

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

Part II	Basic Plan Information —enter all requested information				
1a Name of plan <u>COOPER-STANDARD AUTOMOTIVE INC. ENHANCED INVESTMENT SAVINGS PLAN</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">1b Three-digit plan number (PN) ▶</td> <td style="width: 20%; text-align: center;"><u>201</u></td> </tr> <tr> <td colspan="2">1c Effective date of plan <u>12/23/2004</u></td> </tr> </table>	1b Three-digit plan number (PN) ▶	<u>201</u>	1c Effective date of plan <u>12/23/2004</u>	
1b Three-digit plan number (PN) ▶	<u>201</u>				
1c Effective date of plan <u>12/23/2004</u>					
2a Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) <u>COOPER-STANDARD AUTOMOTIVE INC.</u> <u>40300 TRADITIONS DR.</u> <u>NORTHVILLE, MI 48168</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>2b Employer Identification Number (EIN) <u>34-0549970</u></td> </tr> <tr> <td>2c Plan Sponsor's telephone number <u>248-596-5900</u></td> </tr> <tr> <td>2d Business code (see instructions) <u>336300</u></td> </tr> </table>	2b Employer Identification Number (EIN) <u>34-0549970</u>	2c Plan Sponsor's telephone number <u>248-596-5900</u>	2d Business code (see instructions) <u>336300</u>	
2b Employer Identification Number (EIN) <u>34-0549970</u>					
2c Plan Sponsor's telephone number <u>248-596-5900</u>					
2d Business code (see instructions) <u>336300</u>					

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/12/2021	AARON PRINCE
	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

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Form 5500 (2020)
v. 200204

3a Plan administrator's name and address ☒ Same as Plan Sponsor		3b Administrator's EIN	
		3c Administrator's telephone number	
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name		4b EIN 4d PN	
5 Total number of participants at the beginning of the plan year		5	4126
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)	3225
a(2) Total number of active participants at the end of the plan year		6a(2)	3708
b Retired or separated participants receiving benefits.....		6b	10
c Other retired or separated participants entitled to future benefits		6c	974
d Subtotal. Add lines 6a(2) , 6b , and 6c		6d	4692
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.		6e	21
f Total. Add lines 6d and 6e		6f	4713
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)		6g	4430
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested		6h	484
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: 2E 2F 2G 2J 2K 2S 2T 3F 3H			
b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:			
9a Plan funding arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor		9b Plan benefit arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	
10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)			
a Pension Schedules (1) ☒ R (Retirement Plan Information) (2) ☐ MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) ☐ SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary		b General Schedules (1) ☒ H (Financial Information) (2) ☐ I (Financial Information – Small Plan) (3) ☐ <u>0</u> A (Insurance Information) (4) ☒ C (Service Provider Information) (5) ☒ D (DFE/Participating Plan Information) (6) ☐ G (Financial Transaction Schedules)	

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

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

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

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

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

Receipt Confirmation Code _____

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

For calendar plan year 2020 or fiscal plan year beginning 01/01/2020 and ending 12/31/2020		
A Name of plan COOPER-STANDARD AUTOMOTIVE INC. ENHANCED INVESTMENT SAVINGS PLAN	B Three-digit plan number (PN) ▶	201
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	Service Provider Information (see instructions)
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You must complete this Part, in accordance with the instructions, to report the information required for **each person** who received, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of monetary value) in connection with services rendered to the plan or the person's position with the plan during the plan year. If a person received **only** eligible indirect compensation for which the plan received the required disclosures, you are required to answer line 1 but are not required to include that person when completing the remainder of this Part.

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

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

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

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
37 60 64 65	RECORDKEEPER	337234	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☒ No ☐

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

MARQUETTE ASSOCIATES, INC.

36-3485298

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27	INVESTMENT ADVISOR	85272	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

STRATEGIC ADVISORS, INC.

04-2654524

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27	ADVISOR	77540	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

GILMORE JASION MAHLER, LTD

34-1827159

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
10	ACCOUNTANT/AUDITOR	63000	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

AUTOMATIC DATA PROCESSING

22-1467904

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	OTHER SERVICES	8450	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
AF EUROPAC GROWTH R5 - AMERICAN FU 95-2566717	0.05%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
LOOMIS BOND INST - DST ASSET MANAG 430 W 7TH STREET STE 219432 KANSAS CITY, MO 64105	0.20%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
TRP GROWTH STOCK - T. ROWE PRICE S 52-2269240	0.15%	

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
TRP RETIRE BAL - T. ROWE PRICE SER 52-2269240	0.15%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small>	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 <hr/> 2020 <hr/> This Form is Open to Public Inspection.
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For calendar plan year 2020 or fiscal plan year beginning 01/01/2020 and ending 12/31/2020

