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

2020

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2020 or fiscal plan year beginning 01/01/2020 and ending 12/31/2020

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.)
- [X] 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:
- [X] Form 5558
- [ ] automatic extension
- [ ] the DFVC program
- [ ] special extension (enter description)

Part II Basic Plan Information—enter all requested information

1a Name of plan
CORNERSTONE ONDEMAND INC. 401(K) PROFIT SHARING PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 01/01/2000

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)
CORNERSTONE ONDEMAND, INC.

1601 CLOVERFIELD BOULEVARD,STE 620
SANTA MONICA, CA 90404-4087

2b Employer Identification Number (EIN) 13-4068197

2c Plan Sponsor's telephone number 310-752-0200

2d Business code (see instructions) 611000

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.	10/15/2021	RYAN OLSON
	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

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 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**	1546
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)**	1222
a(2) Total number of active participants at the end of the plan year	**6a(2)**	1292
b Retired or separated participants receiving benefits	**6b**	0
c Other retired or separated participants entitled to future benefits	**6c**	354
d Subtotal. Add lines **6a(2)**, **6b**, and **6c**	**6d**	1646
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	1
f Total. Add lines **6d** and **6e**	**6f**	1647
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	1448
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	77
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 2A 2T 3D 2R

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)** [X] 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)** [X] 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)** [X] **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)** [X] **H** (Financial Information)
- **(2)** [ ] **I** (Financial Information – Small Plan)
- **(3)** [ ] 0 **A** (Insurance Information)
- **(4)** [X] **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 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)	Service Provider 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). ▶ **File as an attachment to Form 5500.**	**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
CORNERSTONE ONDEMAND INC. 401(K) PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
CORNERSTONE ONDEMAND, INC.

D Employer Identification Number (EIN)
13-4068197

Part I Service Provider Information (see instructions)

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

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 71	RECORDKEEPER	166149	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [X] 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	28580	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

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

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

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

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

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

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

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

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

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation		**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
DFA INFLATION PROTECTED SEC PORT	6300 BEE CAVES ROAD BUILDING ONE AUSTIN, TX 78746	0.02%

(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.
DFA INTERNATIONAL CORE EQUITY	6300 BEE CAVES ROAD BUILDING ONE AUSTIN, TX 78746	0.02%

(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.
MORGAN STANLEY GROWTH PORTFOLIO A	522 FIFTH AVENUE 4TH FLOOR NEW YORK, NY 10036	0.40%

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)

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

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
CORNERSTONE ONDEMAND INC. 401(K) PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 001

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
CORNERSTONE ONDEMAND, INC.

D Employer Identification Number (EIN)
13-4068197

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: PUTNAM STABLE VALUE

b Name of sponsor of entity listed in (a): PUTNAM FIDUCIARY TRUST COMPANY

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)
04-3159710-202	C	2723911

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)

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)

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 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 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 plan sponsor	**c** EIN-PN

SCHEDULE H (Form 5500)

Department of the Treasury
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

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
CORNERSTONE ONDEMAND INC. 401(K) PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
CORNERSTONE ONDEMAND, INC.

D Employer Identification Number (EIN)
13-4068197

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	1058
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	0	0
(2) Participant contributions	1b(2)	0	0
(3) Other	1b(3)	0	0
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	234350	1070301
(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	722
(B) Common	1c(4)(B)	490997	1287422
(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)	1070037	1402298
(9) Value of interest in common/collective trusts	1c(9)	1228223	2723911
(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)	95529748	133453030
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)	0	0
(15) Other	1c(15)	-70	103729

			(a) Beginning of Year	**(b)** End of Year
1d	Employer-related investments:			
	(1) Employer securities	**1d(1)**	0	0
	(2) Employer real property	**1d(2)**	0	0
e	Buildings and other property used in plan operation	**1e**	0	0
f	Total assets (add all amounts in lines 1a through 1e)	**1f**	98553285	140042471
	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 through1j)	**1k**	0	0
	Net Assets			
l	Net assets (subtract line 1k from line 1f)	**1l**	98553285	140042471

Part II Income and Expense Statement

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

			(a) Amount	**(b)** Total
	Income			
a	**Contributions:**			
	(1) Received or receivable in cash from: **(A)** Employers	**2a(1)(A)**	2652196	
	(B) Participants	**2a(1)(B)**	14470723	
	(C) Others (including rollovers)	**2a(1)(C)**	13351819	
	(2) Noncash contributions	**2a(2)**	0	
	(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	**2a(3)**		30474738
b	**Earnings on investments:**			
	(1) Interest:			
	(A) Interest-bearing cash (including money market accounts and certificates of deposit)	**2b(1)(A)**	6259	
	(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)**	67287	
	(F) Other	**2b(1)(F)**	0	
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	**2b(1)(G)**		73546
	(2) Dividends: **(A)** Preferred stock	**2b(2)(A)**	55	
	(B) Common stock	**2b(2)(B)**	10149	
	(C) Registered investment company shares (e.g. mutual funds)	**2b(2)(C)**	2941576	
	(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	**2b(2)(D)**		2951780
	(3) Rents	**2b(3)**		0
	(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	**2b(4)(A)**	2152697	
	(B) Aggregate carrying amount (see instructions)	**2b(4)(B)**	1957080	
	(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	**2b(4)(C)**		195617
	(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	**2b(5)(A)**	0	
	(B) Other	**2b(5)(B)**	108491	
	(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	**2b(5)(C)**		108491

