FORM 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPR	ROVAL
OMB Number:	3235-0362
Estimated average	e burden
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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). Form 3 Holdings Reported

Form 4 Transactions

Reported

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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 Per LOWBER JOHN M	2. Issuer Name and Ticker or Trading Symbol GENERAL COMMUNICATION INC [GNCMA]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X Officer (give title below) Other (specify below) Sr VP, CFO, Secretary, Treas.			
(Last) (First) 2550 DENALI STREET, SUIT	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2010					SI VP, CFO, Secreta	ary, Treas.		
(Street) ANCHORAGE, AK 99503	4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Reporting (check applicable line) _X_Form Filed by One Reporting Person			
(City) (State)	Table I - Non-Derivative Securities Acou					Form Filed by More than One Reporting Person iired, Disposed of, or Beneficially Owned			
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		(A) or D	A) or Disposed of (D) (Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership
Class A Common Stock	12/31/2010		G	10	A	\$ <u>(1)</u>	344,509	D	
Class A Common Stock	03/09/2010(2)		I	487	D	\$ 5.95	27,834	I	by Trust
Class B Common Stock	03/09/2010(2)		I	53	D	\$ 5.46	5,933	I	by Trust
Class B Common Stock							270	D	

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

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 control number.

SEC 2270 (9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction	3A. Deemed	4.	5.		6. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number	10.	11. Nature	
Derivative	Conversion	Date	Execution Date, if	Transaction	Numb	er	and Expirati	on Date	Amou	ınt of	Derivative	of	Ownership	of Indirect	
Security	or Exercise	(Month/Day/Year)	any	Code	of		(Month/Day	/Year)	Unde	rlying	Security	Derivative	Form of	Beneficial	
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Deriv	ative			Secur	rities	(Instr. 5)	Securities	Derivative	Ownership	
	Derivative				Secur	ities			(Instr	. 3 and		Beneficially	Security:	(Instr. 4)	
	Security				Acqui	ired			4)			Owned at	Direct (D)		
					(A) or	r						End of	or Indirect		
					Dispo	sed						Issuer's	(I)		
					of (D))						Fiscal Year	(Instr. 4)		
					(Instr.	. 3,						(Instr. 4)			
					4, and	15)									
										Amount					
							D.	E ' '		or					
								Expiration	Title	Number					
							Exercisable	Date		of					
					(A)	(D)				Shares					

Reporting Owners

Donouting Owney Name /	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
LOWBER JOHN M 2550 DENALI STREET SUITE 1000 ANCHORAGE, AK 99503			Sr VP, CFO, Secretary, Treas.					

Signatures

John M. Lowber	02/10/2011
***Signature of Reporting Person	Date

Explanation of Responses:

- * 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).
- (1) N/A
- (2) Required corrective distribution and associated forfeiture of excess aggregate contributions and income allocable to those contributions for the 2009 plan year.
- (3) All shares owned by virtue of participation in the Company's Employee Stock Purchase Plan as of December 31, 2010.

Note: File three copies of this Form, one of which must be manually signed. If space provided is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.