A Name of plan <u>COOPER-STANDARD AUTOMOTIVE INC. ENHANCED INVESTMENT SAVINGS PLAN</u>	B Three-digit plan number (PN) <u>201</u>
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C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>COOPER-STANDARD AUTOMOTIVE INC.</u>	D Employer Identification Number (EIN) <u>34-0549970</u>
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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)
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a Name of MTIA, CCT, PSA, or 103-12 IE: TRP RETIRE 2045 F

b Name of sponsor of entity listed in (a): T. ROWE PRICE TRUST COMPANY

c EIN-PN <u>32-6199848-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>14826339</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: TRP RETIRE 2060 F

b Name of sponsor of entity listed in (a): T. ROWE PRICE TRUST COMPANY

c EIN-PN <u>47-1088316-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>3575687</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: TRP RETIRE 2025 F

b Name of sponsor of entity listed in (a): T. ROWE PRICE TRUST COMPANY

c EIN-PN <u>37-6495447-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>39724468</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: TRP STABLE VALUE A

b Name of sponsor of entity listed in (a): T. ROWE PRICE TRUST COMPANY

c EIN-PN <u>52-1309931-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>19856047</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: TRP RETIRE 2005 F

b Name of sponsor of entity listed in (a): T. ROWE PRICE TRUST COMPANY

c EIN-PN <u>61-6434302-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>730782</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: TRP RETIRE 2010 F

b Name of sponsor of entity listed in (a): T. ROWE PRICE TRUST COMPANY

c EIN-PN <u>32-6199795-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>736058</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: TRP RETIRE 2035 F

b Name of sponsor of entity listed in (a): T. ROWE PRICE TRUST COMPANY

c EIN-PN <u>36-7595013-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>46599012</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: TRP RETIRE 2030 F

b Name of sponsor of entity listed in (a): T. ROWE PRICE TRUST COMPANY

c EIN-PN 38-7010946-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 54319994
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a Name of MTIA, CCT, PSA, or 103-12 IE: TRP RETIRE 2020 F

b Name of sponsor of entity listed in (a): T. ROWE PRICE TRUST COMPANY

c EIN-PN 36-7594871-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 23227424
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a Name of MTIA, CCT, PSA, or 103-12 IE: TRP RETIRE 2050 F

b Name of sponsor of entity listed in (a): T. ROWE PRICE TRUST COMPANY

c EIN-PN 30-6303214-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 9075672
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a Name of MTIA, CCT, PSA, or 103-12 IE: TRP RETIRE BAL F

b Name of sponsor of entity listed in (a): T. ROWE PRICE TRUST COMPANY

c EIN-PN 38-7011316-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1106362
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a Name of MTIA, CCT, PSA, or 103-12 IE: TRP RETIRE 2015 F

b Name of sponsor of entity listed in (a): T. ROWE PRICE TRUST COMPANY

c EIN-PN 35-6941654-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 4282807
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a Name of MTIA, CCT, PSA, or 103-12 IE: TRP RETIRE 2040 F

b Name of sponsor of entity listed in (a): T. ROWE PRICE TRUST COMPANY

c EIN-PN 35-6941729-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 31884431
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a Name of MTIA, CCT, PSA, or 103-12 IE: TRP RETIRE 2055 F

b Name of sponsor of entity listed in (a): T. ROWE PRICE TRUST COMPANY

c EIN-PN 35-6941728-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 9707659
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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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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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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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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**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
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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) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 2020 This Form is Open to Public Inspection
For calendar plan year 2020 or fiscal plan year beginning <u>01/01/2020</u> and ending <u>12/31/2020</u>		
A Name of plan <u>COOPER-STANDARD AUTOMOTIVE INC. ENHANCED INVESTMENT SAVINGS PLAN</u>	B Three-digit plan number (PN) ►	<u>201</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>COOPER-STANDARD AUTOMOTIVE INC.</u>	D Employer Identification Number (EIN) <u>34-0549970</u>	

Part I	Asset and Liability Statement	
1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.		
	Assets	
		(a) Beginning of Year (b) End of Year
a Total noninterest-bearing cash.....	1a	0 0
b Receivables (less allowance for doubtful accounts):		
(1) Employer contributions	1b(1)	105408 426268
(2) Participant contributions.....	1b(2)	0 476330
(3) Other	1b(3)	0 0
c General investments:		
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	1462 159593
(2) U.S. Government securities	1c(2)	0 0
(3) Corporate debt instruments (other than employer securities):		
(A) Preferred	1c(3)(A)	0 0
(B) All other	1c(3)(B)	0 0
(4) Corporate stocks (other than employer securities):		
(A) Preferred	1c(4)(A)	0 0
(B) Common	1c(4)(B)	0 0
(5) Partnership/joint venture interests	1c(5)	0 0
(6) Real estate (other than employer real property)	1c(6)	0 0
(7) Loans (other than to participants)	1c(7)	0 0
(8) Participant loans	1c(8)	7166943 8932399
(9) Value of interest in common/collective trusts	1c(9)	217921064 259652742
(10) Value of interest in pooled separate accounts	1c(10)	0 0
(11) Value of interest in master trust investment accounts	1c(11)	0 0
(12) Value of interest in 103-12 investment entities	1c(12)	0 0
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	107253228 129458106
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)	0 0
(15) Other.....	1c(15)	0 0

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities.....	1d(1)	0	0
(2) Employer real property.....	1d(2)	0	0
e Buildings and other property used in plan operation	1e	0	0
f Total assets (add all amounts in lines 1a through 1e)	1f	332448105	399105438

Liabilities

g Benefit claims payable	1g	0	0
h Operating payables	1h	0	0
i Acquisition indebtedness.....	1i	0	0
j Other liabilities.....	1j	0	0
k Total liabilities (add all amounts in lines 1g through 1j)	1k	0	0