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	**2b(6)**		55606
(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)**		16597072
c Other income	**2c**		0
d Total income. Add all **income** amounts in column (b) and enter total	**2d**		50456850
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	**2e(1)**	8773218	
(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)**		8773218
f Corrective distributions (see instructions)	**2f**		0
g Certain deemed distributions of participant loans (see instructions)	**2g**		0
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)**	28580	
(4) Other	**2i(4)**	165866	
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	**2i(5)**		194446
j Total expenses. Add all **expense** amounts in column (b) and enter total	**2j**		8967664
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	**2k**		41489186
l Transfers of assets:			
(1) To this plan	**2l(1)**		0
(2) From this plan	**2l(2)**		0

Part III Accountant's Opinion

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

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

(1) [ ] Unmodified **(2)** [ ] Qualified **(3)** [X] 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) [X] 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: RSM US LLP **(2)** EIN: 42-0714325

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	

			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?	**4e**	X		1000000
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**		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**			

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 _____.

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

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
CORNERSTONE ONDEMAND INC. 401(K) PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
CORNERSTONE ONDEMAND, INC.

D Employer Identification Number (EIN)
13-4068197

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** |

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

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** |

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.)

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 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_____

Cornerstone OnDemand, Inc.
401(k) Profit Sharing Plan

Financial Report
December 31, 2020

Contents

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RSM US LLP

Independent Auditor's Report

Plan Administrator
Cornerstone OnDemand, Inc. 401(k) Profit Sharing Plan

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of the Cornerstone OnDemand, Inc. 401(k) Profit Sharing Plan (the Plan), which comprise the statements of net assets available for benefits as of December 31, 2020 and 2019, 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 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 trustee 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 trustee holds the Plan's assets and executes transactions. The Plan Administrator has obtained certifications from the trustee 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 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.

RSM US LLP is the U.S. member firm of RSM International, a global network of independent audit, tax, and consulting firms. Visit rsmus.com/aboutus for more information regarding RSM US LLP and RSM International.

Other Matter
The supplemental schedule, Schedule H, Part IV, 4i—Schedule of assets held for investment purposes at end of year, is required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 and is presented for the purposes 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 the Department of Labor's 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 trustee, 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.

RSM US LLP

Los Angeles, California
October 15, 2021

Cornerstone OnDemand, Inc. 401(k) Profit Sharing Plan

Statements of Net Assets Available for Benefits
December 31, 2020 and 2019

	2020	2019
Assets		
Investments, at fair value (Note 4)	**$ 138,640,173**	$ 97,483,249
Receivables:		
Employer contributions	**189,000**	-
Participant contributions	**401,000**	-
Notes receivable from participants	**1,402,298**	1,070,037
Total receivables	**1,992,298**	1,070,037
Total assets	**140,632,471**	98,553,286
Net assets available for benefits	**$ 140,632,471**	$ 98,553,286

See notes to financial statements.

Cornerstone OnDemand, Inc. 401(k) Profit Sharing Plan

Statement of Changes in Net Assets Available for Benefits
Year Ended December 31, 2020

Additions to net assets attributed to:	
Investment income:	
Net appreciation in fair value of investments	$ 16,942,847
Interest and dividend income	2,971,447
Total investment income	19,914,294
Interest income on notes receivable from participants	67,287
Contributions:	
Employer	2,841,196
Participants	14,871,723
Rollovers	13,351,819
	31,064,738
Total additions	51,046,319
Deductions from net assets attributed to:	
Benefits paid to participants	8,772,712
Administrative expenses	194,422
Total deductions	8,967,134
Net increase	42,079,185
Net assets available for benefits:	
Beginning of year	98,553,286
End of year	$ 140,632,471

See notes to financial statements.

Note 1. Description of the Plan

The following description of the Cornerstone OnDemand, Inc. 401(k) Profit Sharing Plan (the Plan) provides only general information. Participants should refer to the Plan document for a more complete description of the Plan's provisions.

General: The Plan is a defined contribution plan covering all employees of Cornerstone OnDemand, Inc. (the Company or Plan Sponsor), except for nonresident aliens and interns, as of the date of hire at age 21 or older. The Plan is subject to the provisions of the Employment Retirement Income Security Act of 1974 (ERISA). Fidelity Management Trust Company (the Trustee) is the Plan trustee and custodian.

During 2020, the Plan Sponsor acquired Saba Software, Inc. (Saba), whose retirement plan was terminated effective April 21, 2020. All former Saba employees were hired by the Company and offered participation in the Plan beginning on June 1, 2020. Former Saba employees were able to transfer balances from their former plan via rollovers to this Plan.

Contributions: Each year, participants may contribute up to 100% of pretax or after-tax annual compensation, subject to maximum limits defined by the Internal Revenue Code (IRC) and as defined in the Plan document. Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions. Participants also may contribute amounts representing distributions from other qualified defined benefit or defined contributions plans (rollovers). Participants direct the investment of their contributions into various investment options offered by the Plan. The Company contributes 50% for every dollar a participant contributes to the Plan, with a fixed maximum Company contribution of $2,400 per participant. The matching Company contribution is invested as directed by the participant.

