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).

▶ **Complete all entries in accordance with the instructions to the Form 5500.**

OMB Nos. 1210-0110
1210-0089

2016

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2016 or fiscal plan year beginning 01/01/2016 and ending 12/31/2016

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
COOPER-STANDARD AUTOMOTIVE INC. SALARIED RETIREMENT PLAN

1b Three-digit plan number (PN) ▶ 025

1c Effective date of plan 12/23/2004

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)
COOPER-STANDARD AUTOMOTIVE INC.

39550 ORCHARD HILL PL
NOVI, MI 48375-5329

2b Employer Identification Number (EIN) 34-0549970

2c Plan Sponsor's telephone number 248-596-5900

2d Business code (see instructions) 336300

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.	10/05/2017	SUZANNE SEITZ
	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

Preparer's name (including firm name, if applicable) and address (include room or suite number)

Preparer's telephone number

3a Plan administrator's name and address [X] Same as Plan Sponsor	**3b** Administrator's EIN	
	3c Administrator's telephone number	
4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report:	**4b** EIN	
a Sponsor's name	**4c** PN	

5 Total number of participants at the beginning of the plan year	**5**	4378
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)**	1852
a(2) Total number of active participants at the end of the plan year	**6a(2)**	1736
b Retired or separated participants receiving benefits	**6b**	1321
c Other retired or separated participants entitled to future benefits	**6c**	848
d Subtotal. Add lines **6a(2)**, **6b**, and **6c**.	**6d**	3905
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	183
f Total. Add lines **6d** and **6e**.	**6f**	4088
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	0
h Number of participants that 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:

1A 1C 1I

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)		**9b** Plan benefit arrangement (check all that apply)	
(1) Insurance	[ ]	**(1)** Insurance	[ ]
(2) Code section 412(e)(3) insurance contracts	[ ]	**(2)** Code section 412(e)(3) insurance contracts	[ ]
(3) Trust	[X]	**(3)** Trust	[X]
(4) General assets of the sponsor	[ ]	**(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)** [X] **R** (Retirement Plan Information)
- **(2)** [ ] **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary
- **(3)** [X] **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary

b General Schedules

- **(1)** [X] **H** (Financial Information)
- **(2)** [ ] **I** (Financial Information – Small Plan)
- **(3)** [ ] 0 **A** (Insurance Information)
- **(4)** [ ] **C** (Service Provider Information)
- **(5)** [X] **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 2016 Form M-1 annual report. If the plan was not required to file the 2016 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 SB (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Single-Employer Defined Benefit Plan Actuarial Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500 or 5500-SF.**

OMB No. 1210-0110

2016

This Form is Open to Public Inspection

For calendar plan year 2016 or fiscal plan year beginning 01/01/2016 and ending 12/31/2016

▶ **Round off amounts to nearest dollar.**

▶ **Caution:** A penalty of $1,000 will be assessed for late filing of this report unless reasonable cause is established.

A Name of plan
COOPER-STANDARD AUTOMOTIVE INC. SALARIED RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 025

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
COOPER-STANDARD AUTOMOTIVE INC.

D Employer Identification Number (EIN)
34-0549970

E Type of plan: [X] Single [ ] Multiple-A [ ] Multiple-B

F Prior year plan size: [ ] 100 or fewer [ ] 101-500 [X] More than 500

Part I Basic Information

1 Enter the valuation date: Month 01 Day 01 Year 2016

2 Assets:

a Market value	**2a**	244379254
b Actuarial value	**2b**	258837920

3 Funding target/participant count breakdown

	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a For retired participants and beneficiaries receiving payment	1451	130939825	130939825
b For terminated vested participants	1075	29054401	29054401
c For active participants	1852	61425788	65075353
d Total	4378	221420014	225069579

4 If the plan is in at-risk status, check the box and complete lines (a) and (b) [ ]

a Funding target disregarding prescribed at-risk assumptions	**4a**	
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	**4b**	
5 Effective interest rate	**5**	6.02 %
6 Target normal cost	**6**	3061259

Statement by Enrolled Actuary

To the best of my knowledge, the information supplied in this schedule and accompanying schedules, statements and attachments, if any, is complete and accurate. Each prescribed assumption was applied in accordance with applicable law and regulations. In my opinion, each other assumption is reasonable (taking into account the experience of the plan and reasonable expectations) and such other assumptions, in combination, offer my best estimate of anticipated experience under the plan.

SIGN HERE

Signature of actuary

09/29/2017
Date

MELISSA MAYEA
Type or print name of actuary

17-07650
Most recent enrollment number

TOWERS WATSON DELAWARE INC.
Firm name

248-936-7700
Telephone number (including area code)

26555 EVERGREEN RD, SUITE 1600
SOUTHFIELD, MI 48076
Address of the firm

If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions [ ]

Part II Beginning of Year Carryover and Prefunding Balances

		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	30981216
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9	Amount remaining (line 7 minus line 8)	0	30981216
10	Interest on line 9 using prior year's actual return of -3.47%	0	-1075048
11	Prior year's excess contributions to be added to prefunding balance:		
a	Present value of excess contributions (line 38a from prior year)		5652429
b(1)	Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of 6.22%		351581
b(2)	Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
c	Total available at beginning of current plan year to add to prefunding balance		6004010
d	Portion of (c) to be added to prefunding balance		750000
12	Other reductions in balances due to elections or deemed elections	0	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	30656168

Part III Funding Percentages

14	Funding target attainment percentage	14	101.38%
15	Adjusted funding target attainment percentage	15	115.00%
16	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	101.10%
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and Liquidity Shortfalls

18 Contributions made to the plan for the plan year by employer(s) and employees:

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
09/05/2017	3500000	0			
			Totals ► 18(b)	3500000	18(c) 0

19	Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:		
a	Contributions allocated toward unpaid minimum required contributions from prior years.	19a	0
b	Contributions made to avoid restrictions adjusted to valuation date	19b	0
c	Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	3173021

20 Quarterly contributions and liquidity shortfalls:

a Did the plan have a "funding shortfall" for the prior year? ☐ Yes ☒ No

b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner? ☐ Yes ☐ No

c If line 20a is "Yes," see instructions and complete the following table as applicable:

Liquidity shortfall as of end of quarter of this plan year

(1) 1st	(2) 2nd	(3) 3rd	(4) 4th

Part V Assumptions Used to Determine Funding Target and Target Normal Cost

21 Discount rate:

a Segment rates:

1st segment:	2nd segment:	3rd segment:	
4.43%	5.91%	6.65%	☐ N/A, full yield curve used

b Applicable month (enter code)	**21b**	0
22 Weighted average retirement age	**22**	60

23 Mortality table(s) (see instructions) ☐ Prescribed - combined ☒ Prescribed - separate ☐ Substitute

Part VI Miscellaneous Items

24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment	☒ Yes	☐ No
25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment	☐ Yes	☒ No
26 Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment	☒ Yes	☐ No

27 If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment	**27**	

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

28 Unpaid minimum required contributions for all prior years	**28**	0
29 Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a)	**29**	0
30 Remaining amount of unpaid minimum required contributions (line 28 minus line 29)	**30**	0

Part VIII Minimum Required Contribution For Current Year

31 Target normal cost and excess assets (see instructions):

a Target normal cost (line 6)	**31a**	3061259
b Excess assets, if applicable, but not greater than line 31a	**31b**	3061259

32 Amortization installments:

	Outstanding Balance	Installment
a Net shortfall amortization installment	0	0
b Waiver amortization installment	0	0

33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	**33**	0
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)	**34**	0

	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	0	0

36 Additional cash requirement (line 34 minus line 35)	**36**	0
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	**37**	3173021
38 Present value of excess contributions for current year (see instructions)		
a Total (excess, if any, of line 37 over line 36)	**38a**	3173021
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	**38b**	0
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	**39**	0
40 Unpaid minimum required contributions for all years	**40**	0

Part IX Pension Funding Relief Under Pension Relief Act of 2010 (See Instructions)

41 If an election was made to use PRA 2010 funding relief for this plan:

a Schedule elected ☐ 2 plus 7 years ☐ 15 years

b Eligible plan year(s) for which the election in line 41a was made ☐ 2008 ☐ 2009 ☐ 2010 ☐ 2011

42 Amount of acceleration adjustment	**42**	0
43 Excess installment acceleration amount to be carried over to future plan years	**43**	0

SCHEDULE D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

DFE/Participating Plan 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

2016

This Form is Open to Public Inspection.

For calendar plan year 2016 or fiscal plan year beginning 01/01/2016 and ending 12/31/2016

A Name of plan
COOPER-STANDARD AUTOMOTIVE INC. SALARIED RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 025

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
COOPER-STANDARD AUTOMOTIVE INC.

D Employer Identification Number (EIN)
34-0549970

Part I **Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs)**
(Complete as many entries as needed to report all interests in DFEs)

a Name of MTIA, CCT, PSA, or 103-12 IE: COOPER STANDARD MASTER TRUST

b Name of sponsor of entity listed in (a): COOPER STANDARD AUTOMOTIVE INC.

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
26-6611154-001	M	242813045

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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b Name of sponsor of entity listed in (a):

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b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

Part II Information on Participating Plans (to be completed by DFEs)

(Complete as many entries as needed to report all participating plans)

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

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b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

SCHEDULE H (Form 5500)

Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

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

2016

This Form is Open to Public Inspection

For calendar plan year 2016 or fiscal plan year beginning 01/01/2016 and ending 12/31/2016

A Name of plan
COOPER-STANDARD AUTOMOTIVE INC. SALARIED RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 025

C Plan sponsor's name as shown on line 2a of Form 5500
COOPER-STANDARD AUTOMOTIVE INC.

D Employer Identification Number (EIN)
34-0549970

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		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	6262000	3500000
(2) Participant contributions	1b(2)		
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)	237809596	242813045
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)		
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

			(a) Beginning of Year	(b) End of Year
1d	Employer-related investments:			
	(1) Employer securities	1d(1)		
	(2) Employer real property	1d(2)		
e	Buildings and other property used in plan operation	1e		
f	Total assets (add all amounts in lines 1a through 1e)	1f	244071596	246313045
	Liabilities			
g	Benefit claims payable	1g		
h	Operating payables	1h		
i	Acquisition indebtedness	1i		
j	Other liabilities	1j		
k	Total liabilities (add all amounts in lines 1g through1j)	1k	0	0
	Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l	244071596	246313045

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.