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	332448105	399105438
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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)	12294632	
(B) Participants	2a(1)(B)	16160578	
(C) Others (including rollovers).....	2a(1)(C)	871879	
(2) Noncash contributions	2a(2)	0	29327089
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)	-3207	
(B) U.S. Government securities	2b(1)(B)	0	
(C) Corporate debt instruments	2b(1)(C)	0	
(D) Loans (other than to participants)	2b(1)(D)	0	
(E) Participant loans.....	2b(1)(E)	434217	
(F) Other	2b(1)(F)	0	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		431010
(2) Dividends: (A) Preferred stock.....	2b(2)(A)	0	
(B) Common stock	2b(2)(B)	0	
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)	3469991	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		3469991
(3) Rents	2b(3)		0
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	0	
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)	0	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		0
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)	0	
(B) Other	2b(5)(B)	0	
(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)		34120981
(7) Net investment gain (loss) from pooled separate accounts.....	2b(7)		0
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		0
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		15461974
c Other income	2c		0
d Total income. Add all income amounts in column (b) and enter total.....	2d		82811045

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	38872618	
(2) To insurance carriers for the provision of benefits	2e(2)	0	
(3) Other.....	2e(3)	0	
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		38872618
f Corrective distributions (see instructions)	2f		3639
g Certain deemed distributions of participant loans (see instructions).....	2g		46246
h Interest expense.....	2h		0
i Administrative expenses: (1) Professional fees	2i(1)	0	
(2) Contract administrator fees	2i(2)	0	
(3) Investment advisory and management fees	2i(3)	77540	
(4) Other.....	2i(4)	493956	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		571496
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		39493999

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		43317046
l Transfers of assets:			
(1) To this plan.....	2l(1)		23340287
(2) From this plan	2l(2)		0

Part III Accountant's Opinion

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

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

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

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

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

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

(1) Name: 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:

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

	Yes	No	Amount
4a		X	

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

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

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

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

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

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

<div>A Name of plan COOPER-STANDARD AUTOMOTIVE INC. ENHANCED INVESTMENT SAVINGS PLAN</div>	<div>B Three-digit plan number (PN) ▶ 201</div>
<div>C Plan sponsor's name as shown on line 2a of Form 5500 COOPER-STANDARD AUTOMOTIVE INC.</div>	<div>D Employer Identification Number (EIN) 34-0549970</div>

Part I	Distributions
--------	---------------

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

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

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

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

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

Part IV	ESOPs (see instructions). If this is not a plan described under section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.
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<div>10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan?</div>	<div>☐ Yes ☐ No</div>
<div>11 a Does the ESOP hold any preferred stock?</div>	<div>☐ Yes ☐ No</div>
<div>b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.)</div>	<div>☐ Yes ☐ No</div>
<div>12 Does the ESOP hold any stock that is not readily tradable on an established securities market?</div>	<div>☐ Yes ☐ No</div>

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

Schedule R (Form 5500) 2020
v. 200204

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

- 14** Enter the number of deferred vested and retired participants (inactive participants), as of the beginning of the plan year, whose contributing employer is no longer making contributions to the plan for:

a The current plan year. Check the box to indicate the counting method used to determine the number of inactive participants: ☐ last contributing employer ☐ alternative ☐ reasonable approximation (see instructions for required attachment).....

14a

b The plan year immediately preceding the current plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment).....

14b

c The second preceding plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment).....

14c

- 15** Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:

a The corresponding number for the plan year immediately preceding the current plan year.....

15a

b The corresponding number for the second preceding plan year.....

15b

- 16** Information with respect to any employers who withdrew from the plan during the preceding plan year:

a Enter the number of employers who withdrew during the preceding plan year.....

16a

b If line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers.....

16b

- 17** If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment. ☐

Part VI Additional Information for Single-Employer and Multiemployer Defined Benefit Pension Plans

- 18** If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole or in part) of liabilities to such participants and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see instructions regarding supplemental information to be included as an attachment..... ☐

- 19** If the total number of participants is 1,000 or more, complete lines (a) through (c)

a Enter the percentage of plan assets held as:

Stock: _____% Investment-Grade Debt: _____% High-Yield Debt: _____% Real Estate: _____% Other: _____%

b Provide the average duration of the combined investment-grade and high-yield debt:

☐ 0-3 years ☐ 3-6 years ☐ 6-9 years ☐ 9-12 years ☐ 12-15 years ☐ 15-18 years ☐ 18-21 years ☐ 21 years or more

c What duration measure was used to calculate line 19(b)?

☐ Effective duration ☐ Macaulay duration ☐ Modified duration ☐ Other (specify): _____

- 20 PBGC missed contribution reporting requirements.** If this is a multiemployer plan or a single-employer plan that is not covered by PBGC, skip line 20.

a Is the amount of unpaid minimum required contributions for all years from Schedule SB (Form 5500) line 40 greater than zero? ☐ Yes ☐ No

b If line 20a is "Yes," has PBGC been notified as required by ERISA sections 4043(c)(5) and/or 303(k)(4)? Check the applicable box:

☐ Yes.

☐ No. Reporting was waived under 29 CFR 4043.25(c)(2) because contributions equal to or exceeding the unpaid minimum required contribution were made by the 30th day after the due date.

☐ No. The 30-day period referenced in 29 CFR 4043.25(c)(2) has not yet ended, and the sponsor intends to make a contribution equal to or exceeding the unpaid minimum required contribution by the 30th day after the due date.

