716</u>
				<u>\$ 29,748,636</u>

* Represents a party-in-interest to the Plan.

** Cost information is not applicable for participant directed investments.

See Independent Auditor's Report.