FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Washington, D.C. 20040

OMB APP	ROVAL
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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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* Tsien Matthew (Last) (First) (Middle) 300 RENAISSANCE CENTER						2. Issuer Name and Ticker or Trading Symbol General Motors Co [GM] 3. Date of Earliest Transaction (Month/Day/Year) 12/31/2016										5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify below) Executive Vice President				wner	
M/C: 482-C23-D24 (Street) DETROIT MI 48265 (City) (State) (Zip)							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				
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transar Date (Month/Date					action	ction 2A. Deemed Execution Date,			3. Transaction Code (Instr.			4. Securities Acquired (A)				or 5. Amount of 4 and Securities Beneficially Owned Follow Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock ⁽¹⁾					1/2016	/2016				M N	<u>'</u>	Amount 98	()	A) or D) A	Price \$0	(Instr. 3	ction(s) 3 and 4) ,698	D			
					1/2016 1/2016	_				D F		51 47		D D	\$34.5 \$34.5	_	1,647 1,600				
		(e.g., p ed Date, ly/Year)			n of Ex (M. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			ate Exercing Distribution Distr	, CC	DIVERTION OF THE PROPERTY OF T	7. Title and Amount of Securities Underlying Derivative Securi (Instr. 3 and 4) Amount or Numb of		ecurity 4)	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Owne Form Direct or Ind (I) (In:	(D) irect	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
Salary Stock Units ⁽²⁾	\$0.0	12/31/2016			M	•	(A)	98		(3)	100	(3)	Comm	on	98	\$0	0	I)		

Explanation of Responses:

- 1. The Common Stock reported in this item was issued upon the settlement of a portion of a grant of Salary Stock Units ("SSUs") awarded on December 31, 2013 pursuant to the Company's Salary Stock Plan (the "GMSSP") and vested upon grant. The portion of this award currently payable was settled on December 31, 2016 in cash, less a portion withheld for taxes.
- 2. Each SSU is the economic equivalent of one share of the Company's Common Stock. Grants of SSUs are fully vested when made and settled in three equal, annual installments beginning one year after the date of grant. The GMSSP gave the Reporting Person the option of having a settlement made by delivery of shares of the Common Stock or by the delivery of cash in an amount equal to the fair market value of the Stock as of the applicable anniversary date of the SSU's grant. Under the GMSSP, the fair value of the Common Stock is the average of the high and low trading prices for the Stock as reported on the New York Stock Exchange, on which it is listed, on December 30, 2016, which was \$34.99.
- 3. The SSUs do not have an expiration or exercise date or carry a conversion or exercise price.

Remarks:

/s/ Tia Y. Turk, Attorney-In-Fact for Mr. Tsien

01/04/2017

** 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.