☐ No. Other. Provide explanation _____

**COOPER-STANDARD AUTOMOTIVE INC.
ENHANCED INVESTMENT SAVINGS PLAN**

**FINANCIAL STATEMENTS
AND SUPPLEMENTAL SCHEDULE
WITH INDEPENDENT AUDITOR'S REPORT**

**DECEMBER 31, 2020 AND 2019
AND FOR THE YEAR ENDED DECEMBER 31, 2020**

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INDEPENDENT AUDITOR'S REPORT

Benefits Plan Committee and Plan Participants
Cooper-Standard Automotive Inc.
Enhanced Investment Savings Plan
Northville, Michigan

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of Cooper-Standard Automotive Inc. Enhanced Investment Savings Plan (the "Plan"), which comprise the statements of net assets available for benefits as of December 31, 2020 and 2019, and the related statement of changes in net assets available for benefits for the year ended December 31, 2020, and the related notes to 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 (DOL) 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 Fidelity Management Trust Company, the 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 custodian holds the Plan's assets and executes transactions. The Plan Administrator has obtained certifications from the custodian as of December 31, 2020 and 2019, and for the year ended December 31, 2020, that the information provided to the Plan Administrator by the custodian is complete and accurate.

GJMLTD.COM

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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.

Other Matter

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

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

The form and content of the information included in the financial statements and supplemental schedule, other than that derived from the information certified or provided by the 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 DOL's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

Gilmore Jasion Mahler, LTD

Maumee, Ohio
October 11, 2021

COOPER-STANDARD AUTOMOTIVE INC.
ENHANCED INVESTMENT SAVINGS PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
December 31, 2020 and 2019

	<u>2020</u>	<u>2019</u>
Assets:		
Participant directed investments at fair value:		
Mutual funds	\$ 129,458,106	\$ 107,253,228
Common collective trust funds	259,652,742	217,921,064
Money market fund	159,593	1,462
Total participant directed investments at fair value	<u>389,270,441</u>	<u>325,175,754</u>
Receivables:		
Participant contributions	476,330	0
Employer contributions	426,268	105,408
Notes receivable from participants	8,932,399	7,166,943
Total receivables	<u>9,834,997</u>	<u>7,272,351</u>
Net assets available for benefits	<u><u>\$ 399,105,438</u></u>	<u><u>\$ 332,448,105</u></u>

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

COOPER-STANDARD AUTOMOTIVE INC.
ENHANCED INVESTMENT SAVINGS PLAN
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
For the Year Ended December 31, 2020

Additions:

Investment income:

Interest and dividends	\$ 3,816,590
Net appreciation in fair value of investments	49,233,149
Total investment income	<u>53,049,739</u>

Interest income on notes receivable from participants	434,217
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Contributions:

Participant	16,160,578
Employer	12,294,632
Rollovers	871,879
Total contributions	<u>29,327,089</u>
Total additions	<u>82,811,045</u>

Deductions:

Benefits paid to participants	38,922,503
Administrative expenses	571,496
Total deductions	<u>39,493,999</u>
Net increase prior to transfers	<u>43,317,046</u>

Transfers from other plans	23,340,287
Net increase	<u>66,657,333</u>

Net assets available for benefits:

Beginning of year	332,448,105
End of year	<u><u>\$ 399,105,438</u></u>

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

**COOPER-STANDARD AUTOMOTIVE INC.
ENHANCED INVESTMENT SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2020 and 2019**

Note 1-Description of plan

The following description of the Cooper-Standard Automotive Inc. Enhanced Investment Savings Plan (the “Plan”) provides only general information. Participants should refer to the plan agreement for a complete description of the Plan’s provisions.

General

The Plan is a defined contribution plan and is subject to the provisions of the Employee Retirement Income Security Act of 1974, as amended (ERISA).

Prior to December 31, 2019, the Plan covered substantially all full-time and part-time salaried and non-union hourly employees of Cooper-Standard Automotive Inc. (the “Plan Sponsor” or “Company”) 30 days after their employment date.

The Plan was amended to merge the Cooper-Standard Automotive Inc. Pre-Tax Savings Plan – Gaylord (the “Gaylord Plan”), Cooper-Standard Automotive Inc. Pre-Tax Savings Plan - Bowling Green-Seal (the “BG-Seal Plan”) and Cooper Standard Automotive FHS – Newlex Hourly Savings Plan (the “Newlex Plan”) (collectively, the “Merged Plans”) into this Plan. All assets were merged effective February 3, 2020. The amendment provides that the Plan is amended to preserve any required carryover features of the Merged Plans.

The Gaylord Plan covers all hourly employees who had completed the 90-day probationary period and were covered by the collective bargaining agreement between the UAW Local 388 and the Plan Sponsor.

The BG-Seal Plan covers all hourly employees who had completed 30 days of continuous credited service and were covered by the collective bargaining agreement between the United Steelworkers of America Local #1042 and the Plan Sponsor.

The Newlex Plan covers all regular, full-time employees of the Plan Sponsor at the Company’s New Lexington, Ohio location who were eligible for membership in the United Automobile, Aerospace and Agricultural Implement Workers of America Local 1686, as of the first day of the month following one month of service with the Company.

Plan amendments

The Plan has implemented certain requirements by the Coronavirus Aid, Relief, and Economic Security Act (the “CARES Act”) and the Setting Every Community Up for Retirement Enhancement Act of 2019 (the “SECURE Act”), which laws require the Plan to, among others, allow certain eligible individuals to receive coronavirus-related relief for loan repayment, suspend required minimum distributions, and delay the commencement date for required minimum distributions. Written amendments to the Plan to reflect these operational changes will be adopted at a later date in accordance with applicable laws and Internal Revenue Service (IRS) guidance.

COOPER-STANDARD AUTOMOTIVE INC.
ENHANCED INVESTMENT SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS - CONTINUED
December 31, 2020 and 2019

Note 1-Description of plan—continued

Contributions

For participants in the Plan prior to the mergers, the following provisions apply:

Participants may contribute up to 50% of their compensation in the form of pre-tax deferrals, Roth or post-tax deferrals each year. The combined pre-tax, Roth and post-tax deferrals cannot exceed 50% of compensation or the dollar limitation contained in the Internal Revenue Code 402(g) in effect for such taxable year. Participants may direct their contributions to any of the Plan's investment fund options.

