FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-028							
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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 Sec	tion 30(h) of the	Investme	nt Con	npany Act	of 19	940					
1. Name and Address of Reporting Person* <u>Gaul Ryan Wesley</u>					2. Issuer Name and Ticker or Trading Symbol GENTHERM Inc [THRM]						check all a	onship of Reporting Person(s) to Issu Il applicable) Director 10% Owr				
(Last) (First) (Middle) 21680 HAGGERTY ROAD				3. Date of Earliest Transaction (Month/Day/Year) 02/18/2016						X Off bel	cer (give title ow)	Other	Other (specify below)			
(Street) NORTHV			18167 Zip)		4. If An	nendment, Date	of Origina	al Filed	(Month/Da	ay/Ye	ear)		ne) X Fo	m filed by One	Filing (Check A Reporting Pers re than One Rep	son
		Tabl	e I - Noi	ո-Deriv	ative S	ecurities Ac	quired	, Dis	posed o	f, c	or Ben	eficia	ally Owr	ed		
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)			Execution D		Code	Transaction Disposed Of (D) (Instr. 3, 4)			nd Secu Bend Own	mount of urities eficially ned Following orted	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
						Code	v	Amount	unt (A) or (D)		Price	Tran	saction(s) r. 3 and 4)		(IIISti. 4)	
Common Stock 02/18/2				3/2016		F		1,152 D		\$42	.38	8,848	D			
		Та				urities Acqu ls, warrants,							y Owne	t		
Derivative Conversion Date Execution Date, Security or Exercise (Month/Day/Year) if any		4. Transactio Code (Inst 8)		of Expiration Dat (Month/Day/Ye Securities Acquired (A) or Disposed of (D)		e Amount of		str. 3	8. Price of Derivative Security (Instr. 5) Beneficially Owned Following Reported Transactior (Instr. 4)		Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)				

Date Exercisable Expiration

Date

Explanation of Responses:

Remarks:

/s/ Ryan W. Gaul

Title

02/19/2016

** Signature of Reporting Person

Amount or Number

of Shares

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).

Code

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.

(A) (D)