Additional profit sharing amounts may be contributed at the option of the Plan Sponsor's Investment Committee (the Committee) and will be invested as directed by the participants. Participants are required to work a minimum of 1,000 hours and be employed by the Company as of the last day of the Plan year in order to be eligible for profit sharing contributions made for that year. There were no profit sharing contributions for years ended December 31, 2020 or 2019.

Participant accounts: Each participant's account is credited with the participant's contribution and allocations of (a) the Company's contribution, (b) plan earnings or losses, and (c) administrative expenses, when applicable. Allocations are based on a participant's earnings or account balances, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting: Participants are vested immediately in their contributions plus actual earnings on the contributions. Vesting in the Company's matching and profit sharing contribution portion of their accounts is based on years of service, as defined by the following schedule:

Years of Service for Vesting	Percent
Less than one year	0%
After one year	25%
After two years	50%
After three years	75%
After four years	100%

Note 1. Description of the Plan (Continued)

Notes receivable from participants: Participants may borrow from their fund accounts a minimum of $1,000 up to maximum equal to the lesser of (1) $50,000, reduced by the highest outstanding balance during the preceding 12 months, or (2) 50% of their account balance. The loans are secured by the balance in the participant's account. The loan interest rate is established at the time the note is originated and is determined by the prevailing interest rate charged by persons in the business of lending money for loans made under similar circumstances. Principal and interest is paid ratably through payroll deductions.

Payment of benefits: On termination of service due to death, disability, retirement or termination of employment, a participant or beneficiary, as applicable, shall receive a lump-sum distribution in an amount equal to the value of the participant's interest in his or her account. The Plan also allows in-service withdrawals and hardship withdrawals under certain circumstances.

Forfeited accounts: At December 31, 2020 and 2019, forfeited nonvested accounts totaled $94,873 and $4,235, respectively. These accounts are used to reduce future employer contributions or administrative expenses. During 2020, forfeited nonvested cash accounts used to reduce employer contributions were $68,663.

Coronavirus Aid, Relief, and Economic Security Act: During 2020, the Plan implemented certain Coronavirus Aid, Relief, and Economic Security Act provisions for affected participants, to allow for special coronavirus-related distributions, an increase in Plan loan amounts, deferral of loan payments and waiver of 2020 required minimum distributions. Written amendments to the Plan to reflect these operational changes have been adopted in accordance with applicable law and Internal Revenue Service (IRS) guidance. The Plan is required to be amended for the implementation of this provision by December 31, 2022.

Reclassifications: Certain reclassifications have been made to the prior period to conform with current reporting, with no change to previously reported additions to net assets available for benefits or net assets available for benefits.

Note 2. Summary of Accounting Policies

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

Accounting estimates: The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America (U.S. GAAP) 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.

Investment valuation and income recognition: Investments are reported 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. The Committee determines the Plan's valuation policies utilizing information provided by the investment custodian. See Note 4 for a discussion of fair value measurements.

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

Note 2. Summary of Accounting Policies (Continued)

Notes receivable from participants: Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Interest income is recorded on the accrual basis. Related fees are recorded as administrative expenses and are expensed when they are incurred. No allowance for credit losses has been recorded as of December 31, 2020 or 2019.

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 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy under Accounting Standards Codification 820 are described below:

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:

- Quoted prices for similar assets or liabilities in active markets.
- Quoted prices for identical or similar assets or liabilities in inactive markets.
- Inputs other than quoted prices that are observable for the asset or liability.
- 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'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 market value.

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

Self-directed brokerage accounts: Accounts primarily consist of mutual funds and common stocks that are valued on the basis of readily determinable market prices.

Common collective trusts: The common collective trusts are valued at the NAV of the underlying investments expressed in units. The NAV is used as a practical expedient to estimate fair value. The NAV is based on the fair value of the underlying investments held by the trust less its liabilities. This practical expedient is not used when it is determined to be probable that the trusts will sell the investments for an amount different from the reported NAV.

Note 2. Summary of Accounting Policies (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 or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

Interest income is recorded on the accrual basis. The Plan presents in the statement of changes in net assets available for benefits the net appreciation in the fair value of its investments, which consists of the realized gains or losses on the sale of investments during the period and unrealized appreciation or depreciation of investments held at year-end.

Payment of benefits: Benefits are recorded when paid.

Expenses: Certain expenses incurred while maintaining the Plan are paid directly by the Company and are excluded from these financial statements. Investment-related expenses are included in net appreciation of fair value of investments. Record-keeping fees are generally paid by the Plan.

Subsequent events: The Plan has evaluated subsequent events through October 15, 2021, the date the financial statements were available to be issued.

In August 2021, the Plan Sponsor entered into a merger agreement to be acquired by an indirect subsidiary of an affiliate of the Clearlake Capital private equity group. The transaction is expected to close before December 31, 2021. Impact of this merger on the Plan could not be determined.

Recent accounting pronouncement: In August 2018, the Financial Accounting Standards Board issued Accounting Standards Update (ASU) No. 2018-13, *Fair Value Measurement (Topic 820): Disclosure Framework—Changes to Disclosure Requirements for Fair Value Measurement*, which modifies the disclosure requirements for fair value measurements by removing, modifying or adding certain disclosures. The Plan adopted ASU 2018-13 as of January 1, 2020, and the adoption did not have a material impact on the Plan's financial statements.