The Plan is a "Qualified Automatic Contribution Arrangement" or "QACA." The QACA design provides for employer contribution types, as follows:

1. A non-elective contribution ranging from 3% to 5% of each participant's compensation based upon each participant's age plus years of service
2. A fixed matching contribution of 40% on employee contributions up to 5% of the participant's compensation
3. Potential additional matching contributions, provided at the discretion of the Company
4. Potential additional non-elective contributions, provided at the discretion of the Company

The Plan Sponsor may also make an annual discretionary contribution at the discretion of the Plan Sponsor's Board of Directors up to 5% of each participant's compensation. For 2020, the Plan Sponsor did not make an annual discretionary contribution to the Plan.

All participants covered by the Plan who are not making pre-tax contributions are automatically enrolled in the Plan and will begin deferring 3% of their compensation contributed to the Plan, unless the participant revokes or changes this election. Further, to function as a QACA, the level of deferrals being made by participants who are automatically enrolled will increase by 1% in April of each year. Such automatic increases will continue until participants are deferring at least 6% of compensation, or until an affirmative election to defer a different amount of compensation (or nothing at all) has been made.

For participants in the Plan from the merger with the Gaylord Plan, the following provisions apply:

Participants can contribute up to 15% of their pre-tax compensation or the dollar limitation contained in the Internal Revenue Code 402(g) in effect for such taxable year. Participants can direct their contributions to any of the Plan's investment fund options.

Effective July 1, 2017, the Plan automatically enrolls employees at a deferral rate of 3% of compensation, as defined in the plan document, upon meeting eligibility requirements to participate in the Plan unless the employee revokes or changes this election.

The Plan Sponsor contributes a fixed matching contribution equal to 100% of all pre-tax contributions up to 3% of their compensation.

**COOPER-STANDARD AUTOMOTIVE INC.
ENHANCED INVESTMENT SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS - CONTINUED
December 31, 2020 and 2019**

Note 1-Description of plan—continued

Contributions—continued

The Plan Sponsor contributes a base contribution of 1% for employees with less than 15 years of service and 2% for employees with more than 15 years of service.

The Plan Sponsor can also make an annual discretionary contribution at the discretion of the Plan Sponsor's Board of Directors, up to 5% of each participant's compensation. The Plan Sponsor did not make an annual discretionary contribution to the Plan in 2020.

For participants in the Plan from the merger with the BG-Seal Plan, the following provisions apply:

Participants can contribute up to 15% of their pre-tax compensation or the dollar limitation contained in the Internal Revenue Code 402(g) in effect for such taxable year. Participants can direct their contributions to any of the Plan's investment fund options.

Participants whose initial employment date was prior to January 1, 2009, receive a fixed matching contribution of 33 1/3% on the first 6% of their pre-tax deferral contributions. Participants with an initial employment date on or after January 1, 2009, receive a fixed matching contribution of 100% on the first 6% of their pre-tax deferral contributions.

The Plan Sponsor can also make an annual discretionary contribution at the discretion of the Plan Sponsor's Board of Directors, up to 6% of each participant's compensation. The Plan Sponsor did not make an annual discretionary contribution to the Plan in 2020.

For participants in the Plan from the merger with the Newlex Plan,

Participants can contribute 2% to 25% of their base salary or the dollar limitation contained in the Internal Revenue Code 402(g) in effect for such taxable year. A participant can designate savings as pre-tax savings, post-tax savings, or any combination of the two. Participants direct their contributions to any of the Plan's investment fund options.

The Plan Sponsor contributes a "fixed matching contribution" of 50% on the first 6% of a participant's contribution. Participants who were eligible employees under the Plan, and were a participant in the Plan, on January 1, 2014 also received a base contribution of a flat 2% of their compensation. Participants who became eligible after January 1, 2014 do not receive a base contribution.

Effective April 30, 2018, the Newlex Plan was amended to automatically enroll employees at a deferral rate of 3% of their eligible compensation for participants who had not made an affirmative election.

**COOPER-STANDARD AUTOMOTIVE INC.
ENHANCED INVESTMENT SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS - CONTINUED
December 31, 2020 and 2019**

Note 1-Description of plan—continued

Participant accounts

Individual accounts are maintained for each participant in the Plan. Each participant's account is credited with the participant's contributions, their allocation of the Plan Sponsor's contributions and Plan earnings. Plan earnings are allocated based on the participant's share of net earnings or losses of their respective elected investment options. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting

For participants in the Plan prior to the mergers, the participants are immediately vested in their contributions plus actual earnings thereon. The participants are vested in the Plan Sponsor's contributions after two years of continuous credited service.

For participants in the Plan from the merger with the Gaylord Plan, participants are immediately vested in their contributions and the Company's contributions, plus actual earnings thereon.

For participants in the Plan from the merger with the BG-Seal Plan, the participants are immediately vested in their contributions plus actual earnings thereon. The participants are vested in the Company's contributions after three years of continuous credited service.

For participants in the Plan from the merger with the Newlex Plan, the participants are immediately vested in their contributions and the Company's base contributions, plus actual earnings thereon. Vesting in the Company's matching portion plus earnings thereon is based on years of continuous service. The participants are vested in the Company's contributions at 20%, 40%, 60%, 80% and 100% after 1, 2, 3, 4, and 5 years of credited service, respectively.

