## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Filed pursuant to Section 16(a) of the Securities Eychange Act of 1934

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

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
hours per response:	0.5								

	2(5).			1 110							mpany Act			,						
1. Name and Address of Reporting Person*  AKERSON DANIEL F					2. Issuer Name <b>and</b> Ticker or Trading Symbol General Motors Co [ NO SYMBOL ]								(Ch	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
														X Dire						
(Last)	(F	irst)	3. Date of Earliest Transaction (Month/Day/Year)								$\dashv$	X Officer (give title below)			Other (specify below)					
300 RENAISSANCE CENTER						09/30/2010									Chief Exe	cutiv	e Officer			
M/C: 482	2-C25-A36																			
(0)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) DETROIT MI 48265-3000															X For	n filed by O	ne Rep	oorting Pers	on	
															Fori Per	n filed by Moson	ore tha	an One Rep	orting	
(City)	(S	tate)	(Zip)																	
		Tab	le I - Noi	n-Deriv	ative	Sec	curitie	s Ac	quired	Dis	posed	of, or I	Ben	eficial	ly Own	ed				
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)					Execution Day/Year) if any		2A. Deemed Execution Date, if any (Month/Day/Yea		Code (Instr.		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)		(A) or . 3, 4 and	Secui Benet Owne	5. Amount of Securities Beneficially Owned Following		wnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	v	Amount	Amount (A) or (D)		Price	Reported Transaction(s) (Instr. 3 and 4)				(msu. 4)		
		7	able II -						,		osed of converti	,		,	Owne	t				
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,	4. Transaction Code (Instr 8)				6. Date E. Expiratio (Month/D	n Date	•	Amour Securit Underl Derivat	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)		e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	0 0	mount r lumber f shares						

## **Explanation of Responses:**

**\$0**<sup>(2)</sup>

Salary Stock

Units<sup>(1)</sup>

1. The Salary Stock Units ("SSUs") were awarded on September 30, 2010 pursuant to the Company's Salary Stock Plan (the "GMSSP"), and will be settled in three equal, annual installments beginning on September 30, 2011. Each SSU is fully vested and represents a right to receive one share of the Company's common stock on the applicable settlement date; provided, however, that if a settlement date occurs prior to the date that is six months following a consummation of an initial public offering of the Company's common stock, the SSU will be settled by the delivery of cash in an amount equal to the Fair Market Value (as defined in the GMSSP) of the Company's common stock as of the applicable anniversary date of the SSU's grant. The SSUs do not have an expiration or exercise date.

(1)

2. The SSUs do not carry a conversion or exercise price.

/s/ Anne T. Larin, attorney-infact for Mr. Akerson

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**\$0**<sup>(1)</sup>

Stock

(1)

10/04/2010

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D

\*\* 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).

09/30/2010

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

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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.