	Income		(a) Amount	(b) Total
a	**Contributions:**			
	(1) Received or receivable in cash from: **(A)** Employers	2a(1)(A)	3500000	
	(B) Participants	2a(1)(B)		
	(C) Others (including rollovers)	2a(1)(C)		
	(2) Noncash contributions	2a(2)		
	(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		3500000
b	**Earnings on investments:**			
	(1) Interest:			
	(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
	(B) U.S. Government securities	2b(1)(B)		
	(C) Corporate debt instruments	2b(1)(C)		
	(D) Loans (other than to participants)	2b(1)(D)		
	(E) Participant loans	2b(1)(E)		
	(F) Other	2b(1)(F)		
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		0
	(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
	(B) Common stock	2b(2)(B)		
	(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)		
	(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		0
	(3) Rents	2b(3)		
	(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)		
	(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
	(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		0
	(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
	(B) Other	2b(5)(B)		
	(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		17391915
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		20891915
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	18650466	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	2e(4)		18650466
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses: (1) Professional fees	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		0
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		18650466
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		2241449
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

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) ☐ Unqualified (2) ☐ Qualified (3) ☒ Disclaimer (4) ☐ Adverse

b Did the accountant perform a limited scope audit pursuant to 29 CFR 2520.103-8 and/or 103-12(d)? ☒ Yes ☐ No

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

(1) Name: GILMORE, JASION MAHLER LTD (2) EIN: 34-1827159

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:

		Yes	No	Amount
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.)	4a		X	
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	

			Yes	No	Amount
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?	4e	X		10000000
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	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.)	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			
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			
o	Defined Benefit Plan or Money Purchase Pension Plan Only: Were any distributions made during the plan year to an employee who attained age 62 and had not separated from service?	4o			

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

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 If the plan is a defined benefit plan, is it covered under the PBGC insurance program (See ERISA section 4021.)? ..... ☒ Yes ☐ No ☐ Not determined
If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year 3996158. (See instructions.)

Part V Trust Information

6a Name of trust	**6b** Trust's EIN

6c Name of trustee or custodian	**6d** Trustee's or custodian's telephone number

SCHEDULE R (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Retirement Plan Information

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).

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

2016

This Form is Open to Public Inspection.

For calendar plan year 2016 or fiscal plan year beginning 01/01/2016 and ending 12/31/2016

A Name of plan
COOPER-STANDARD AUTOMOTIVE INC. SALARIED RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 025

C Plan sponsor's name as shown on line 2a of Form 5500
COOPER-STANDARD AUTOMOTIVE INC.

D Employer Identification Number (EIN)
34-0549970

Part I Distributions

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions **1** 0

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): 36-3046063

Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.

3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year **3** 252

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

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? ..... ☐ **Yes** ☒ **No** ☐ **N/A**

If the plan is a defined benefit plan, go to line 8.

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.

6 **a** Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived) **6a**

b Enter the amount contributed by the employer to the plan for this plan year **6b**

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) **6c**

If you completed line 6c, skip lines 8 and 9.

7 Will the minimum funding amount reported on line 6c be met by the funding deadline? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

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? ..... ☐ **Yes** ☐ **No** ☒ **N/A**

Part III Amendments

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. ..... ☐ **Increase** ☐ **Decrease** ☐ **Both** ☒ **No**

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.

10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan? ..... ☐ **Yes** ☐ **No**

11 **a** Does the ESOP hold any preferred stock? ..... ☐ **Yes** ☐ **No**

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.) ..... ☐ **Yes** ☐ **No**

12 Does the ESOP hold any stock that is not readily tradable on an established securities market? ..... ☐ **Yes** ☐ **No**

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 participants on whose behalf no contributions were made by an employer as an employer of the participant for:

a The current year	**14a**	
b The plan year immediately preceding the current plan year	**14b**	
c The second preceding plan year	**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

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: 39.6 % Investment-Grade Debt: 31.6 % High-Yield Debt: 3.5 % Real Estate: 5.7 % Other: 19.6 %

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): EFFECTIVE AND MODIFIED

Part VII IRS Compliance Questions

20a Is the plan a 401(k) plan? If "No," skip b	☐ Yes ☐ No
20b How did the plan satisfy the nondiscrimination requirements for employee deferrals under section 401(k)(3) for the plan year? Check all that apply:	☐ Design-based safe harbor ☐ "Prior year" ADP test ☐ "Current year" ADP test ☐ N/A
21a What testing method was used to satisfy the coverage requirements under section 410(b) for the plan year? Check all that apply:	☐ Ratio percentage test ☐ Average benefit test ☐ N/A
21b Did the plan satisfy the coverage and nondiscrimination requirements of sections 410(b) and 401(a)(4) for the plan year by combining this plan with any other plan under the permissive aggregation rules?	☐ Yes ☐ No

22a If the plan is a master and prototype plan (M&P) or volume submitter plan that received a favorable IRS opinion letter or advisory letter, enter the date of the letter ____/____/____ and the serial number _____.

22b If the plan is an individually-designed plan that received a favorable determination letter from the IRS, enter the date of the most recent determination letter ____/____/____.

COOPER-STANDARD AUTOMOTIVE INC.
SALARIED RETIREMENT PLAN
FINANCIAL STATEMENTS
AND INDEPENDENT AUDITOR'S REPORT
DECEMBER 31, 2016 AND 2015

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GJM GILMORE JASION MAHLER, LTD
INNOVATIVE IDEAS. TRUSTED ADVICE.

INDEPENDENT AUDITOR'S REPORT

Plan Administrator and Plan Participants
Cooper-Standard Automotive Inc.
Salaried Retirement Plan
Novi, MI

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of Cooper-Standard Automotive Inc. Salaried Retirement Plan (the Plan), which comprise the statements of net assets available for benefits as of December 31, 2016 and 2015, the related statements of changes in net assets available for benefits for the years then ended and the related notes to the 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 audit 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 or provided by The Northern Trust Company, the current trustee of the Plan and Principal Life Insurance Company, the former custodian of the Plan, except for comparing this information with the related information included in the financial statements. We have been informed by the Plan Administrator that the current trustee and former custodian held the Plan's assets and executed transactions. The Plan Administrator has obtained a certification from the current trustee as of and for the year ended December 31, 2016 and as of December 31, 2015 and for the period from December 1, 2015 to December 31, 2015, and from the former custodian for the period from January 1, 2015, to November 30, 2015, that the information provided to the Plan Administrator by the former custodian and current trustee 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. Accordingly, we do not express an opinion on these financial statements.

GJMLTD.COM

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

The form and content of the information included in the financial statements, other than that derived from the information certified or provided by the current trustee and former custodian, 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.

Gilmore Jasion Mahler, LTD

Maumee, Ohio
September 25, 2017

COOPER-STANDARD AUTOMOTIVE INC.
SALARIED RETIREMENT PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
December 31, 2016 and 2015

	2016	2015
Investments, at fair value:		
Interest in Master Trust	$ 242,813,045	$ 237,809,596
Receivables:		
Employer contribution	3,500,000	6,262,000
Net assets available for benefits	$ 246,313,045	$ 244,071,596

The accompanying notes are an integral part of these financial statements.

COOPER-STANDARD AUTOMOTIVE INC.
SALARIED RETIREMENT PLAN
STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
For the Years Ended December 31, 2016 and 2015

	2016	2015
Net investment income (loss) from Master Trust	$ 19,545,757	$ (9,307,468)
Employer contributions	3,500,000	6,262,000
Benefit and withdrawal payments	(18,650,466)	(14,914,569)
Administrative expenses	(2,153,842)	(1,870,258)
Net increase (decrease)	2,241,449	(19,830,295)
Net assets available for benefits:		
Net assets available for benefits at beginning of year	244,071,596	263,901,891
Net assets available for benefits at end of year	$ 246,313,045	$ 244,071,596

The accompanying notes are an integral part of these financial statements.

COOPER-STANDARD AUTOMOTIVE INC.
SALARIED RETIREMENT PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2016 and 2015

Note 1–Description of the Plan

The following brief description of the Cooper-Standard Automotive Inc. Salaried Retirement Plan (the Plan) provides only general information. Participants should refer to their specific Plan agreement for a more complete description of the Plan's provisions.

General

The Plan is a defined benefit pension plan covering substantially all salaried and non-union hourly employees of the Plan Sponsor hired prior to January 1, 2009. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

The Plan established a new agreement with The Northern Trust Company (the Current Trustee), effective December 1, 2015, to act as trustee of the Plan's assets. The Plan had an agreement with Principal Life Insurance Company (the Former Custodian), to act as custodian of the Plan's assets. The Former Custodian administered and invested the Plan's assets and income for the benefit of the Plan's participants through November 30, 2015. A master trust was formed with other plans administered by the Plan Sponsor to hold and administer all of the Plan's assets. See Note 5 for master trust disclosures.

Some of the Plan's participants may be eligible for unreduced monthly pension benefits upon attainment of 30 years of continuous credited service. Participants also may retire earlier than the normal retirement age. Pension benefits for participants with less than 30 years continuous credited service are subject to a reduction based upon the time by which the retirement precedes the participant's attainment of age 62.

The amount of any pension benefit otherwise available may be reduced by certain disability payments (but not payments under the Federal Insurance Contribution Act (FICA)). The Plan provides certain survivor and disability benefits, and various optional forms of payment, some actuarially reduced.

Eligibility

Any employee of the Plan Sponsor (including any United States citizen who is employed by a "foreign affiliate" (as defined in Section 3121(I)(6) of the Internal Revenue Code (the Code)) for which the Plan Sponsor has entered into an agreement with the Internal Revenue Service pursuant to Section 3121(I) of the Code, who is a non-bargaining employee, is not a nonresident alien, is not a Leased Employee, is not an independent contract or an employee of an independent contractor, and is not a member of the Employer's Board of Directors acting solely in that capacity is eligible for participation in the Plan. For part-time employees, the service requirement is 1 year and 1,000 hours and for full-time employees, the service requirement is 1 year. Effective January 1, 2009, the plan was frozen to all new employees.

Hourly employees from the Newlex Plan represented by UAW Local 1686 are eligible to participate. The current bargaining agreement is effective through September 16, 2017. Effective January 1, 2007, eligibility was frozen and no new employees will be eligible for the plan. Effective December 31, 2013, the participants in the Newlex Hourly Pension Plan will no longer accrue service.

Employees from the Bowling Green Seal Plan who are subject to the collective bargaining agreements between the Plan Sponsor and Local Union #1042 of the United Steelworkers of America are eligible for participation in the Plan. The current bargaining agreement is effective July 23, 2015 and expires July 23, 2020. Effective January 1, 2009, the plan was frozen to all new employees.

Note 1–Description of the Plan–continued

Funding policy/contributions
The Plan is funded entirely through contributions made by the Plan Sponsor. The Plan Sponsor contributes such amounts as are deemed necessary on an actuarial basis to provide the Trust with assets sufficient to meet the benefits to be paid to the Plan's participants. The contributions are designed to fund current service costs and to fund prior service costs over periods of ten to twenty years. The Plan Sponsor's contributions for 2016 and 2015 exceeded the minimum funding requirements of ERISA.