Forfeitures

Forfeitures used to reduce employer contributions for the year ended December 31, 2020 was \$357,049. Forfeitures used to pay administrative expenses for the year ended December 31, 2020 was \$193,289. At December 31, 2020 and 2019, forfeited non-vested accounts totaled \$159,593 and \$1,462, respectively. These accounts will be used to reduce future employer contributions, and/or pay reasonable administrative expenses.

Payment of benefits

In the event of retirement, attainment of age 59 ½, death, termination, total and permanent disability or other severance from employment, participants are entitled to receive an amount equal to the value of the vested interest in their accounts. Payment of benefits may be taken in a lump sum distribution. In certain circumstances, active employees can take partial withdrawals.

COOPER-STANDARD AUTOMOTIVE INC.
ENHANCED INVESTMENT SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS - CONTINUED
December 31, 2020 and 2019

Note 1-Description of plan—continued

Payment of benefits—continued

Upon termination of service, a participant may receive a lump-sum amount equal to the value of his or her account. If a participant's balance is less than \$5,000 and a distribution election is not made, the full value of the account will be distributed in a single lump-sum within a reasonable period of time, either directly to the participant if the balance does not exceed \$1,000, or to an individual retirement account if the balance is between \$1,000 and \$5,000.

In the event of hardship, as defined in the plan agreement, participants may take a distribution from their accounts, in an amount necessary to satisfy the financial need, subject to certain tax withholdings.

Notes receivable from participants

For participants in the Plan prior to the mergers and the Gaylord Plan, participants may borrow the lesser of 50% of the vested value of their entire account or \$50,000. Only one outstanding note receivable is permitted at any time and the note receivable repayment schedule can be no longer than 5 years or for less than \$1,000. The interest rate is established based on an interest rate charged by a person in the business of lending money for loans under similar circumstances. Principal and interest are paid ratably through payroll deductions. Notes receivable from participants are valued at their unpaid principal balance plus accrued but unpaid interest. The Plan was amended effective April 2, 2020 to allow participants whose retirement benefits are not negotiated pursuant to a collective bargaining agreement to take up to two outstanding loans at one time, provided the second loan is taken on or before December 31, 2020.

For participants in the Plan from the merger with the BG-Seal Plan, participants could borrow the lesser of 50% of the vested value of their entire account or \$50,000. Only one outstanding note receivable was permitted at any time and the note receivable repayment schedule could be no longer than 59 months or for less than \$500. The interest rate was established based on an interest rate charged by a person in the business of lending money for loans under similar circumstances. Principal and interest were paid ratably through payroll deductions. Notes receivable from participants were valued at their unpaid principal balance plus accrued but unpaid interest. Effective September 29, 2020 the Plan was amended for loans of participants previously from the BG-Seal plan to be no less than \$1,000 and for future loans to have an interest rate of prime plus 2%.

For participants in the Plan from the merger with the Newlex Plan, participants could borrow the lesser of 50% of the vested value of their entire account or \$50,000. Only two outstanding notes receivable were permitted at any time and the note receivable could not be less than \$1,000. The note receivable repayment schedule could be no longer than 5 years unless it was used to acquire a principal residence, which had a repayment schedule up to 15 years. The interest rate was established based on an interest rate charged by a person in the business of lending money for loans under similar circumstances. Principal and interest were paid ratably through payroll deductions. Notes receivable from participants were valued at their unpaid principal balance plus accrued but unpaid interest.

The notes receivable from participants are secured by the balance in the participant's account. If a participant ceases to make note receivable repayments and the Plan Administrator deems the notes receivable to be in default, the remaining balance is reduced, and a benefit payment is recorded.

COOPER-STANDARD AUTOMOTIVE INC.
ENHANCED INVESTMENT SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS - CONTINUED
December 31, 2020 and 2019

Note 1-Description of plan—continued

Notes receivable from participants—continued

Pursuant to the CARES Act, Plan participants could request a delay of note repayments for repayments that occurred between March 27, 2020 and December 31, 2020 for one year. The participant's note would be re-amortized and include any interest accrued during the period of delay.

Plan termination

Although it has not expressed any intent to do so, the Plan Sponsor has the right, under the Plan provisions, to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, participants will become 100% vested in their accounts.

Note 2-Summary of significant accounting policies

Basis of accounting

The accompanying financial statements are prepared on the accrual basis of accounting. Participant withdrawals are recorded upon distribution.

Valuation of investments and income recognition

Investments held by the Plan are stated at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 4 for further discussion and disclosures related to fair value measurements.

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.

Contributions

Participant salary deferrals and Company contributions are included in income during the period the related salary is earned.

Administrative expenses

Recordkeeping fees and certain other administrative expenses are paid by participants and the Plan Sponsor pays all remaining administrative expenses of the Plan, unless the expenses relate to specific investment directions of the participant. Administrative expenses that are paid by the Plan Sponsor are excluded from these financial statements. Fees related to the administration of notes receivable from participants and benefit payments are charged directly to the participant's account and are included in administrative expenses.

Use of estimates

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

COOPER-STANDARD AUTOMOTIVE INC.
ENHANCED INVESTMENT SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS - CONTINUED
December 31, 2020 and 2019

Note 2-Summary of significant accounting policies—continued

Subsequent events

The Plan has evaluated subsequent events through October 11, 2021, the date the financial statements were available to be issued and has determined there are no subsequent events that require disclosure.

