FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

| OMB APPROVAL | | | | | | | | |
|--------------------------|-----|--|--|--|--|--|--|--|
| OMB Number: 3235-0104 | | | | | | | | |
| 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

| Name and Address of Reporting Person* Mendillo Jane L | | | Date of Event Requiring Staten Month/Day/Year | nent | 3. Issuer Name and Ticker or Trading Symbol General Motors Co [GM] | | | | | | |
|---|---------|-----------------|--|-------------------|---|--|--|--|--------------|---|---|
| (Last) 300 RENAIS | (First) | (Middle) ΓER | | | Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | 5. If Amendment, Date of Original Filed (Month/Day/Year) | | | |
| M/C: 482-C23-D24 | | | | | | Officer (give title below) | Other (spe | cify | | dividual or Joint cable Line) | /Group Filing (Check |
| (Street) DETROIT | MI | 48265-3000 | | | | | | | X | | y One Reporting Person y More than One erson |
| (City) | (State) | (Zip) | | | | | | | | | |
| | | Т | able I - Non | -Deriva | tive S | ecurities Beneficiall | y Owned | | | | |
| 1. Title of Security (Instr. 4) | | | | | unt of Securities ially Owned (Instr. 4) | | | 4. Nature of Indirect Beneficial Ownership (Instr. 5) | | | |
| No securities beneficially owned | | | | | | 0 | D | | | | |
| | | (e.ç | | | | urities Beneficially (options, convertible | | s) | | | |
| 1. Title of Derivative Security (Instr. 4) | | | 2. Date Exercisable and Expiration Date (Month/Day/Year) | | 3. Title and Amount of Secur Underlying Derivative Secur | | ity (Instr. 4) Conve | | ercise Form: | | 6. Nature of Indirect Beneficial Ownership (Instr. 5) |
| | | | Date Exercisable | Expiratio Date | n Title | е | Amount or Number of Shares | Price of Deriva | tive | Direct (D) or Indirect (I) (Instr. 5) | |

Explanation of Responses:

Remarks:

/s/ Robert W. Boyle, Jr.,
Attorney-In-Fact for Ms.
Mendillo

06/16/2016

** 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 5 (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.

POWER OF ATTORNEY

I am a director and/or officer of General Motors Company ("GM") and as such I will be required to file with the Securities and Exchange Commission ("SEC") one or more Forms 3, 4 and 5 under Section 16 of the Securities Exchange Act of 1934 ("Section 16") and the rules promulgated by the SEC under Section 16, and Form 144 under Rule 144 promulgated by the SEC under the Securities Act of 1933 ("Rule 144").

I appoint each of Robert W. Boyle, Jr., Rick E. Hansen, Jill E. Sutton, and Tia Y. Turk as my attorney-in-fact to:

- 1. Execute Forms 3, 4, 5, and 144 or any amendments to those Forms for me in my name and file such Forms and amendments with the SEC and any stock exchange or similar authority as required by law or rule on my behalf;
- 2. Do anything on my behalf that may be necessary or desirable to complete and execute such Forms 3, 4, 5, or 144 or any amendment to those Forms and to file those Forms or amendments on a timely basis; and
- 3. Take any other action in connection with those Forms or amendments that may be legally required or appropriate, in the opinion of the attorney-in-fact taking the action.

I give each attorney-in-fact the power and authority to do anything that is required or appropriate in using his or her powers as attorney-in-fact, to the extent that I could act if I were personally present, with full power of substitution. I agree to everything that these attorneys-in-fact (including any substitutes for them) do under this Power of Attorney that is consistent with its terms.

I acknowledge that complying with Section 16 and Rule 144 as they apply to me is my responsibility and that neither GM nor any of these attorneys-in-fact is assuming my responsibilities in that regard.

This Power of Attorney will remain in effect until I am no longer required to make filings under Section 16 or Rule 144, unless I inform these attorneys-in-fact in writing that I have revoked this Power, which I can do at any time.

State of M

County of MIDDLESEX

Subscribed and sworn to before me

this <u>2844</u> day of <u>MAY</u>, 2016.