Vesting
Prior to January 1, 2008, participants in the Plan became vested upon completion of 5 years of vesting service or reaching normal retirement age (age 65). Effective January 1, 2008, in accordance with the provisions of the Pension Protection Act, participants that are receiving benefits in the Plan under a cash balance formula become vested upon completion of 3 years of vesting service.

Pension benefits
The Plan includes participants that were participants in other plans that have been merged into this plan. Benefit payment calculations vary as described below depending on the prior plan under which service was accrued.

Participants that were participants in the Cooper Tire & Rubber Company Spectrum Retirement Plan (Cooper Tire Plan) as of December 31, 2001, who were born before 1962 and whose credited service is before 1987 (Cooper Tire grandfathered participants), are entitled to a monthly "protected benefit" equal to 1.5 percent of the monthly average of all compensation (as defined in the Plan) during the highest five of the ten calendar years prior to the year of termination or retirement (minimum of $20), multiplied by the years of continuous credited service.

The sum of the Cooper Tire grandfathered participant's retirement benefit under the Plan and his/her primary social security (FICA) benefit may not exceed 90 percent of the monthly average of all compensation (as defined in the Plan) during the highest five of the last ten calendar years prior to the year of termination or retirement, unless the $20 minimum would serve to exceed the above amount.

For Cooper Tire grandfathered participants with less than 30 years of continuous credited service, the above 90 percent limitation and the amount of FICA benefit taken into account in computing the Plan benefit will be reduced by $1/30^{th}$ for each year of continuous credited service less than 30.

Participants that were participants in the Standard Products Plan as of December 31, 2001 (Standard Products grandfathered participants), who were employed prior to June 30, 1976, are entitled to a monthly benefit equal to the greater of a) an amount equal to a percentage of average compensation (ranging from 22 percent-40 percent) multiplied by years of service or b) 1 1/15 percent of average compensation not in excess of 1/12 annual covered compensation plus 1 2/3 percent of any compensation in excess of average compensation multiplied by accrual service (not to exceed 30 years) or c) retirement (minimum of $30), multiplied by the years of continuous credited service.

Note 1–Description of the Plan–continued

Pension benefits–continued

Standard Products grandfathered participants, who became an employee on or after June 30, 1976, are entitled to a monthly benefit equal to the greater of a) 1 1/15 percent of average compensation not in excess of 1/12 annual covered compensation plus 1 2/3 percent of any compensation in excess of average compensation multiplied by accrual service (not to exceed 30 years) or b) retirement (minimum of $30), multiplied by the years of continuous credited service.

For participants that are not grandfathered participants and who were participants as of December 31, 2001, their cash balance account includes an opening account balance as of January 1, 2002, which represents their accrued benefit under the provisions of the Plan prior to the establishment of the cash balance feature.

Participants who accrued service prior to December 31, 2006 in the Northern Plants Plan and the Leonard Plan will receive benefits determined by multiplication of a benefit rate, which depends upon the period of credited service by the total number of years of credited service, in addition to any benefits accrued under the Plan beginning January 1, 2007.

Participants who accrued service prior to February 28, 2007 in the El Dorado Plan will receive benefits determined by multiplication of a benefit rate, which depends upon the period of credited service by the total number of years of credited service, in addition to any benefits accrued under the Plan beginning March 1, 2007. Participants also have the option of receiving a lump sum distribution for service accrued in the El Dorado Plan.

Participants from the Archbold Plan (Archbold Participants) are eligible for monthly benefit payments upon reaching age 65 or the completion of five years of service, if later. The normal monthly benefit payments are determined by multiplication of a benefit rate, which depends upon the period of credited service, by the total number of years of credited service, not to exceed 42 years. Archbold Participants are eligible to receive early retirement benefits between the ages of 50 and 65 upon the completion of 10 years of continuous service. Early retirement benefits are computed in a manner similar to normal retirement at age 65, except that they are reduced by certain factors, as outlined in the Archbold Plan document, for each month that the early retirement date precedes the normal retirement date.

Participants from the Bowling Green Hose Plan are eligible for unreduced monthly pension benefits upon 20 years of continuous credited service. Participants also may retire earlier than the normal retirement age. Pension benefits for participants with less than 30 years of continuous credited service are subject to a reduction based upon the time by which the retirement precedes the participant's attainment of age 62. Effective April 1, 2009, credited service was frozen and no participants will be eligible to accrue service.

Note 1–Description of the Plan–continued

Pension benefits–continued
Participants from the Auburn Plan are entitled to monthly pension benefits equal to the amount specified in the plan agreement, which was increased effective July 1, 2007, multiplied by the years of continuous credited service at time of termination or retirement. If termination occurs prior to eligibility for an immediate pension benefit, vested participants may elect to receive a lump sum distribution in lieu of a deferred pension benefit. Effective August 31, 2011, credited service was frozen and no participants will be eligible to accrue service.

Participants from the Newlex Plan are eligible for monthly benefit payments upon reaching age 65. The normal monthly benefit payments are determined by multiplication of a benefit rate, which depends upon the period of credited service, by the total number of years of credited service, not to exceed 35 years. A participant is 100 percent vested after five years of service. Prior to that time, the participant is 0 percent vested. Employees are eligible to receive early retirement benefits between the ages of 55 and 65 upon the completion of 15 years of continuous service. Early retirement benefits are computed in a manner similar to normal retirement at age 65 except, that they are reduced by certain factors, as outlined in the Plan document for each month that the early retirement date precedes the normal retirement date.

Participants from the Bowling Green Seal Plan are entitled to monthly pension benefits equal to the amount specified in the plan agreement multiplied by the years of continuous credited service at time of termination or retirement. If termination occurs prior to eligibility for an immediate pension benefit, vested participants may elect to receive a lump sum distribution in lieu of a deferred pension benefit.

Effective January 1, 2002, the Plan established a cash balance feature under which cash balance accounts are maintained for participants that are not grandfathered participants. The cash balance account is the accumulation of interest and pay credits during a participant's active employment. Pay credits are based upon a participant's eligible compensation for the year and range from 3 percent to 10 percent of eligible compensation, based on the age of the participant and years of credited service. Effective February 1, 2009, the Plan was frozen and no additional benefits will accrue.

Termination of the Plan
While the Plan sponsor has not expressed any intent to terminate the Plan or its contributions thereto, it has the right to do so at any time, subject to the provisions of ERISA. In the event of partial or total termination of the Plan, participants' benefits become nonforfeitable.

In the event the Plan terminates, its available net assets will be allocated to benefits as prescribed by ERISA, generally in the following order:

a. Certain annuity benefits that former employees or their beneficiaries are receiving or that employees eligible for retirement would have been receiving had they retired.
b. Other vested benefits insured by the Pension Benefit Guaranty Corporation (PBGC) as discussed below.
c. All other vested benefits.
d. All non-vested benefits.

Note 1–Description of the Plan–continued

Termination of the Plan–continued
The PBGC guarantees most, but not all, vested retirement benefits and certain disability and survivor's pensions. However, there is a statutory ceiling on the amount of any individual's monthly benefit that PBGC guarantees. That ceiling applies to those pensioners who elect to receive their benefits in the form of a single-life annuity and are at least 65 years old at the time of retirement or Plan termination, whichever comes later. For younger annuitants, or for those who elect to receive their benefits in some form other than a single-life annuity, the corresponding ceilings are actuarially adjusted.

Whether all participants receive their benefits should the Plan terminate at some future time will depend on the sufficiency, at that time, of the Plan's net assets to provide those benefits, the priority of those benefits, and the level of benefits guaranteed by the PBGC.

Note 2–Summary of significant accounting policies

Basis of accounting
The accompanying financial statements are prepared on the accrual basis of accounting.

Investments
The fair value of the Plan's interest in the Master Trust is based on the beginning of the year's value of the Plan's interest in the Master Trust plus actual contributions and allocated investment income (loss), less actual distributions and allocated administrative expenses. 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. See Note 4 for a discussion of fair value measurements for the underlying assets of the Master Trust.

Purchases and sales of investments are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividend income is recorded on the ex-dividend date. Net appreciation (depreciation) includes gains and losses on investments bought and sold as well as held during the year.

Administrative expenses
The administrative expenses of the Plan are paid by either the Plan Sponsor or the Plan.

Use of estimates
The preparation of financial statements in conformity with accounting principles generally accepted in the United States requires management to make estimates that affect the amounts reported in the financial statements and accompanying notes. Estimates are most significantly utilized in determining the actuarial present value of accumulated plan benefits. Actual results could differ from those estimates.

Subsequent events
The Plan Sponsor has evaluated subsequent events through September 25, 2017 the date the financial statements were available to be issued.

Note 2–Summary of significant accounting policies - continued

Recently issued accounting pronouncements

In July 2015, the Financial Accounting Standards Board (FASB) issued Accounting Standards Update (ASU) 2015-12, Plan Accounting: Defined Benefit Pension Plans (Topic 960), Defined Contribution Pension Plans (Topic 962), Health and Welfare Benefit Plans (Topic 965): (Part 1) Fully Benefit-Responsive Investment Contracts, (Part II) Plan Investment Disclosures, (Part III) Measurement Date Practical Expedient. Parts I and III are not applicable to the Plan. Part II eliminates the requirements to disclose individual investments that represent five percent or more of net assets available for benefits and the net appreciation or depreciation in fair value of investments by general type. Part II also simplifies the level of disaggregation of investments that are measured at fair value. Plans will continue to disaggregate investments that are measured at fair value by general type; however, plans are no longer required to also disaggregate investments by nature, characteristics, and risks. Further, the disclosure of information about fair value measurements should be provided by general type of plan asset. ASU 2012-12 is effective for fiscal years beginning after December 15, 2015, with early adoption permitted. The Plan adopted the applicable provisions ASU 2015-12 for December 21, 2016 and applied retrospectively.

In May 2015, the FASB issued Accounting Standards Update No. 2015-07, Fair Value Measurement (Topic 820): Disclosures for Investments in Certain Entities That Calculate Net Asset Value per Share (or its Equivalent) (ASU 2015-07). ASU 2015-07 removes the requirement to categorize within the fair value hierarchy all investments for which the fair value is measured using the net asset value per share practical expedient. ASU 2015-07 also removes the requirement to make certain disclosures for all investments that are eligible to be measured at fair value using the net asset value per share practical expedient. ASU 2015-07 should be applied retrospectively to all periods presented and is effective for annual periods beginning after December 15, 2016 with early adoption permitted. The Plan has elected to early adopt the new guidance applicable to the Plan for the year ended December 31, 2016, and applied the changes retrospectively to the Plan year ended December 31, 2015.

Reclassification

Certain 2015 amounts have been reclassified for comparative purposes to conform to the presentation of the 2016 financial statements. These reclassifications have no effect on the previously reported net assets available for benefits.