Note 3-Investments

All investment information disclosed in the accompanying financial statements and supplemental schedule, including investments held and notes receivable from participants as of December 31, 2020 and 2019, and net realized and unrealized appreciation (depreciation) in fair value of investments, interest, dividends, and interest income on notes receivable from participants for the year ended December 31, 2020, were obtained or derived from information supplied to the Plan Sponsor and certified by Fidelity Management Trust Company, as complete and accurate in accordance with Section 2520.103-5 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. 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 Financial Accounting Standards Board Accounting Standards Codification Topic 820, *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.

**COOPER-STANDARD AUTOMOTIVE INC.
ENHANCED INVESTMENT SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS - CONTINUED
December 31, 2020 and 2019**

Note 4-Fair value measurements—continued

The asset's 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, 2020 and 2019.

Mutual Funds – A mutual fund's net asset value is normally calculated as of the close of business of the New York Stock Exchange, normally 4:00 p.m. Eastern Standard Time. The fund's assets normally are valued as of this time for the purpose of computing the fund's net asset value.

Common Collective Trust Funds – Valued at the net asset value of units sales price of the underlying investments using the net asset value, as provided by the fund manager, as a practical expedient based on the value reported.

Money Market Fund – Valued using amortized cost, which approximates fair value.

The methods previously described 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, the Plan's assets that are measured at fair value:

Description	Total	Fair Value Measurements at December 31, 2020		
		Level (1)	Level (2)	Level (3)
Mutual funds	\$ 129,458,106	\$ 129,458,106	\$ 0	\$ 0
Money market fund	159,593	159,593		
Total investments in the fair value hierarchy	129,617,699	<u>\$ 129,617,699</u>	<u>\$ 0</u>	<u>\$ 0</u>
Investments measured at net asset value (a)	259,652,742			
Total investment assets at fair value	<u>\$ 389,270,441</u>			

**COOPER-STANDARD AUTOMOTIVE INC.
ENHANCED INVESTMENT SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS - CONTINUED
December 31, 2020 and 2019**

Note 4-Fair value measurements—continued

Description	Total	Fair Value Measurements at December 31, 2019		
		Level (1)	Level (2)	Level (3)
Mutual funds	\$ 107,253,228	\$ 107,253,228	\$ 0	\$ 0
Money market fund	1,462	1,462		
Total investments in the fair value hierarchy	107,254,690	\$ 107,254,690	\$ 0	\$ 0
Investments measured at net asset value (a)	217,921,064			
Total investment assets at fair value	<u>\$ 325,175,754</u>			

- (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 statements of net assets available for benefits.

The common collective trust funds have no unfunded commitments, have a daily redemption frequency and require a 1-day redemption period. The fair value of the common collective trust funds, as measured at the net asset value (or its equivalent), is \$259,652,742 and \$217,921,064 at December 31, 2020 and 2019, respectively.

Note 5-Related party transactions and party in interest transactions

Fidelity Management Trust Company is the custodian as defined by the Plan, therefore, transactions with Fidelity Management Trust Company qualify as party in interest transactions. The Plan made direct payments to Fidelity Management Trust Company in the amount of \$337,234 during 2020. Notes receivable from participants totaled \$8,932,399 and \$7,166,943 at December 31, 2020 and 2019, respectively, and the interest income from the notes receivable from participants totaled \$434,217 for the year ended December 31, 2020.

Note 6-Federal income tax status

The Plan has received a determination letter dated April 27, 2017, from the IRS indicating that the Plan, as designed, is qualified for tax-exempt treatment under the applicable section of the Internal Revenue Code. Subsequent to this issuance of the determination letter, the Plan was amended. Once qualified, the Plan is required to operate in conformity with the Internal Revenue Code to maintain its qualification. The Plan Administrator believes the Plan is being operated in compliance with the applicable requirements of the Internal Revenue Code. Therefore, no provision for income taxes has been included in the Plan's financial statements.

COOPER-STANDARD AUTOMOTIVE INC.
ENHANCED INVESTMENT SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS - CONTINUED
December 31, 2020 and 2019

Note 6-Federal income tax status—continued

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-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 and that such changes could materially affect participants' account balances and the amounts reported in the statements of net assets available for benefits.

Note 8-Acquisition and mergers

Effective August 1, 2018, the Plan Sponsor acquired Lauren Manufacturing, LLC., Lauren Acquisition Company, LLC., and Lauren Plastics, LLC. (collectively called "Lauren"). During the year ended December 31, 2019, the prior plan sponsor terminated all non-union/salaried employees of Lauren Manufacturing, LLC and all employees of Lauren Acquisition Company, LLC., and Lauren Plastics, LLC. as a result of the transfer of ownership. Following this transaction, Lauren employees whose retirement benefits were subject to collective bargaining agreements withdrew from the Lauren International, Ltd. 401(k) Retirement Plan (the "Lauren Plan") in 2020. The account balances of these active Lauren employees were 100% vested as of December 31, 2019, and the Lauren Plan assets were transferred into this Plan effective April 13, 2020, of \$3,039,914.

As discussed in Note 1, on February 3, 2020 the Gaylord Plan, the BG-Seal Plan, and the Newlex Plan were merged into the Plan. Total assets transferred in from the plans were \$4,616,620 from the Gaylord Plan, \$11,842,479 from the BG-Seal Plan, and \$3,841,274 from the Newlex Plan.

