FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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* GROUF SANDRA L						2. Issuer Name and Ticker or Trading Symbol AMERIGON INC [ARGN]									Check	all app	p of Reportin blicable) ctor er (give title	ng Pers	10% C	
(Last) (First) (Middle) 21680 HAGGERTY ROAD SUITE 101						3. Date of Earliest Transaction (Month/Day/Year) 03/14/2007									X	belov				
(Street) NORTHVILLE MI 48167					_ 4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S	tate) (Zip)													Pers	on			
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3) 2. Transa Date (Month/D						Execution Date,			Code (Transaction Disposed Of (D) (Instr. Code (Instr. 5)					nd	Securities Beneficially		Form	nership : Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
										v	Amount		(A) or (D)	Price	. 1	Transaction(s) (Instr. 3 and 4)				(111501.4)
Common Stock 03/14/						7					1,870	70 A		\$	0	5,363			D	
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date, Transaction Code (Inst			n of		6. Date E: Expiration (Month/D	•	Amount of Securities Underlying Derivative Security (Instr. and 4)						Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	wnership orm: irect (D) r Indirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)		Date Exercisal		Expiration Date	Title	of	nber							

Explanation of Responses:

/s/ Sandra Grouf

03/21/2007

** Signature of Reporting Person

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.