Note 3–Investments

All investment information for the years ending December 31, 2016 and 2015 disclosed in the accompanying financial statements, including investments held at December 31, 2016 and 2015, interest and dividends and net appreciation (depreciation) in fair value of investments and investment fees and expenses for the years ended December 31, 2016 and 2015, were obtained or derived from information supplied to the Plan Administrator and certified as complete and accurate by the Former Custodian for the period from January 1, 2015 through November 30, 2015 and the Current Trustee, and as of and for the year ended December 31, 2016 and as of December 31, 2015 and for the period from December 1, 2015 through December 31, 2015. Such information has not been examined by independent auditors.

Note 4–Fair value measurements

The framework for measuring fair value 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) and the lowest priority to unobservable inputs (level 3). The three levels of the fair value hierarchy under FASB Accounting Standards Codification Topic, Fair Value Measurement, 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. Inputs to the valuation methodology include:

a. Quoted prices for similar assets or liabilities in active markets;

b. Quoted prices for identical or similar assets or liabilities in inactive markets;

c. Inputs other than quoted prices that are observable for the asset or liability;

d. Inputs that are derived principally from or corroborated by observable market data by correlation or other means.

If the asset or liability has a specified (contractual) term, the level 2 input must be observable for substantially the full term of the asset or liability.

Level 3. Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

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 maximize the use of relevant observable inputs and minimize the use of unobservable inputs.

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2016 and 2015.

Mutual Funds and Money Market Funds – These are valued at quoted market prices based on daily closing price on the exchange or system in which the funds are principally traded.

Real estate funds – These are valued on the relevant business day with an evaluation price based on the total value of the security for a client's share of the holdings.

Hedge funds – These are valued at the point the fund is obtained by the Plan. Estimated NAV prices may be used when no other source is available.

Note 4– Fair value measurements–continued

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 and assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

The following tables set forth, by level, within the fair value hierarchy, Master Trust's assets carried at fair value:

		Fair Value Measurements at December 31, 2016 Using		
Description	**Total**	**Level (1)**	**Level (2)**	**Level (3)**
Mutual funds	$ 195,654,910	$ 195,654,910	$ 0	$ 0
Money market funds	12,000,580		12,000,580	
Total investments in the fair value hierarchy	207,655,490	$ 195,654,910	$ 12,000,580	$ 0
Investments measured at net asset value (a)	45,442,551			
Total investment assets at fair value	$ 253,098,041			

		Fair Value Measurements at December 31, 2015 Using		
Description	**Total**	**Level (1)**	**Level (2)**	**Level (3)**
Mutual funds	$ 191,057,136	$ 130,629,105	$ 60,428,031	$ 0
Money market funds	13,281,358		13,281,358	
Total investments in the fair value hierarchy	204,338,494	$ 130,629,105	$ 73,709,389	$ 0
Investments measured at net asset value (a)/(b)	43,642,244			
Total investment assets at fair value	$ 247,980,738			

(a) In accordance with Subtopic 820-10, certain investments that were measured at the net asset value per share (or its equivalent) have not been classified in the fair value hierarchy. The fair value amounts presented in this table are intended to permit reconciliation of the fair value hierarchy to the line items presented in the statement of net assets available for benefits.

(b) In accordance with ASU 2015-12, indirect holdings, which were reported as real estate funds and hedge funds in the prior year, are no longer presented as Level 2 but included in the Investments measured at the net asset value. The 2015 schedule has been reclassified to reflect such change.

Note 4– Fair value measurements–continued

The table below represents a real estate fund and 3 hedge funds measured at fair value using net asset value per share as a practical expedient:

	Unfunded commitments	Redemption frequency	Redemption notice period
Principal US Property	None	Daily	24 hours
GMO Multi Strategy Fund Offshore	None	Monthly	14 days
CF Permal Fixed Income Holdings	None	Monthly	11th calendar day of each month
Grosvenor Institutional Partners	None	Quarterly	70 days

Note 5–Master Trust

Investments within the Master Trust are valued at their fair value as determined by the Trustee. The Plan's interest in the Master Trust is determined by the Plan's relative asset value to the Master Trust's total asset value at the end of the year. Although assets of participating Plans are commingled, supporting records for the purpose of allocating the net gain or loss of the investment account to the participating Plans are maintained. The net investment income (loss) and administrative expenses of the investment assets are allocated by the custodian to each participating Plan based on the relationship of the interest of each Plan to the total of the interests of the participating Plans. The following has been derived from information certified as complete and accurate by the Former Custodian for the period from January 1, 2015 through November 30, 2015 and by the Current Trustee, as of and for the year ended December 31, 2016 and as of December 31, 2015 and for the period from December 1, 2015 through December 31, 2015.

The following presents the values of investments in the Master Trust as of December 31, 2016 and 2015:

	2016	2015
Mutual funds	$ 195,654,910	$ 191,057,136
Real estate funds	14,114,037	13,263,545
Hedge funds	31,328,514	30,378,699
Money market funds	12,000,580	13,281,358
Total investments of the Master Trust	$ 253,098,041	$ 247,980,738

	2016	2015
Plan's investment in the Master Trust	242,813,045	$ 237,809,596
Plan's percentage investment in the Master Trust	95.94%	95.90%

Note 5–Master Trust–continued

Investment income for the Master Trust for the years ended December 31, 2016 and 2015:

	2016	2015
Total net realized and unrealized gain (loss) on investments	17,122,143	(13,673,487)
Dividends	2,678,816	4,135,788
Net investment gain (loss)	$ 19,800,959	$ (9,537,699)

Note 6–Federal income tax status

The Plan has received a determination letter from the Internal Revenue Service dated September 7, 2016, stating that the Plan is qualified under Section 401(a) of the Internal Revenue Code (the Code), and therefore, the related trust is exempt from taxation. Once qualified, the Plan is required to operate in conformity with the Code to maintain its qualification. The Plan Administrator believes that the Plan is being operated in compliance with the applicable requirements of the Code, and therefore, believes that the Plan is qualified, and the related trust is tax exempt.

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 (or asset) if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination. The Plan Administrator has analyzed the tax positions taken by the Plan, and has concluded that there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) 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.

Note 7–Party-in-interest transactions

Certain Plan investments are shares of mutual funds managed by the Custodian, and therefore, these transactions qualify as party-in-interest transactions. There are no known prohibited transactions with a party-in-interest.

Note 8–Actuarial present value of accumulated plan benefits

Accumulated plan benefits are those estimated future periodic payments, including lump-sum distributions that are attributable under the Plan's provisions to services rendered by the employees to the valuation date. Accumulated plan benefits include benefits expected to be paid to (a) retired employees or their beneficiaries, (b) terminated employees with vested benefits, (c) beneficiaries of employees who have died, and (d) present employees or their beneficiaries. Benefits for active employees under the Plan are based on the employees' years of credited service computed to the nearest completed 1/12 of a year, multiplied by the pension amount in effect on the valuation date. Benefits payable under all circumstances are included, to the extent they are deemed attributable to employee service rendered to the valuation date.

An actuary estimates the actuarial present value of accumulated plan benefits, which is the amount that results from applying actuarial assumptions to adjust the accumulated plan benefits earned by the participants to reflect the time value of money (through discounts for interest) and the probability of payment (by means of decrements such as for death, disability, withdrawal or retirement) between the valuation date and the expected date of payment.

Significant actuarial assumptions used in performing the valuations include: (1) interest rate of 6.60 percent in 2016 and 6.70 percent in 2015; (2) mortality based on the 2015 PPA Static Mortality Tables with separate mortality rates for annuitants and non-annuitants for 2016 and the 2014 PPA Static Mortality Tables with separate mortality rates for annuitants and non-annuitants for 2015; (3) probability table of retirement with ages ranging from 55 to 65 with ten years of service; and (4) disability pension is based upon the alternative disabled life mortality tables as defined under Revenue Ruling 96-7 and (5) cash balance interest crediting rate of 2.89 percent in 2016 and 3.04 percent in 2015.

These actuarial assumptions are based on the presumption that the Plan will continue. If the Plan were to terminate, different actuarial assumptions and other factors might be applicable in determining the actuarial present value of accumulated plan benefits.

The actuary has determined the present value of the accumulated plan benefits as of January 1, 2016 and 2015, to be as follows:

	2016	2015
Actuarial present value of accumulated plan benefits		
Vested benefits:		
Participants currently receiving benefits	$ 128,875,825	$ 131,409,639
Other participants	87,599,361	85,549,528
Total vested benefits	216,475,186	216,959,167
Non-vested benefits:	3,671,359	4,527,446
Total actuarial present value of accumulated plan benefits	$ 220,146,545	$ 221,486,613

Note 8–Actuarial present value of accumulated plan benefits–continued

A reconciliation of the changes in the actuarial present value of accumulated plan benefits is summarized as follows:

	2016	2015
Actuarial present value of accumulated plan benefits as of January 1, 2015 and 2014	$ 221,486,613	$ 211,696,711
Increase (decrease) during year due to:		
Change in assumptions	(277,523)	17,476,524
Benefits paid	(14,914,569)	(30,762,685)
Change in discount period	14,375,375	14,073,296
Benefits accumulated and net actuarial losses	(523,351)	9,002,767
Actuarial present value of accumulated plan benefits as of January 1, 2016 and 2015	$ 220,146,545	$ 221,486,613

Note 9–Risks and uncertainties

The Plan invests in various investment securities. Investment securities are exposed to various risks such as interest rate, market, and credit risk. 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 that such changes could materially affect participants' account balances and the amounts reported in the statements of net assets available for benefits.

Plan Name	**Cooper-Standard Automotive Inc. Salaried Retirement Plan**
Plan Sponsor EIN	**34-0549970**
ERISA Plan #	**025**
Plan Year Ending	**December 31, 2016**

The required attachment marked with an "X" in the Attachment column is included within the "Signed Schedule MB or Schedule SB" attachment to Schedule SB location which consists of the entire Schedule SB and its attachments.