Note 3. Information Certified and Provided by Fidelity Management Trust Company

The following is a summary of the Plan's asset information as of December 31, 2020 and 2019, and for the year ended December 31, 2020, included throughout the Plan's financial statements and supplemental schedule, which was prepared by or derived from information provided by the Trustee, Fidelity Management Trust Company, and furnished to the Plan Administrator. The Plan Administrator obtained a certification from the Trustee that information provided to the Plan Administrator related to the following assets is complete and accurate.

Accordingly, as permitted by 29 CFR 2520.103-8 of the U.S. Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA, the Plan Administrator instructed the Plan's independent auditors not to perform any auditing procedures with respect to information that appears throughout the financial statements and supplemental schedule.

Note 3. Information Certified and Provided by Fidelity Management Trust Company (Continued)

Fidelity also certified the completeness and accuracy of the following balances as of December 31:

	2020	2019
Mutual funds	$ 132,359,131	$ 94,716,040
Self-directed brokerage accounts	3,557,131	1,538,986
Common/collective trust	2,723,911	1,228,223
Participant notes receivable	1,402,298	1,070,037

Fidelity also certified the completeness and accuracy of the following for the year ended December 31, 2020:

Net appreciation in fair value of investments	$ 16,942,847
Interest and dividend income	2,971,447
Interest income on notes receivable from participants	67,287

Note 4. Fair Value Information

The tables below present the level within the fair value hierarchy at which the Plan's financial statements are measured on a recurring basis at December 31:

	2020			
Investment Category	Level 1	Level 2	Level 3	Total
Mutual funds	$ 132,359,131	$ -	$ -	$ 132,359,131
Self-directed brokerage accounts	3,557,131	-	-	3,557,131
Total assets in the fair value hierarchy	$ 135,916,262	$ -	$ -	135,916,262
Investments measured at NAV (a)				2,723,911
Investments at fair value				$ 138,640,173

	2019			
Investment Category	Level 1	Level 2	Level 3	Total
Mutual funds	$ 94,716,040	$ -	$ -	$ 94,716,040
Self-directed brokerage accounts	1,538,986	-	-	1,538,986
Total assets in the fair value hierarchy	$ 96,255,026	$ -	$ -	96,255,026
Investments measured at NAV (a)				1,228,223
Investments at fair value				$ 97,483,249

(a) In accordance with Subtopic 820-10, certain investments that are measured at NAV 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.

Note 4. Fair Value Information (Continued)

The following table sets forth additional disclosures of the Plan's investments whose fair value is estimated using NAV per share (or its equivalent) as of December 31:

	Fair Value Estimated Using NAV Per Share				
	Fair Value at December 31		Unfunded	Redemption	Redemption
Investment	2020	2019	Commitment	Frequency	Notice Period
Common collective trust:					
Putnam Stable Value Fund	$ 2,723,911	$ 1,228,223	$ -	Daily	None
	$ 2,723,911	$ 1,228,223	$ -		

Note 5. Plan Termination

Although it has not expressed any intent to do so, the Company has the right under the Plan document to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, participants would become 100% vested in their Company contributions.

Note 6. Tax Status

The Company adopted a volume submitter plan document sponsored by an affiliate of the Trustee. The volume submitter plan sponsor obtained an opinion letter dated March 31, 2014, in which the IRS stated that the volume submitter plan document was in compliance with applicable requirements of the IRC. The Plan has not requested a determination letter specific to the Plan; however, the Plan Administrator and the Trustee believe that the Plan is designed and operated in compliance with the applicable requirements of the IRC.

U.S. GAAP requires Plan management to evaluate tax positions taken by the Plan and recognize a tax liability if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

During 2020 and certain previous years, the Plan's adoption agreement inadvertently did not exclude compensation from the settlement of restricted stock units, as intended. Consequently, management is evaluating various corrective courses of action available under the IRS Employee Plans Compliance Resolution System, which, if necessary, could include filing under the IRS Voluntary Compliance Program or making a corrective contribution to the Plan. Therefore, no adjustments have been made in the accompanying financial statements.

Note 7. Related-Party Transactions

The Plan paid approximately $194,422 of record-keeping fees to affiliates of the Trustee, and these transactions qualify as exempt party-in-interest transactions. These are included in administrative expenses on the statement of changes in net assets available for benefits.

Note 8. Risks and Uncertainties

The Plan invests in various investment securities. Investment securities are exposed to various risks such as interest rate, market and credit risks. Because of 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.

As the coronavirus (COVID-19) pandemic continues to evolve, the Plan Sponsor believes the extent of any impact to the Plan will be primarily derived by the severity and duration of the pandemic's impact on the U.S. and global economies and the investment markets. The continued spread of the virus, or its reemergence, could have a negative impact on the Plan.

