FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

	OMB APP	ROVAL					
RSHIP	OMB Number:	3235-0287					
	Estimated average burden						

hours per response:

0.5

Che	ck this box if no longer subjec	;
to S	ection 16. Form 4 or Form 5	
oblig	ations may continue. See	
Instr	uction 1(b).	

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person*     Wilson Jaymi					2. Issuer Name <b>and</b> Ticker or Trading Symbol GENTHERM Inc [ THRM ]										all app Direc	licable) tor	Ü	10% O	wner
(Last) 21680 HA	(Fi	,	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 03/11/2023									X	Officer (give title below)  SVP, General			Other (sbelow)	sреспу
(Street) NORTHV (City)	VILLE M		8167 Zip)		Rul	4. If Amendment, Date of Original Filed (Month/Day/Year) 03/14/2023  6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person  Form filed by More than One Reporting Person  Rule 10b5-1(c) Transaction Indication  Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.													
		Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired	, Dis	posed of	, or B	enefic	ially	Own	ed			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da				y/Year) Execu		Deemed cution Date, y nth/Day/Year)		3. 4. Securitie Transaction Code (Instr. 8) 5.					, 4 and Sec Ben Owr		Amount of curities neficially vned Following		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) o (D)	Price	•	Reported Transaction(s) (Instr. 3 and 4)				(111511.4)
Common Stock 03					2023				F		221(1)	D	\$59.63		14,795			D	
Common Stock 03/12					/2023				F		451(1)	D	\$59	.63	63 14,344		4 D		
		Tal	ole II -								osed of, convertib				Owne	d			
Derivative Security	2. Conversion or Exercise Price of Derivative Security	rcise (Month/Day/Year) if any (Month/Day/Year) if any		4. Transa Code ( 8)	Instr.			6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Expiration Exercisable Date			7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		nt er		9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

## **Explanation of Responses:**

1. On March 14, 2023, the reporting person filed a Form 4 that inadvertently reflected incorrect amounts for the shares withheld for the payment of taxes as a result of the application of an incorrect tax rate. The amounts above reflect the corrected calculation.

/s/ Stephanie Swan, by Power of Attorney

\*\* Signature of Reporting Person Date

05/17/2024

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- \* If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.