Form / Schedule	Line#	Description	Attachment Title (if different from Description)	Attach-ment
5500 Sch. SB	**None**	Statement by Enrolled Actuary		**X**
5500 Sch. SB	**Line 27**	Actuarial Information Based on Pre-PPA Funding Rules		
5500 Sch. SB	**Line E**	Information for Each Individual Employer		
5500 Sch. SB	**Line 4**	Additional Information for Plans in At-Risk Status		
5500 Sch. SB	**Line 7**	Explanation of Discrepancy in Prior Year Funding Standard Carryover Balance or Prefunding		
5500 Sch. SB	**Line 8**	Late Election to Apply Balances to Quarterly Installments		
5500 Sch. SB	**Line 9**	Explanation of Credit Balance Discrepancy		
5500 Sch. SB	**Line 18**	Contributions Made to the Plan for the Plan Year		
5500 Sch. SB	**Line 19**	Discounted Employer Contributions		
5500 Sch. SB	**Line 20c**	Liquidity Requirement Certification		
5500 Sch. SB	**Line 22**	Description of Weighted Average Retirement Age		**X**
5500 Sch. SB	**Line 23**	Information on Use of Multiple Mortality Tables		
5500 Sch. SB	**Line 23**	Information on Use of Substitute Mortality Tables		
5500 Sch. SB	**Part V**	Statement of Actuarial Assumptions/Methods		**X**
5500 Sch. SB	**Part V**	Summary of Plan Provisions		**X**
5500 Sch. SB	**Line 24**	Change in Actuarial Assumptions		**X**
5500 Sch. SB	**Line 25**	Change in Method		
5500 Sch. SB	**Line 26**	Schedule of Active Participant Data		**X**
5500 Sch. SB	**Line 27**	Balances Subject to Binding Agreement with PBGC		
5500 Sch. SB	**Line 27**	Alternative 17-Year Funding Schedule of Airlines		
5500 Sch. SB	**Line 32**	Schedule of Amortization Bases		
5500 Sch. SB		Other Attachment [Enter Description]		

Plan Name	**Cooper-Standard Automotive Inc. Salaried Retirement Plan**
Plan Sponsor EIN	**34-0549970**
ERISA Plan #	**025**
Plan Year Ending	**December 31, 2016**

The required attachment marked with an "X" in the Attachment column is included within the "Signed Schedule MB or Schedule SB" attachment to Schedule SB location which consists of the entire Schedule SB and its attachments.

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5500 Sch. SB	**Line 32**	Schedule of Amortization Bases		
5500 Sch. SB		Other Attachment [Enter Description]		

SCHEDULE SB (Form 5500)	Single-Employer Defined Benefit Plan Actuarial Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500 or 5500-SF.	2016 This Form is Open to Public Inspection

For calendar plan year 2016 or fiscal plan year beginning 01/01/2016 and ending 12/31/2016

▶ **Round off amounts to nearest dollar.**

▶ **Caution:** A penalty of $1,000 will be assessed for late filing of this report unless reasonable cause is established.

A Name of plan	B Three-digit plan number (PN) ▶
COOPER-STANDARD AUTOMOTIVE INC. SALARIED RETIREMENT PLAN	025

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF	D Employer Identification Number (EIN)
COOPER-STANDARD AUTOMOTIVE INC.	34-0549970

E Type of plan: [X] Single [ ] Multiple-A [ ] Multiple-B

F Prior year plan size: [ ] 100 or fewer [ ] 101-500 [X] More than 500

Part I Basic Information

1 Enter the valuation date: Month 01 Day 01 Year 2016

2 Assets:

a Market value	**2a**	244,379,254
b Actuarial value	**2b**	258,837,920

3 Funding target/participant count breakdown

	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a For retired participants and beneficiaries receiving payment	1,451	130,939,825	130,939,825
b For terminated vested participants	1,075	29,054,401	29,054,401
c For active participants	1,852	61,425,788	65,075,353
d Total	4,378	221,420,014	225,069,579

4 If the plan is in at-risk status, check the box and complete lines (a) and (b) [ ]

a Funding target disregarding prescribed at-risk assumptions	**4a**	
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	**4b**	
5 Effective interest rate	**5**	6.02%
6 Target normal cost	**6**	3,061,259

Statement by Enrolled Actuary

To the best of my knowledge, the information supplied in this schedule and accompanying schedules, statements and attachments, if any, is complete and accurate. Each prescribed assumption was applied in accordance with applicable law and regulations. In my opinion, each other assumption is reasonable (taking into account the experience of the plan and reasonable expectations) and such other assumptions, in combination, offer my best estimate of anticipated experience under the plan.

SIGN HERE

MM — Signature of actuary

9/29/17 — Date

Melissa Mayea — Type or print name of actuary

1707650 — Most recent enrollment number

Towers Watson Delaware Inc. — Firm name

248-936-7700 — Telephone number (including area code)

26555 Evergreen RD, Suite 1600

Southfield MI 48076 — Address of the firm

If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions [ ]

Part II Beginning of Year Carryover and Prefunding Balances

		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	30,981,216
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9	Amount remaining (line 7 minus line 8)	0	30,981,216
10	Interest on line 9 using prior year's actual return of -3.47%	0	-1,075,048
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38a from prior year)		5,652,429
	b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of 6.22%		351,581
	b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
	c Total available at beginning of current plan year to add to prefunding balance		6,004,010
	d Portion of (c) to be added to prefunding balance		750,000
12	Other reductions in balances due to elections or deemed elections	0	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	30,656,168

Part III Funding Percentages

14	Funding target attainment percentage	14	101.38%
15	Adjusted funding target attainment percentage	15	115.00%
16	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	101.10%
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage.	17	%

Part IV Contributions and Liquidity Shortfalls

18 Contributions made to the plan for the plan year by employer(s) and employees:

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
09/05/2017	3,500,000	0			
			Totals ► 18(b)	3,500,000	18(c) 0

19	Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:		
	a Contributions allocated toward unpaid minimum required contributions from prior years	19a	0
	b Contributions made to avoid restrictions adjusted to valuation date	19b	0
	c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	3,173,021
20	Quarterly contributions and liquidity shortfalls:		

a Did the plan have a "funding shortfall" for the prior year? [ ] Yes [X] No

b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner? [ ] Yes [ ] No

c If line 20a is "Yes," see instructions and complete the following table as applicable:

Liquidity shortfall as of end of quarter of this plan year

(1) 1st	(2) 2nd	(3) 3rd	(4) 4th

Part V Assumptions Used to Determine Funding Target and Target Normal Cost

21 Discount rate:

	1st segment:	2nd segment:	3rd segment:	
a Segment rates:	4.43 %	5.91 %	6.65%	☐ N/A, full yield curve used

b Applicable month (enter code)	**21b**	0
22 Weighted average retirement age	**22**	60

23 Mortality table(s) (see instructions) ☐ Prescribed - combined ☒ Prescribed - separate ☐ Substitute

Part VI Miscellaneous Items

24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment	☒ Yes	☐ No
25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment	☐ Yes	☒ No
26 Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment	☒ Yes	☐ No

27 If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment	**27**	

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

28 Unpaid minimum required contributions for all prior years	**28**	0
29 Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a)	**29**	0
30 Remaining amount of unpaid minimum required contributions (line 28 minus line 29)	**30**	0

Part VIII Minimum Required Contribution For Current Year

31 Target normal cost and excess assets (see instructions):		
a Target normal cost (line 6)	**31a**	3,061,259
b Excess assets, if applicable, but not greater than line 31a	**31b**	3,061,259

32 Amortization installments:	Outstanding Balance	Installment
a Net shortfall amortization installment	0	0
b Waiver amortization installment	0	0

33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	**33**	0
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)	**34**	0

	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	0	0

36 Additional cash requirement (line 34 minus line 35)	**36**	0
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	**37**	3,173,021
38 Present value of excess contributions for current year (see instructions)		
a Total (excess, if any, of line 37 over line 36)	**38a**	3,173,021
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	**38b**	0
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	**39**	0
40 Unpaid minimum required contributions for all years	**40**	0

Part IX Pension Funding Relief Under Pension Relief Act of 2010 (See Instructions)

41 If an election was made to use PRA 2010 funding relief for this plan:

a Schedule elected	☐ 2 plus 7 years	☐ 15 years
b Eligible plan year(s) for which the election in line 41a was made	☐ 2008 ☐ 2009 ☐ 2010 ☐ 2011	
42 Amount of acceleration adjustment	**42**	0
43 Excess installment acceleration amount to be carried over to future plan years	**43**	0

SCHEDULE SB ATTACHMENTS

Schedule SB – Statement by Enrolled Actuary

Plan Sponsor	Cooper-Standard Automotive, Inc.
EIN/PN	34-0549970/025
Plan Name	Cooper-Standard Automotive Inc. Salaried Retirement Plan
Valuation Date	January 1, 2016
Enrolled Actuary	Melissa Mayea
Enrollment Number	17-07650

The actuarial assumptions that are not mandated by IRC § 430 and regulations, represent the enrolled actuary's best estimate of anticipated experience under the plan, subject to the following conditions:

The actuarial valuation, on which the information in this Schedule SB is based, has been prepared in reliance upon the employee and financial data furnished by the plan administrator and the trustee. The enrolled actuary has not made a rigorous check of the accuracy of this information but has accepted it after reviewing it and concluding it is reasonable in relation to similar information furnished in previous years. The amounts of contributions and dates paid shown in Item 18 of Schedule SB were listed in reliance on information provided by the plan administrator and/or trustee.

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 22
Description of Weighted Average Retirement Age
as of January 1, 2016

See Part V for retirement rates. The average retirement age for Line 22 was calculated by determining the average age at retirement for those current active participants expected to reach retirement, based on all current decrements assumed.

Plan Name:	Cooper-Standard Automotive Inc. Salaried Retirement Plan
EIN / PN:	34-0549970 / 025
Plan Sponsor:	Cooper Standard Automotive
Valuation Date:	January 1, 2016

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 24

Change in Actuarial Assumptions

The assumed plan-related expenses added to the target normal cost were changed from $1,886,000 for the prior valuation to $2,514,000 for the current valuation to account for higher expected expenses to be paid from the trust.

The cash balance interest crediting rate was updated to 2.89% for 2016 and continued at 4.00% annually thereafter.