Note 9. Reconciliation of Financial Statements to the Form 5500

The following is a reconciliation of net assets available for Plan benefits, per the financial statements, to the Form 5500 as of December 31:

	2020	2019
Net assets available for Plan benefits per the Form 5500	$ 140,042,471	$ 9,853,285
Employer contributions receivable on accrued payroll at December 31, 2020	189,000	-
Participant contributions receivable on accrued payroll at December 31, 2020	401,000	-
Net assets available for Plan benefits as presented in these financial statements	$ 140,632,471	$ 9,853,285

The following is a reconciliation of the net increase (decrease) in net assets available for Plan benefits, per the financial statements, to the Form 5500 as of December 31:

	2020	2019
Net increase in net assets available for Plan benefits per the Form 5500	$ 41,489,185	$ 29,831,408
Employer contributions receivable on accrued payroll at December 31, 2020	189,000	-
Participant contributions receivable on accrued payroll at December 31, 2020	401,000	-
Net increase in net assets available for Plan benefits as presented in these financial statements	$ 42,079,185	$ 29,831,408

Supplementary Information

Cornerstone OnDemand, Inc. 401(k) Profit Sharing Plan

Schedule H, Part IV, 4i—Schedule of Assets Held for Investment Purposes at End of Year
December 31, 2020
EIN: 13-4068197—Plan Number: 001

	Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	Cost	Current Value
	Putnam Stable Value Fund	**	$ 2,723,911
	American Funds Washington Mutual Investors Fund Class R-6	**	1,453,838
	Victory Sycamore Established Value Fund Class R6	**	2,242,089
	DFA U.S. Targeted Value Portfolio Institutional Class	**	552,674
*	Fidelity® Contrafund® – Class K	**	5,997,840
	Hartford MidCap HLS Fund Class IA	**	2,239,442
	Goldman Sachs Small Gap Growth Insights Fund Class R6	**	678,153
	American Funds EuroPacific Growth Fund® Class R-6	**	2,155,715
	DFA International Value Portfolio Institutional Class	**	223,590
	American Funds New World Fund® Class R-6	**	1,964,321
*	Fidelity Advisor® Total Bond Fund – Class I	**	3,181,061
	Vanguard Target Retirement 2015 Fund Investor Shares	**	186,465
	Vanguard Target Retirement 2020 Fund Investor Shares	**	1,633,357
	Vanguard Target Retirement 2025 Fund Investor Shares	**	4,963,019
	Vanguard Target Retirement 2030 Fund Investor Shares	**	8,998,448
	Vanguard Target Retirement 2035 Fund Investor Shares	**	19,735,006
	Vanguard Target Retirement 2040 Fund Investor Shares	**	15,762,690
	Vanguard Target Retirement 2045 Fund Investor Shares	**	17,883,806
	Vanguard Target Retirement 2050 Fund Investor Shares	**	15,142,012
	Vanguard Target Retirement 2055 Fund Investor Shares	**	7,601,565
	Vanguard Target Retirement 2060 Fund Investor Shares	**	1,642,917
	Vanguard Target Retirement 2065 Fund Investor Shares	**	71,210
*	Fidelity Government Money Market	**	198,281
	Vanguard Target Retirement Income Fund Investor Shares	**	118,635
*	Fidelity® 500 Index Fund	**	13,449,354
*	Fidelity® International Index Fund	**	1,210,589
*	Fidelity® Extended Market Index Fund	**	3,073,054
	Mutual funds		132,359,131
	Assets in Fidelity Self-Directed Brokerage Accounts	**	3,557,131
	Notes receivable from participants, interest rates that range from 4.25% to 6.50%, maturing through December 2030	**	1,402,298
	Total		$ 140,042,471

***** Party in interest.

** Historical cost information not required for participant-directed investments.

The above information has been certified by the Trustee for accuracy and completeness.

Cornerstone OnDemand, Inc.
401(k) Profit Sharing Plan

Financial Report
December 31, 2020

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RSM US LLP

Independent Auditor's Report

Plan Administrator
Cornerstone OnDemand, Inc. 401(k) Profit Sharing Plan

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of the Cornerstone OnDemand, Inc. 401(k) Profit Sharing Plan (the Plan), which comprise the statements of net assets available for benefits as of December 31, 2020 and 2019, 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 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 trustee 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 trustee holds the Plan's assets and executes transactions. The Plan Administrator has obtained certifications from the trustee 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 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.

RSM US LLP is the U.S. member firm of RSM International, a global network of independent audit, tax, and consulting firms. Visit rsmus.com/aboutus for more information regarding RSM US LLP and RSM International.

Other Matter
The supplemental schedule, Schedule H, Part IV, 4i—Schedule of assets held for investment purposes at end of year, is required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 and is presented for the purposes 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 the Department of Labor's 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 trustee, 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.

RSM US LLP

Los Angeles, California
October 15, 2021

Cornerstone OnDemand, Inc. 401(k) Profit Sharing Plan

Statements of Net Assets Available for Benefits
December 31, 2020 and 2019

	2020	2019
Assets		
Investments, at fair value (Note 4)	**$ 138,640,173**	$ 97,483,249
Receivables:		
Employer contributions	**189,000**	-
Participant contributions	**401,000**	-
Notes receivable from participants	**1,402,298**	1,070,037
Total receivables	**1,992,298**	1,070,037
Total assets	**140,632,471**	98,553,286
Net assets available for benefits	**$ 140,632,471**	$ 98,553,286

See notes to financial statements.

