FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPRO	VAL							
	OMB Number:	3235-0287							
l	Estimated average burden								
l	hours per response:	0.5							

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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

1. Name and Address of Reporting Person* Oldorff Frithjof						2. Issuer Name and Ticker or Trading Symbol GENTHERM Inc [THRM]									(Check all a				Owner
(Last) (First) (Middle) 21680 HAGGERTY ROAD SUITE 101							3. Date of Earliest Transaction (Month/Day/Year) 02/22/2019									belov			
(Street) NORTHVILLE MI 48167 (City) (State) (Zip)						4. If Amendment, Date of Original Filed (Month/Day/Year)									. Indiv ine) X	lividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person			
		Tal	le I - No	n-Deriv	ative	Sec	curitie	s Acc	quired,	Dis	posed o	f, o	r Ben	eficia	ally (Owne	ed		
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da						Execution Date,			3. Transa Code 8)	Disposed	ecurities Acquired (A) osed Of (D) (Instr. 3,			4 and Seci Ben		cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
						Code	v	Amount		(A) or (D)	Price		Transa	action(s) 3 and 4)		(111511.4)			
Common Stock 02/22/						2019			F		1,255		D	\$41	1.76		6,187	D	
		٦	able II - I (sed of, onvertib				y Ov	vned			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercis Price of Derivative Security		3A. Deem Executior if any (Month/Da	Date,	Date, Transactio Code (Inst				6. Date E Expiratio (Month/D		Amount of		str. 3			9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownershi Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	or Nui of	ount mber ires					

Explanation of Responses:

Remarks:

/s/ Frithjof Oldorff

02/22/2019

** Signature of Reporting Person

erson Date

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.