SUPPLEMENTAL SCHEDULE

**COOPER-STANDARD AUTOMOTIVE INC.
ENHANCED INVESTMENT SAVINGS PLAN
SCHEDULE H, LINE 4(i) - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
Employer ID # 34-0549970 Plan #201
December 31, 2020**

(a)(b) Identity of Issue, Borrower, Lessor or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(d) Cost	(e) Current Value
	Mutual funds:		
T. Rowe Price	Growth Stock Fund	**	\$ 34,211,127
* Fidelity	500 Index Fund	**	24,374,450
Vanguard	High Dividend Yield Index Fund	**	21,396,187
* Fidelity	U.S. Bond Index Fund	**	12,102,149
American Funds	EuroPacific Growth Fund Class R-5	**	9,316,491
* Fidelity	Small Cap Index Fund	**	6,745,172
DFA	U.S. Targeted Value Portfolio Institutional Class	**	5,160,223
Hartford	Mid Cap Fund Class R6	**	4,665,463
* Fidelity	Inflation-Protected Bond Index Fund	**	4,455,778
Loomis Sayles	Bond Fund Institutional Class	**	2,635,551
* Fidelity	Mid Cap Index Fund	**	2,626,548
* Fidelity	International Index Fund	**	1,768,967
	Total mutual funds		129,458,106
	Common collective trust funds:		
T. Rowe Price	Retirement 2030 Trust Fund Class F	**	54,319,994
T. Rowe Price	Retirement 2035 Trust Fund Class F	**	46,599,012
T. Rowe Price	Retirement 2025 Trust Fund Class F	**	39,724,468
T. Rowe Price	Retirement 2040 Trust Fund Class F	**	31,884,431
T. Rowe Price	Retirement 2020 Trust Fund Class F	**	23,227,424
T. Rowe Price	Stable Value Common Trust Fund A	**	19,856,047
T. Rowe Price	Retirement 2045 Trust Fund Class F	**	14,826,339
T. Rowe Price	Retirement 2055 Trust Fund Class F	**	9,707,659
T. Rowe Price	Retirement 2050 Trust Fund Class F	**	9,075,672
T. Rowe Price	Retirement 2015 Trust Fund Class F	**	4,282,807
T. Rowe Price	Retirement 2060 Trust Fund Class F	**	3,575,687
T. Rowe Price	Retirement Balanced Trust Fund Class F	**	1,106,362
T. Rowe Price	Retirement 2010 Trust Fund Class F	**	736,058
T. Rowe Price	Retirement 2005 Trust Fund Class F	**	730,782
	Total common collective trust funds		259,652,742
	Money market fund:		
* Fidelity	Government Money Market Fund Class K6	**	159,593
	Total money market fund		159,593
	Participant loans, interest rates from 3.25% to 7.50% with varying maturity dates	0	8,932,399
	Total		\$ 398,202,840

* Party in interest

** Cost information is not required as investments are participant directed.

**COOPER-STANDARD AUTOMOTIVE INC.
ENHANCED INVESTMENT SAVINGS PLAN
SCHEDULE H, LINE 4(i) - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
Employer ID # 34-0549970 Plan #201
December 31, 2020**

(a)(b) Identity of Issue, Borrower, Lessor or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(d) Cost	(e) Current Value
	Mutual funds:		
T. Rowe Price	Growth Stock Fund	**	\$ 34,211,127
* Fidelity	500 Index Fund	**	24,374,450
Vanguard	High Dividend Yield Index Fund	**	21,396,187
* Fidelity	U.S. Bond Index Fund	**	12,102,149
American Funds	EuroPacific Growth Fund Class R-5	**	9,316,491
* Fidelity	Small Cap Index Fund	**	6,745,172
DFA	U.S. Targeted Value Portfolio Institutional Class	**	5,160,223
Hartford	Mid Cap Fund Class R6	**	4,665,463
* Fidelity	Inflation-Protected Bond Index Fund	**	4,455,778
Loomis Sayles	Bond Fund Institutional Class	**	2,635,551
* Fidelity	Mid Cap Index Fund	**	2,626,548
* Fidelity	International Index Fund	**	1,768,967
	Total mutual funds		129,458,106
	Common collective trust funds:		
T. Rowe Price	Retirement 2030 Trust Fund Class F	**	54,319,994
T. Rowe Price	Retirement 2035 Trust Fund Class F	**	46,599,012
T. Rowe Price	Retirement 2025 Trust Fund Class F	**	39,724,468
T. Rowe Price	Retirement 2040 Trust Fund Class F	**	31,884,431
T. Rowe Price	Retirement 2020 Trust Fund Class F	**	23,227,424
T. Rowe Price	Stable Value Common Trust Fund A	**	19,856,047
T. Rowe Price	Retirement 2045 Trust Fund Class F	**	14,826,339
T. Rowe Price	Retirement 2055 Trust Fund Class F	**	9,707,659
T. Rowe Price	Retirement 2050 Trust Fund Class F	**	9,075,672
T. Rowe Price	Retirement 2015 Trust Fund Class F	**	4,282,807
T. Rowe Price	Retirement 2060 Trust Fund Class F	**	3,575,687
T. Rowe Price	Retirement Balanced Trust Fund Class F	**	1,106,362
T. Rowe Price	Retirement 2010 Trust Fund Class F	**	736,058
T. Rowe Price	Retirement 2005 Trust Fund Class F	**	730,782
	Total common collective trust funds		259,652,742
	Money market fund:		
* Fidelity	Government Money Market Fund Class K6	**	159,593
	Total money market fund		159,593
	Participant loans, interest rates from 3.25% to 7.50% with varying maturity dates	0	8,932,399
	Total		\$ 398,202,840

* Party in interest

** Cost information is not required as investments are participant directed.