Cornerstone OnDemand, Inc. 401(k) Profit Sharing Plan

Statement of Changes in Net Assets Available for Benefits
Year Ended December 31, 2020

Additions to net assets attributed to:	
Investment income:	
Net appreciation in fair value of investments	$ 16,942,847
Interest and dividend income	2,971,447
Total investment income	19,914,294
Interest income on notes receivable from participants	67,287
Contributions:	
Employer	2,841,196
Participants	14,871,723
Rollovers	13,351,819
	31,064,738
Total additions	51,046,319
Deductions from net assets attributed to:	
Benefits paid to participants	8,772,712
Administrative expenses	194,422
Total deductions	8,967,134
Net increase	42,079,185
Net assets available for benefits:	
Beginning of year	98,553,286
End of year	$ 140,632,471

See notes to financial statements.

Note 1. Description of the Plan

The following description of the Cornerstone OnDemand, Inc. 401(k) Profit Sharing Plan (the Plan) provides only general information. Participants should refer to the Plan document for a more complete description of the Plan's provisions.

General: The Plan is a defined contribution plan covering all employees of Cornerstone OnDemand, Inc. (the Company or Plan Sponsor), except for nonresident aliens and interns, as of the date of hire at age 21 or older. The Plan is subject to the provisions of the Employment Retirement Income Security Act of 1974 (ERISA). Fidelity Management Trust Company (the Trustee) is the Plan trustee and custodian.

During 2020, the Plan Sponsor acquired Saba Software, Inc. (Saba), whose retirement plan was terminated effective April 21, 2020. All former Saba employees were hired by the Company and offered participation in the Plan beginning on June 1, 2020. Former Saba employees were able to transfer balances from their former plan via rollovers to this Plan.

Contributions: Each year, participants may contribute up to 100% of pretax or after-tax annual compensation, subject to maximum limits defined by the Internal Revenue Code (IRC) and as defined in the Plan document. Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions. Participants also may contribute amounts representing distributions from other qualified defined benefit or defined contributions plans (rollovers). Participants direct the investment of their contributions into various investment options offered by the Plan. The Company contributes 50% for every dollar a participant contributes to the Plan, with a fixed maximum Company contribution of $2,400 per participant. The matching Company contribution is invested as directed by the participant.

Additional profit sharing amounts may be contributed at the option of the Plan Sponsor's Investment Committee (the Committee) and will be invested as directed by the participants. Participants are required to work a minimum of 1,000 hours and be employed by the Company as of the last day of the Plan year in order to be eligible for profit sharing contributions made for that year. There were no profit sharing contributions for years ended December 31, 2020 or 2019.

Participant accounts: Each participant's account is credited with the participant's contribution and allocations of (a) the Company's contribution, (b) plan earnings or losses, and (c) administrative expenses, when applicable. Allocations are based on a participant's earnings or account balances, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting: Participants are vested immediately in their contributions plus actual earnings on the contributions. Vesting in the Company's matching and profit sharing contribution portion of their accounts is based on years of service, as defined by the following schedule:

Years of Service for Vesting	Percent
Less than one year	0%
After one year	25%
After two years	50%
After three years	75%
After four years	100%

Note 1. Description of the Plan (Continued)

Notes receivable from participants: Participants may borrow from their fund accounts a minimum of $1,000 up to maximum equal to the lesser of (1) $50,000, reduced by the highest outstanding balance during the preceding 12 months, or (2) 50% of their account balance. The loans are secured by the balance in the participant's account. The loan interest rate is established at the time the note is originated and is determined by the prevailing interest rate charged by persons in the business of lending money for loans made under similar circumstances. Principal and interest is paid ratably through payroll deductions.

Payment of benefits: On termination of service due to death, disability, retirement or termination of employment, a participant or beneficiary, as applicable, shall receive a lump-sum distribution in an amount equal to the value of the participant's interest in his or her account. The Plan also allows in-service withdrawals and hardship withdrawals under certain circumstances.

Forfeited accounts: At December 31, 2020 and 2019, forfeited nonvested accounts totaled $94,873 and $4,235, respectively. These accounts are used to reduce future employer contributions or administrative expenses. During 2020, forfeited nonvested cash accounts used to reduce employer contributions were $68,663.

Coronavirus Aid, Relief, and Economic Security Act: During 2020, the Plan implemented certain Coronavirus Aid, Relief, and Economic Security Act provisions for affected participants, to allow for special coronavirus-related distributions, an increase in Plan loan amounts, deferral of loan payments and waiver of 2020 required minimum distributions. Written amendments to the Plan to reflect these operational changes have been adopted in accordance with applicable law and Internal Revenue Service (IRS) guidance. The Plan is required to be amended for the implementation of this provision by December 31, 2022.

Reclassifications: Certain reclassifications have been made to the prior period to conform with current reporting, with no change to previously reported additions to net assets available for benefits or net assets available for benefits.

Note 2. Summary of Accounting Policies

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

Accounting estimates: The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America (U.S. GAAP) 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.

Investment valuation and income recognition: Investments are reported 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. The Committee determines the Plan's valuation policies utilizing information provided by the investment custodian. See Note 4 for a discussion of fair value measurements.

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

Note 2. Summary of Accounting Policies (Continued)

Notes receivable from participants: Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Interest income is recorded on the accrual basis. Related fees are recorded as administrative expenses and are expensed when they are incurred. No allowance for credit losses has been recorded as of December 31, 2020 or 2019.