Plan Name:	Cooper-Standard Automotive Inc. Salaried Retirement Plan
EIN / PN:	34-0549970 / 025
Plan Sponsor:	Cooper Standard Automotive
Valuation Date:	January 1, 2016

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 26
Schedule of Active Participant Data for Cash Balance Plans as of January 1, 2016

Attained Age	Years of Credited Service																			
	Under 1		1 to 4		5 to 9		10 to 14		15 to 19		20 to 24		25 to 29		30 to 34		35 to 39		40 & Over	
	No.	Cash Bal.	No.	Cash Bal.	No.	Cash Bal..	No.	Cash Bal.	No.	Cash Bal.	No.	Cash Bal.	No.	Cash Bal.	No.	Cash Bal.	No.	Cash Bal.	No.	Cash Bal.
Under 25	0		0		0		0		0		0		0		0		0		0	
25 – 29	0		11		0		0		0		0		0		0		0		0	
30 – 34	9		22	3,530	22	7,481	0		0		0		0		0		0		0	
35 - 39	3		38	5,247	68	10,973	10		0		0		0		0		0		0	
40 - 44	3		80	5,153	104	15,176	29	32,005	6		0		0		0		0		0	
45 - 49	9		70	8,599	118	15,981	38	35,875	6		3		0		0		0		0	
50 - 54	3		102	6,574	118	18,849	33	47,934	13		11		8		1		0		0	
55 - 59	3		89	9,759	120	17,589	24	50,052	8		5		0		0		0		0	
60 - 64	0		57	11,857	67	19,956	12		1		1		0		0		0		0	
65 - 69	1		10		11		3		2		2		0		0		0		0	
70 & Over	0		0		5		0		0		0		0		0		0		0	

Plan Name: Cooper-Standard Automotive Inc. Salaried Retirement Plan
EIN / PN: 34-0549970 / 025
Plan Sponsor: Cooper Standard Automotive
Valuation Date: January 1, 2016

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 26
Schedule of Active Participant Data as of January 1, 2016

Attained Age	Years of Credited Service																			
	Under 1		1 to 4		5 to 9		10 to 14		15 to 19		20 to 24		25 to 29		30 to 34		35 to 39		40 & Over	
	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.
Under 25	0		0		0		0		0		0		0		0		0		0	
25 - 29	0		12		0		0		0		0		0		0		0		0	
30 - 34	9		24		26		0		0		0		0		0		0		0	
35 - 39	3		42		73		18		6		0		0		0		0		0	
40 - 44	3		83		110		44		39		10		0		0		0		0	
45 - 49	9		72		121		50		47		27		4		0		0		0	
50 - 54	4		103		127		47		40		38		42		13		3		0	
55 - 59	3		90		121		30		33		19		25		29		17		0	
60 - 64	0		58		68		15		13		11		12		6		11		1	
65 - 69	1		10		14		3		3		3		1		1		2		2	
70 & Over	0		0		2		0		0		0		1		0		0		0	

Plan Name: Cooper-Standard Automotive Inc. Salaried Retirement Plan
EIN / PN: 34-0549970 / 025
Plan Sponsor: Cooper Standard Automotive
Valuation Date: January 1, 2016

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 26
Schedule of Active Participant Data for Non Cash Balance Participants Only[1]
As of January 1, 2016

Attained Age	Years of Credited Service																			
	Under 1		1 to 4		5 to 9		10 to 14		15 to 19		20 to 24		25 to 29		30 to 34		35 to 39		40 & Over	
	No.	Avg. AnnualBen.	No.	Avg. Annual Ben.	No.	Avg. AnnualBen.	No.	Avg. AnnualBen.	No.	Avg. AnnualBen.	No.	Avg. AnnualBen.	No.	Avg. AnnualBen.	No.	Avg. AnnualBen.	No.	Avg. AnnualBen.	No.	Avg. AnnualBen.
Under 25	0		0		0		0		0		0		0		0		0		0	
25 – 29	0		2		0		0		0		0		0		0		0		0	
30 – 34	0		6		0		0		0		0		0		0		0		0	
35 - 39	0		12		3		9		0		0		0		0		0		0	
40 - 44	0		34	993	3		14		14		2		0		0		0		0	
45 - 49	0		24	1,167	3		11		26	7,748	12		1		0		0		0	
50 - 54	0		46	1,080	5		13		15		16		28	13,015	1		0		0	
55 - 59	0		45	1,072	1		5		10		12		23	15,037	20	20,786	5		0	
60 - 64	0		25	946	1		3		5		6		12		4		10		1	
65 - 69	0		6		0		0		0		0		1		1		2		2	
70 & Over	0		0		0		0		1		0		1		0		0		0	

[1] Counts include those who have hard frozen benefits

Plan Name: Cooper-Standard Automotive Inc. Salaried Retirement Plan
EIN / PN: 34-0549970 / 025
Plan Sponsor: Cooper Standard Automotive
Valuation Date: January 1, 2016

SCHEDULE SB ATTACHMENTS

Schedule SB, Part V
Statement of Actuarial Assumptions/Methods

Economic Assumptions

Interest rate basis:

■ Applicable month	January
■ Interest rate basis	3-Segment Rates

Interest rates:

	Reflecting Corridors	Not Reflecting Corridors
■ First segment rate	4.43%	1.41%
■ Second segment rate	5.91%	3.96%
■ Third segment rate	6.55%	4.97%
■ Effective interest rate	6.02%	4.16%

Annual rates of increase

■ Compensation:	N/A
■ Future Social Security wage bases	N/A
■ Statutory limits on compensation	N/A

Administrative expenses — $2,514,000 of administrative expenses including estimated flat and variable PBGC premiums.

Interest Credit — Account balances are assumed to be credited at 2.89% for 2016 and continued at 4.00% annually thereafter.

SCHEDULE SB ATTACHMENTS

Demographic Assumptions

Inclusion date

The valuation date coincident with or next following the date on which the employee becomes a participant is hired until the individual freeze date for each plan.

Mortality

- Healthy

For Funding: Separate rates for non-annuitants (based on RP-2000 "Employees" table without collar or amount adjustments projected to 2031 using Scale AA) and annuitants (based on RP-2000 "Healthy Annuitants" table without collar or amount adjustments, projected to 2023 using Scale AA).

- Disabled

For Archbold, Auburn, BG Hose, BG Seal, El Dorado and Newlex disabled participants: Separate rates for non-annuitants (based on RP-2000 "Employees" table without collar or amount adjustments projected to 2031 using Scale AA) and annuitants (based on RP-2000 "Healthy Annuitants" table without collar or amount adjustments, projected to 2023 using Scale AA).

For all other disabled participants: Alternative disabled life mortality tables as defined under Revenue Ruling 96-7.

Termination

For Salary participants, 30% of Vaughn Table ultimate rates. For Hourly participants, 50% of Vaughn Table ultimate rates. The rates at which participants are assumed to leave the company by age are shown below:

Representative Termination Rates

Percentage leaving during the year		
Attained Age	Salary %	Hourly %
25	4.08	6.80
30	3.03	5.05
35	2.37	3.95
40	1.95	3.25
45	1.65	2.75
50	1.35	2.25
55	0.00	0.00
60	0.00	0.00

SCHEDULE SB ATTACHMENTS

Retirement

The rates at which all active participants are assumed to retire are shown below:

Percentage retiring during the year			
Age	Salary %	Merged Archbold %	Merged Northern Plants, Leonard, BGSeal, Auburn, Newlex and BGHose %
50		2.35	
51		2.25	
52		2.18	
53		2.12	
54		2.07	
55	15.00	10.00	10.00
56	15.00	5.00	5.00
57	15.00	5.00	5.00
58	15.00	5.00	5.00
59	30.00	5.00	5.00
60	30.00	15.00	15.00
61	40.00	15.00	15.00
62	50.00	30.00	30.00
63	50.00	30.00	30.00
64	50.00	40.00	40.00
65	100.00	100.00	100.00

Disability

50% of Pension Disability Table (DP-85) class 1 Incidence Rates. 100% of the rates are assumed for merged Archbold, Auburn, BG Hose, BG Seal and Newlex participants.

Benefit commencement date:

- Preretirement death benefit — The later of the death of the active participant or the date the participant would have attained the earliest retirement age (age 55 for Newlex).
- Deferred vested benefit — Generally, the participant is assumed to commence payment at the age their benefit is unreduced.
- Disability benefit — Upon disablement
- Retirement benefit — Upon termination of employment

SCHEDULE SB ATTACHMENTS

Form of payment	For valuation purposes, participants are assumed to elect the normal pension payment option, except cash balance participants are assumed to elect a lump sum. Auburn, BG Hose and BG Seal actives who terminate before their early retirement age are assumed to take a lump sum (based on UP84 [set forward one year] mortality and a 4% interest rate).
Percent married	For purposes of valuing the pre-retirement surviving spouse's benefit, 80% of eligible male and female participants are assumed to be married.
Spouse age	Male participants are assumed to be 3 years older than their spouses and female participants are assumed to be 3 years younger than their spouses.
Covered pay	N/A
Timing of benefit payments	Annuity payments are payable monthly at the beginning of the month and lump sum payments are payable on date of decrement.

Methods

Valuation date	First day of plan year
Funding target	Present value of accrued benefits as required by regulations under IRC §430.
Target normal cost	Present value of benefits expected to accrue during the plan year plus plan-related expenses expected to be paid from plan assets during the plan year as required by regulations under IRC §430.

SCHEDULE SB ATTACHMENTS

Actuarial value of assets [for determining minimum required contributions]	Average of the fair market value of assets on the valuation date and 12 and 24 months preceding the valuation date, adjusted for contributions, benefits, administrative expenses and expected earnings of 6.70% in 2015 and 6.99% in 2014 (with such expected earnings limited as described in IRS Notice 2009-22). The average asset value must be within 10% of market value, including discounted contributions receivable (discounted using the effective interest rate for the prior year). The method of computing the actuarial value of assets complies with rules governing the calculation of such values under the Pension Protection Act of 2006 (PPA). These rules produce smoothed values that reflect the underlying market value of plan assets but fluctuate less than the market value. As a result, the actuarial value of assets will be lower than the market value in some years and greater in other years. However, over the long term under PPA's smoothing rules, the method has a significant bias to produce an actuarial value of assets that is below the market value of assets.
Benefits not valued	Willis Towers Watson has reviewed the plan provisions with Cooper Standard and, based on that review, is not aware of any other significant benefits required to be valued that were not.

Assumptions Rationale – Significant Economic Assumptions

Discount rate	The basis chosen was selected by the plan sponsor from among choices prescribed by law, all of which are based on observed market data over certain periods of time.
Cash Balance Interest crediting rate	The plan credits interest to cash balance accounts using the October 30-year Treasury rate. The plan sponsor has selected an expected future 30-year Treasury rate of 4.00%. After examining historical variability in this rate, we believe that the selected assumption does not significantly conflict with what would be reasonable based on a combination of market conditions at the measurement date and future expectations consistent with other economic assumptions used, other than the discount rate.

SCHEDULE SB ATTACHMENTS

Assumptions Rationale – Significant Demographic Assumptions	
Healthy Mortality	Assumptions used for funding purposes are as prescribed by IRC §430(h).
Disabled Mortality	Assumptions used for funding purposes are as prescribed by IRC §430(h).
Termination	Termination rates were based on a published table for pension participants believed to have similar characteristics to the plan population, adjusted for observed plan experience.
Disability	Disability rates were based on a published table for pension participants believed to have reasonably similar characteristics participating in pension plans with similar disability provisions, adjusted for observed plan experience.
Retirement	Retirement rates are based on plan sponsor expectations for the future and current economic conditions with periodic monitoring of observed gains and losses caused by retirement patterns different than assumed.
Benefit commencement date for deferred benefits:	
Preretirement death benefit	Surviving spouses are assumed to begin benefits at the earliest permitted commencement date because ERISA requires benefits to start then unless the spouse elects to defer. If the spouse elects to defer, actuarial increases from the earliest commencement date must be given, so that a later commencement date is expected to be of approximately equal value, and experience indicates that most spouses do take the benefit as soon as it is available.
Deferred vested benefit	Generally, deferred vested participants are assumed to begin benefits at the age when benefits are first unreduced.

