FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPROVAL								
	OMB Number:	3235-0287							
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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 <b>and</b> Ticker or Trading Symbol GENTHERM Inc [ THRM ]									all application all applications all all applications all	able) `	g Pers	on(s) to Issu 10% Ow Other (s	/ner		
(Last) 21680 H	t) (First) (Middle) 80 HAGGERTY ROAD						3. Date of Earliest Transaction (Month/Day/Year) 02/24/2016									Presiden	t Auto	below)	респу		
SUITE 101							If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable						
(Street) NORTHVILLE MI 48167															Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City) (State) (Zip)															1 613011						
		Ta	ble I - No	n-Deri	ivativ	e Se	curitie	s Ac	quired, [	Dis	posed o	f, or Ber	neficia	ılly	Owned						
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da						Execution Date,		Transaction Disposed (			es Acquired (A) or Of (D) (Instr. 3, 4 and 5			5. Amour Securitie Beneficia Owned F Reported	s For ally (D) ollowing (I) (I		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership			
									Code	,	Amount	(A) or (D) Pr			Transact	eported ansaction(s) nstr. 3 and 4)			(Instr. 4)		
Common Stock 02/24/2							2016		A		10,000 <sup>(1)</sup> A \$		\$40	.64	18,892			D			
			Table II -	Deriv (e.g.,	ative puts,	Sec , cal	urities ls, warr	Acq ants	uired, Di , option:	spo	osed of, convertib	or Bene ole secu	ficial rities)	y O	wned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deeme Execution if any (Month/Day	Date,	4. Transa Code ( 8)				6. Date Exe Expiration I (Month/Day	Date	of Securities		ies g Securit	S	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)		
					Code	v	(A)		Date Exercisable		Expiration Date	Title	Amour or Number of Shares	er							
Option to Purchase Common Stock	\$40.64	02/24/2016			A		30,000		02/24/2017 <sup>(</sup>	2)	02/24/2023	Common Stock	30,00	0	\$0.00	30,000	(3)	D			

## **Explanation of Responses:**

- 1. The shares represent Restricted Common Stock issued under the 2013 Equity Incentive Plan that have been granted to the Reporting Person. The shares vest in three portions; 3,334 on February 24,2017, 3,333 on February 24, 2018, and 3,333 on February 24,2019.
- 2. Purchase option shares become exercisable in four installments; 7,500 shares on February 24, 2017, 7,500 shares on February 24, 2018, 7,500 shares on February 24, 2019, and 7,500 shares on February 24, 2019, an
- 3. The amount represents the total number of derivative securities Benefically Owned of the class shown (i.e. the same exercise price and expiration date). The Reporting Person owns a total of 60,000 Options to Purchase Common Stock of varying classes (i.e. varying exercise prices and expiration dates).

## Remarks:

/s/ Frithjof Oldorff

02/25/2016

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.