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 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy under Accounting Standards Codification 820 are described below:

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:

- Quoted prices for similar assets or liabilities in active markets.
- Quoted prices for identical or similar assets or liabilities in inactive markets.
- Inputs other than quoted prices that are observable for the asset or liability.
- 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'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 market value.

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

Self-directed brokerage accounts: Accounts primarily consist of mutual funds and common stocks that are valued on the basis of readily determinable market prices.

Common collective trusts: The common collective trusts are valued at the NAV of the underlying investments expressed in units. The NAV is used as a practical expedient to estimate fair value. The NAV is based on the fair value of the underlying investments held by the trust less its liabilities. This practical expedient is not used when it is determined to be probable that the trusts will sell the investments for an amount different from the reported NAV.

Note 2. Summary of Accounting Policies (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 or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

Interest income is recorded on the accrual basis. The Plan presents in the statement of changes in net assets available for benefits the net appreciation in the fair value of its investments, which consists of the realized gains or losses on the sale of investments during the period and unrealized appreciation or depreciation of investments held at year-end.

Payment of benefits: Benefits are recorded when paid.

Expenses: Certain expenses incurred while maintaining the Plan are paid directly by the Company and are excluded from these financial statements. Investment-related expenses are included in net appreciation of fair value of investments. Record-keeping fees are generally paid by the Plan.

Subsequent events: The Plan has evaluated subsequent events through October 15, 2021, the date the financial statements were available to be issued.

In August 2021, the Plan Sponsor entered into a merger agreement to be acquired by an indirect subsidiary of an affiliate of the Clearlake Capital private equity group. The transaction is expected to close before December 31, 2021. Impact of this merger on the Plan could not be determined.

Recent accounting pronouncement: In August 2018, the Financial Accounting Standards Board issued Accounting Standards Update (ASU) No. 2018-13, *Fair Value Measurement (Topic 820): Disclosure Framework—Changes to Disclosure Requirements for Fair Value Measurement*, which modifies the disclosure requirements for fair value measurements by removing, modifying or adding certain disclosures. The Plan adopted ASU 2018-13 as of January 1, 2020, and the adoption did not have a material impact on the Plan's financial statements.

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The following is a summary of the Plan's asset information as of December 31, 2020 and 2019, and for the year ended December 31, 2020, included throughout the Plan's financial statements and supplemental schedule, which was prepared by or derived from information provided by the Trustee, Fidelity Management Trust Company, and furnished to the Plan Administrator. The Plan Administrator obtained a certification from the Trustee that information provided to the Plan Administrator related to the following assets is complete and accurate.

Accordingly, as permitted by 29 CFR 2520.103-8 of the U.S. Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA, the Plan Administrator instructed the Plan's independent auditors not to perform any auditing procedures with respect to information that appears throughout the financial statements and supplemental schedule.

Note 3. Information Certified and Provided by Fidelity Management Trust Company (Continued)

Fidelity also certified the completeness and accuracy of the following balances as of December 31:

	2020	2019
Mutual funds	$ 132,359,131	$ 94,716,040
Self-directed brokerage accounts	3,557,131	1,538,986
Common/collective trust	2,723,911	1,228,223
Participant notes receivable	1,402,298	1,070,037

Fidelity also certified the completeness and accuracy of the following for the year ended December 31, 2020:

Net appreciation in fair value of investments	$ 16,942,847
Interest and dividend income	2,971,447
Interest income on notes receivable from participants	67,287

Note 4. Fair Value Information

The tables below present the level within the fair value hierarchy at which the Plan's financial statements are measured on a recurring basis at December 31:

	2020			
Investment Category	Level 1	Level 2	Level 3	Total
Mutual funds	$ 132,359,131	$ -	$ -	$ 132,359,131
Self-directed brokerage accounts	3,557,131	-	-	3,557,131
Total assets in the fair value hierarchy	$ 135,916,262	$ -	$ -	135,916,262
Investments measured at NAV (a)				2,723,911
Investments at fair value				$ 138,640,173

	2019			
Investment Category	Level 1	Level 2	Level 3	Total
Mutual funds	$ 94,716,040	$ -	$ -	$ 94,716,040
Self-directed brokerage accounts	1,538,986	-	-	1,538,986
Total assets in the fair value hierarchy	$ 96,255,026	$ -	$ -	96,255,026
Investments measured at NAV (a)				1,228,223
Investments at fair value				$ 97,483,249

(a) In accordance with Subtopic 820-10, certain investments that are measured at NAV 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.

Note 4. Fair Value Information (Continued)

The following table sets forth additional disclosures of the Plan's investments whose fair value is estimated using NAV per share (or its equivalent) as of December 31:

	Fair Value Estimated Using NAV Per Share				
	Fair Value at December 31		Unfunded	Redemption	Redemption
Investment	2020	2019	Commitment	Frequency	Notice Period
Common collective trust:					
Putnam Stable Value Fund	$ 2,723,911	$ 1,228,223	$ -	Daily	None
	$ 2,723,911	$ 1,228,223	$ -		

Note 5. Plan Termination

Although it has not expressed any intent to do so, the Company has the right under the Plan document to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, participants would become 100% vested in their Company contributions.