SCHEDULE SB ATTACHMENTS

Source of Prescribed Methods

Funding methods	The methods used for funding purposes as described in Appendix A, including the method of determining plan assets, are "prescribed methods set by law", as defined in the actuarial standards of practice (ASOPs). These methods are required by IRC §430, or were selected by the plan sponsor from a range of methods permitted by IRC §430.

Changes in Assumptions and Methods

Change in assumptions since prior valuation	■ The segment interest rates used to calculate the funding target and target normal cost were updated to the current valuation date as required by IRC 430. ■ The mortality tables used to calculate the funding target and target normal cost were updated to the current valuation date as required by IRC 430. ■ The assumed plan-related expenses added to the target normal cost were changed from $1,886,000 for the prior valuation to $2,514,000 for the current valuation to account for lower expected expenses to be paid from the trust. ■ The cash balance interest crediting rate was updated to 2.89% for 2016 and continued at 4.00% annually thereafter.
Change in methods since prior valuation	None.

SCHEDULE SB ATTACHMENTS

Schedule SB, Part V

Summary of Plan Provisions

Effective Date and Most Recent Amendment

The plan was originally effective January 1, 1957, and most recently amended effective December 31, 2012.

Plan Year

The twelve-month period ending December 31.

Coverage and Participation

Cash Balance, Grandfathered Cooper Tire and Standard Products, Northern Plants, Archbold, and Leonard:

An eligible employee becomes a participant on the first day of the calendar month on or after completing one year of eligibility service.

Eligible employees exclude those who are:

- included in the unit of employees covered by a collective bargaining agreement
- a non-resident Alien
- a leased employee
- an independent contractor
- a director of Cooper Standard and not an employee
- accruing benefits under another plan

No employee will become a participant after January 1, 2009.

SCHEDULE SB ATTACHMENTS

Merged BG Hose:

An Employee meeting the following requirements is an Active Participant on the first day of employment:

- Employed in the Bowling Green-Hose plant before March 31, 2009
- Represented by United Steel Workers of America and Local Union No. 1152
- Not a leased employee

Merged BG Seal:

An Employee meeting the following requirements is an Active Participant on the first day of employment:

- Employed in the Bowling Green-Seal plant before July 1, 2009
- Represented by United Steel Workers of America and Local Union No. 1042
- Not a leased employee

Merged Newlex:

An Employee meeting the following requirements is an Active Participant on the first day of employment:

- A regular hourly employee of Cooper–Standard Automotive FHS Inc. (the Company) at 2378 State Rte. #345 N.E., Rte. #2, New Lexington, Ohio;
- Hired before January 1, 2007; and
- Represented by Local 1686 of the International Union, United Automobile, Aerospace and Agricultural Implement Workers of America, UAW.

Merged Auburn:

An Employee meeting the following requirements is an Active Participant on the first day of employment:

- Employed in the Auburn, Indiana plant before July 1, 2008
- Represented by United Steel Workers of America and Local Union No. 634
- Not a leased employee

SCHEDULE SB ATTACHMENTS

Merged El Dorado:

An Employee meeting the following requirements is an Active participant on the first day of employment:

- Represented by the United Steel Workers of America and Local Union No. 769L
- Employed in the El Dorado, Arkansas plant

Accrual Service

Cash Balance, Grandfathered Cooper Tire and Standard Products, Northern Plants, Archbold, and Leonard:

Full Time Employees: Period of time (in complete years and months) between an employee's employment commencement date and their most recent severance date.

Part Time Employees: A year of service for every 12 consecutive-month period of employment, starting with the employment commencement date, in which the employee is credited with at least 1,000 hours of service.

Accrual service is frozen effective January 31, 2009

Merged BG Hose and BG Seal:

A participant earns a year of Accrual Service for each year of continuous service or period of service while an active participant in completed months. Service before January 1, 1976, which was not included in the employee's continuous service credit under the plan as in effect on December 31, 1975, is excluded. Accrual service was frozen for all purposes except for determining a Participant's eligibility for a reduced Early Retirement Benefit as of April 1, 2009 for BG Hose participants.

Merged Newlex:

The participant earns one full year of service if compensated for working at least 1,680 hours in the year, and earns 1/10th of a year of service for each 168 hours worked if total hours worked in the year was less than 1,680.

Service prior to January 1, 1972 is excluded.

SCHEDULE SB ATTACHMENTS

Merged Auburn:

A participant earns a year of Accrual Service for each year of continuous service or period of service while an active participant in completed months. Service before January 1, 1976, which was not included in the employee's continuous service credit under the plan as in effect on December 31, 1975, is excluded.

Benefit Accrual service was frozen for the period April 1, 2009 to March 31, 2010 and permanently as of August 31, 2011.

Vesting Service

Same as Accrual Service. Merged Archbold participants receive one year of continuous service for each plan year in which they work at least 1,000 hours of service.

Merged Newlex:

Vesting service includes all years of uninterrupted service since January 1, 1972 as a regular employee of the company not including calendar years with less than 1,000 hours worked.

Compensation

All W-2 wages paid during a calendar year excluding employer contributions to a deferred compensation plan, stock options, director fees, sales awards, relocation and signing bonuses, lump sum severance payments, system awards, and certain other exclusions. Signing bonuses and lump sum severance payments are included for grandfathered Cooper participants. Grandfathered Standard compensation is W-2 wages excluding expense allowances, fringe benefits, moving expenses, deferred compensation, and welfare benefits.

Final Average Compensation/Salary

The average of the highest 5 of the latest 10 compensation years of pay.

Grandfathered Standard Products: 60 consecutive months out of the latest 120 which give the highest average.

Average compensation is frozen as of January 31, 2009. For Grandfathered Cooper Tire, no compensation paid after December 31, 2008 will be included in average compensation. For Grandfathered Standard Products, no compensation paid after January 31, 2009 will be included in average compensation.

SCHEDULE SB ATTACHMENTS

Normal Retirement Benefit

Eligibility: The first day of the month on or after the date the participant reaches the later of age 65 or 5 years after entering the plan. Merged Northern Plants, Leonard and Newlex, age 65.

Benefit:

Cash Balance: Cash balance account projected with interest credits to normal retirement age and converted to an actuarially equivalent monthly annuity. There are no additional pay credits after January 31, 2009. Participants will continue to receive interest credits.

Grandfathered Cooper Tire: Monthly Benefit is frozen effective January 31, 2009, and is the greater of:

1.50% Average Compensation multiplied by Credited Service and

$20 multiplied by Accrual Service

Grandfathered Standard Products: Monthly Benefit is frozen effective January 31, 2009 and is the greater of:

a. Average Compensation multiplied by the accrued benefit adjustment. The accrued benefit adjustment is based on accrual service at retirement (only if an Employee as of June 30, 1976).

b. 1-1/15% of Average Compensation up to the Covered Compensation limit multiplied by Accrual Service (up to 30 years) plus 1- 2/3% of Average Compensation over the Covered Compensation limit multiplied by Accrual Service (up to 30 years) and

c. $30 x Accrual Service

Merged Archbold: $30 multiplied by Accrual Service, limited to 42 years. Benefits were frozen at May 1, 2009 as a result of the plant closure.

Merged Northern Plants and Leonard: Frozen monthly benefit.

BG Hose: $42 multiplied by Accrual Service, frozen December 31, 2009.

BG Seal: Monthly benefit is Accrual Service multiplied by $42.

Newlex: $22 multiplied by Accrual Service up to 35 years. Benefit accruals were frozen as of January 1, 2014.

SCHEDULE SB ATTACHMENTS

Auburn: Monthly benefit is Accrual Service multiplied by:

$41, if hired on or before July 1, 2005 or

$25, if hired after July 1, 2005

Benefit accruals were frozen for the period April 1, 2009 to March 31, 2010 and permanently August 31, 2011.

El Dorado: $33 multiplied by Accrual Service.

Normal Form of Benefit

If single:

Cash Balance, Grandfathered Cooper Tire and Newlex, merged Northern Plants, Leonard and Archbold: Life annuity.

Grandfathered Standard Products, Auburn, El Dorado, BG Seal, BG Hose and El Dorado: Life annuity with 5 years certain.

If married: 50% Joint and Survivor annuity (except for Grandfathered Standard Products a 55% joint and survivor annuity with 5 years certain and for BG Hose, a 50% joint and survivor annuity with 5 years certain). 50% Joint and Survivor annuity for Newlex.

Early Retirement Benefit

Eligibility:

Cash Balance: Age 55 and 15 years of Vesting Service or age 62 and 10 years of Vesting Service

Grandfathered Cooper Tire: Age 55 and 15 years of Vesting Service; Special Early Retirement at age 62 and 10 years of Vesting Service or age 55 and 30 years of Vesting Service.

Grandfathered Standard Products: Age 55 and 10 years of Accrual Service

Merged Archbold: Age 50 and 10 years of Continuous Service

Merged Northern Plants and Leonard: Age 55 and 5 years of Vesting Service

SCHEDULE SB ATTACHMENTS

Auburn, BG Seal, and BG Hose: Earlier of 30 years of Accrual Service or age 55 and 10 years of Vesting Service.

El Dorado: Earlier of 30 years of Accrual Service or age 55 and 10 years of vesting service.

Newlex: Age 55 and 15 years of Vesting Service.

Benefit:

Cash Balance: The normal pension benefit, reduced by 0.6% for each month (up to 36 months) and 0.4% for each additional month (up to 84 months) by which the date of benefit commencement precedes age 65 and 5 years of Vesting Service.

Grandfathered Cooper Tire: The normal pension benefit reduced by 0.4% for each month by which the date of benefit commencement precedes age 62. If 30 years of vesting service, benefit is unreduced at age 55.

Grandfathered Standard Products and BG Hose: An actuarially equivalent normal pension benefit based on the number of years by which the date of benefit commencement precedes normal retirement age. In addition, a Supplemental Allowance is payable equal to $150 per month for Grandfathered Standard Products ($250 for BG Hose plus $5 for each year of Accrual Service or 30, $10 for each year of age over 55), reduced by $0.41-2/3 for each month that accrual service is less than 30 years at the Early Retirement Date. Supplement is paid after retirement and age 60, and is payable to age 62.

Merged Archbold: the normal pension benefit reduced 1/180 per month for the first 60 months, 1/250 per month for the next 60 months, and 1/400 per month for the next 60 months.

Merged Northern Plants and Leonard: The normal pension benefit reduced by 1/180 per month for the first 60 months, and 1/360 per month for the next 60 months by which the date of benefit commencement precedes the Normal Retirement Date.

Merged Auburn, El Dorado and BG Seal: Monthly accrued benefit reduced by 0.4% for each complete month by which the date of commencement precedes age 62. If the participant has not attained age 55, but has at least 30 years of accrual service, the benefit is unreduced.