Note 6. Tax Status

The Company adopted a volume submitter plan document sponsored by an affiliate of the Trustee. The volume submitter plan sponsor obtained an opinion letter dated March 31, 2014, in which the IRS stated that the volume submitter plan document was in compliance with applicable requirements of the IRC. The Plan has not requested a determination letter specific to the Plan; however, the Plan Administrator and the Trustee believe that the Plan is designed and operated in compliance with the applicable requirements of the IRC.

U.S. GAAP requires Plan management to evaluate tax positions taken by the Plan and recognize a tax liability if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

During 2020 and certain previous years, the Plan's adoption agreement inadvertently did not exclude compensation from the settlement of restricted stock units, as intended. Consequently, management is evaluating various corrective courses of action available under the IRS Employee Plans Compliance Resolution System, which, if necessary, could include filing under the IRS Voluntary Compliance Program or making a corrective contribution to the Plan. Therefore, no adjustments have been made in the accompanying financial statements.

Note 7. Related-Party Transactions

The Plan paid approximately $194,422 of record-keeping fees to affiliates of the Trustee, and these transactions qualify as exempt party-in-interest transactions. These are included in administrative expenses on the statement of changes in net assets available for benefits.

Note 8. Risks and Uncertainties

The Plan invests in various investment securities. Investment securities are exposed to various risks such as interest rate, market and credit risks. Because of 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.

As the coronavirus (COVID-19) pandemic continues to evolve, the Plan Sponsor believes the extent of any impact to the Plan will be primarily derived by the severity and duration of the pandemic's impact on the U.S. and global economies and the investment markets. The continued spread of the virus, or its reemergence, could have a negative impact on the Plan.

Note 9. Reconciliation of Financial Statements to the Form 5500

The following is a reconciliation of net assets available for Plan benefits, per the financial statements, to the Form 5500 as of December 31:

	2020	2019
Net assets available for Plan benefits per the Form 5500	$ 140,042,471	$ 9,853,285
Employer contributions receivable on accrued payroll at December 31, 2020	189,000	-
Participant contributions receivable on accrued payroll at December 31, 2020	401,000	-
Net assets available for Plan benefits as presented in these financial statements	$ 140,632,471	$ 9,853,285

The following is a reconciliation of the net increase (decrease) in net assets available for Plan benefits, per the financial statements, to the Form 5500 as of December 31:

	2020	2019
Net increase in net assets available for Plan benefits per the Form 5500	$ 41,489,185	$ 29,831,408
Employer contributions receivable on accrued payroll at December 31, 2020	189,000	-
Participant contributions receivable on accrued payroll at December 31, 2020	401,000	-
Net increase in net assets available for Plan benefits as presented in these financial statements	$ 42,079,185	$ 29,831,408

Supplementary Information

Cornerstone OnDemand, Inc. 401(k) Profit Sharing Plan

Schedule H, Part IV, 4i—Schedule of Assets Held for Investment Purposes at End of Year
December 31, 2020
EIN: 13-4068197—Plan Number: 001

	Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	Cost	Current Value
	Putnam Stable Value Fund	**	$ 2,723,911
	American Funds Washington Mutual Investors Fund Class R-6	**	1,453,838
	Victory Sycamore Established Value Fund Class R6	**	2,242,089
	DFA U.S. Targeted Value Portfolio Institutional Class	**	552,674
*	Fidelity® Contrafund® – Class K	**	5,997,840
	Hartford MidCap HLS Fund Class IA	**	2,239,442
	Goldman Sachs Small Gap Growth Insights Fund Class R6	**	678,153
	American Funds EuroPacific Growth Fund® Class R-6	**	2,155,715
	DFA International Value Portfolio Institutional Class	**	223,590
	American Funds New World Fund® Class R-6	**	1,964,321
*	Fidelity Advisor® Total Bond Fund – Class I	**	3,181,061
	Vanguard Target Retirement 2015 Fund Investor Shares	**	186,465
	Vanguard Target Retirement 2020 Fund Investor Shares	**	1,633,357
	Vanguard Target Retirement 2025 Fund Investor Shares	**	4,963,019
	Vanguard Target Retirement 2030 Fund Investor Shares	**	8,998,448
	Vanguard Target Retirement 2035 Fund Investor Shares	**	19,735,006
	Vanguard Target Retirement 2040 Fund Investor Shares	**	15,762,690
	Vanguard Target Retirement 2045 Fund Investor Shares	**	17,883,806
	Vanguard Target Retirement 2050 Fund Investor Shares	**	15,142,012
	Vanguard Target Retirement 2055 Fund Investor Shares	**	7,601,565
	Vanguard Target Retirement 2060 Fund Investor Shares	**	1,642,917
	Vanguard Target Retirement 2065 Fund Investor Shares	**	71,210
*	Fidelity Government Money Market	**	198,281
	Vanguard Target Retirement Income Fund Investor Shares	**	118,635
*	Fidelity® 500 Index Fund	**	13,449,354
*	Fidelity® International Index Fund	**	1,210,589
*	Fidelity® Extended Market Index Fund	**	3,073,054
	Mutual funds		132,359,131
	Assets in Fidelity Self-Directed Brokerage Accounts	**	3,557,131
	Notes receivable from participants, interest rates that range from 4.25% to 6.50%, maturing through December 2030	**	1,402,298
	Total		$ 140,042,471

***** Party in interest.

** Historical cost information not required for participant-directed investments.

The above information has been certified by the Trustee for accuracy and completeness.