A participant who is at least age 55 with 30 or more years of Accrual Service receives a supplemental benefit, payable until the participant is eligible to commence Social Security benefits at the 80% reduced amount (age 62 if born before 1938). The monthly supplemental benefit is equal to $350 plus $5 for each year of Accrual Service over 30, and $10 for each year of age over 55 on the Early Retirement Date.

The Auburn plan was frozen on August 31, 2011 except for the Kicker for those that at least 26 years of Accrual Service as of July 1, 2011 but were not yet eligible for early retirement.

Merged Newlex: Normal retirement benefit reduced by 1/180th for each of the first 60 months by which the date of commencement precedes normal retirement date and further reduced by 1/360th for each month in excess of 60 months by which commencement precedes normal retirement date.

Plan Name:	Cooper-Standard Automotive Inc. Salaried Retirement Plan
EIN / PN:	34-0549970 / 025
Plan Sponsor:	Cooper Standard Automotive
Valuation Date:	January 1, 2016

SCHEDULE SB ATTACHMENTS

Disability Benefit

Eligibility:

Cash Balance, El Dorado, Grandfathered Cooper Tire and Standard Products, Northern Plants, Archbold, and Leonard: Totally and permanently disabled and completed at 10 years of Vesting Service and have not attained age 65. For merged Archbold, 15 years of Continuous Service.

Newlex and BG Hose: 10 years of Vesting Service (age 50 for Newlex), totally and permanently disabled, and not receiving payments for the same disability under the Permanent Total Disability provision of the Group Life Insurance Program.

Auburn and BG Seal: 20 years of Vesting Service, totally and permanently disabled, and not receiving payments for the same disability under the Permanent Total Disability provision of the Group Life Insurance Program.

Benefit:

Cash Balance, El Dorado and Grandfathered Cooper Tire: Unreduced accrued benefit until age 65. At age 65 the benefit is reduced by 1%.

Grandfathered Standard Products: Greater of: a., b., c.

a. Average Compensation multiplied by the accrued benefit adjustment. The accrued benefit adjustment is based on accrual service at retirement (only if an Employee as of June 30, 1976).

b. 1-1/15% of Average Compensation up to the Covered Compensation limit multiplied by Accrual Service (up to 30 years) plus 1- 2/3% of Average Compensation over the Covered Compensation limit multiplied by Accrual Service (up to 30 years) and

c. $26 multiplied by Accrual Service.

At age 65 the benefit is reduced by 1% if based on a or b and reduced by 50% if based on c.

Merged Archbold: Unreduced accrued benefit payable until age 65. At age 65 the benefit is recomputed as a joint and survivor benefit form if the disabled retiree is married.

Merged Northern Plants and Leonard: Unreduced frozen benefit.

Auburn, BG Seal, and BG Hose: Monthly accrued benefit based on Accrual Service at date of disability. The 5-year certain period under the form of elected benefit begins on the Disability Retirement date if Vesting Service is at least 30 years. If Vesting Service is less than 30 years the 5-year certain period begins on the later of age 55 or Disability Retirement Date.

SCHEDULE SB ATTACHMENTS

Newlex:

- Benefit before Normal Retirement: Full monthly pension benefits reduced by certain worker's compensation benefits until age 65.
- Benefit after Normal Retirement: After age 65, any offset for public disability payments stops. The benefit is then recomputed based on the benefit form elected to be paid at that time.

Termination Benefit

Eligibility: 3 years of Vesting Service (5 years of Vesting Service for BG Hose, BG Seal, and Auburn; 5 years of Vesting Service with commencement at age 55 or later for Newlex). All merged Archbold and El Dorado participants are fully vested.

Benefit:

Cash Balance: Account balance at the date of termination

Grandfathered Cooper Tire and Standard Products: Accrued normal pension benefit, payable at normal retirement date. If Vesting Service is at least 10 years at termination date, then the benefit is payable on the Early Retirement Date and reduced in the same manner as the Early Retirement Benefit.

Merged Northern Plants and Leonard: Frozen benefit; reduced by the same factors as for an Early Retirement Benefit for commencement before age 65.

Merged Archbold: Accrued normal pension benefit; reduced by the same factors as for an Early Retirement Benefit for commencement before age 65.

Auburn, El Dorado, BG Seal, and BG Hose: Accrued normal pension reduced by 0.4% for each month commencement precedes age 62.

Newlex: Normal retirement benefit reduced by $1/180^{th}$ for each of the first 60 months by which the date of commencement precedes normal retirement date and further reduced by $1/360^{th}$ for each month in excess of 60 months by which commencement precedes normal retirement date.

Death Benefit

Eligibility: 3 years of Vesting Service. All merged Archbold and El Dorado participants are fully vested. For Auburn, BG Seal, and BG Hose, participants must be married at least one year, be vested and die before benefit commencement.

SCHEDULE SB ATTACHMENTS

Newlex: Survivor benefits are automatically provided if a participant is married and dies either:

- In active service after completing five years of continuous service
- In active service after attaining age 65
- After termination of service on or after August 23, 1984 with entitlement to a vested benefit, but before pension payments have started, or
- After retirement (other than disability retirement), but before pension payments have started.

Benefit:

Cash Balance: Account balance at the date of death.

All others:

Pre-Retirement Benefit:

Upon the death of a participant after 5 years of Vesting Service, the surviving spouse shall receive a 50% survivor benefit computed as if the participant had terminated employment at date of death, survived to earliest retirement age and elected commencement of benefits under the Normal Form of Payment and at that time died.

Newlex: If the participant dies before reaching age 65, payments to the spouse will automatically begin when the participant would have reached age 65. However, the spouse can elect to receive a reduced benefit as early as the date the participant would have reached age 55 or upon the participants' death if after age 55. Payment to the spouse is 50% of the benefit that would have been payable to the participant, reduced to reflect the 50% survivor option.

If the participant continues working after age 65 and dies before retiring, payments to the spouse will begin the month following the participant's death.

Post-Retirement Benefit:

Elected form of payment plus a single sum benefit of $2,250 ($2,000 for BG Hose and Newlex, $750 for El Dorado, and $4,000 for BG Seal). A participant who terminated employment before age 60 and did not commencement retirement or disability payments immediately is not eligible for a single sum death benefit.

Newlex: Payable to participants who retired after June 24, 2002. Elected form of payment plus a single sum benefit of $2,000.

SCHEDULE SB ATTACHMENTS

Optional Forms of Retirement Income in Lieu of Normal Form

These alternative payment arrangements are available for normal, postponed or early pension benefits:

Cash Balance, Grandfathered Cooper Tire, Merged Northern Plants and Leonard:

- Lump Sum (only for Cash Balance)
- Life annuity with 5 year certain
- 50% joint and survivor and 5 year certain annuity
- 75% joint and survivor annuity

Grandfathered Standard Products (optional forms are not available to disabled retirees, terminated vested participants or death benefits):

- Life annuity
- Life annuity with 10 year certain
- 75% joint and survivor annuity
- 100% joint and survivor annuity
- Lump sum

Merged Archbold:

- 75% joint and survivor annuity

Newlex:

- Joint and 75% Survivor Option
- Joint and 100% Survivor Option

Auburn and El Dorado:

- 5-year certain benefit followed by either a reduced life annuity with continuing 50%, 75% or 100% joint and survivor benefit
- 5-year certain life annuity followed by a reduced additional 5, 10, or 15 year certain and life annuity.

Plan Name:	Cooper-Standard Automotive Inc. Salaried Retirement Plan
EIN / PN:	34-0549970 / 025
Plan Sponsor:	Cooper Standard Automotive
Valuation Date:	January 1, 2016

SCHEDULE SB ATTACHMENTS

BG Hose and BG Seal:

- 5-year certain benefit followed by either a reduced life annuity with continuing 50%, 75% or 100% joint and survivor benefit
- 5-year certain life annuity followed by a reduced additional 5, 10 or 15 year certain and life annuity
- Lump sum option if terminate before early retirement age

Pension Increases

N/A

Plan Participants' Contributions

N/A

Changes in Plan Provisions since Last Actuarial Valuation

None.

Plan Name	**Cooper-Standard Automotive Inc. Salaried Retirement Plan**
Plan Sponsor EIN	**34-0549970**
ERISA Plan #	**025**
Plan Year Ending	**December 31, 2016**

The required attachment marked with an "X" in the Attachment column is included within the "Signed Schedule MB or Schedule SB" attachment to Schedule SB location which consists of the entire Schedule SB and its attachments.

Form / Schedule	Line#	Description	Attachment Title (if different from Description)	Attach-ment
5500 Sch. SB	**None**	Statement by Enrolled Actuary		**X**
5500 Sch. SB	**Line 27**	Actuarial Information Based on Pre-PPA Funding Rules		
5500 Sch. SB	**Line E**	Information for Each Individual Employer		
5500 Sch. SB	**Line 4**	Additional Information for Plans in At-Risk Status		
5500 Sch. SB	**Line 7**	Explanation of Discrepancy in Prior Year Funding Standard Carryover Balance or Prefunding		
5500 Sch. SB	**Line 8**	Late Election to Apply Balances to Quarterly Installments		
5500 Sch. SB	**Line 9**	Explanation of Credit Balance Discrepancy		
5500 Sch. SB	**Line 18**	Contributions Made to the Plan for the Plan Year		
5500 Sch. SB	**Line 19**	Discounted Employer Contributions		
5500 Sch. SB	**Line 20c**	Liquidity Requirement Certification		
5500 Sch. SB	**Line 22**	Description of Weighted Average Retirement Age		**X**
5500 Sch. SB	**Line 23**	Information on Use of Multiple Mortality Tables		
5500 Sch. SB	**Line 23**	Information on Use of Substitute Mortality Tables		
5500 Sch. SB	**Part V**	Statement of Actuarial Assumptions/Methods		**X**
5500 Sch. SB	**Part V**	Summary of Plan Provisions		**X**
5500 Sch. SB	**Line 24**	Change in Actuarial Assumptions		**X**
5500 Sch. SB	**Line 25**	Change in Method		
5500 Sch. SB	**Line 26**	Schedule of Active Participant Data		**X**
5500 Sch. SB	**Line 27**	Balances Subject to Binding Agreement with PBGC		
5500 Sch. SB	**Line 27**	Alternative 17-Year Funding Schedule of Airlines		
5500 Sch. SB	**Line 32**	Schedule of Amortization Bases		
5500 Sch. SB		Other Attachment [Enter Description]		

Plan Name	**Cooper-Standard Automotive Inc. Salaried Retirement Plan**
Plan Sponsor EIN	**34-0549970**
ERISA Plan #	**025**
Plan Year Ending	**December 31, 2016**

The required attachment marked with an "X" in the Attachment column is included within the "Signed Schedule MB or Schedule SB" attachment to Schedule SB location which consists of the entire Schedule SB and its attachments.

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