FORM 5

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

OMB APPROVAL							
OMB Number:	3235-0362						
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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

1. Name and Address of R Pidgeon Tina (Last) 2550 DENALI STRE	Issuer Name and Ticker or Trading Symbol GENERAL COMMUNICATION INC [GNCMA] Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2010					5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X Officer (give title below) Other (specify below) Sr. VP Governmental Affairs				
2550 DENALI STREET, SUITE 1000 (Street) ANCHORAGE, AK 99503			4. If Amendment, D	Oate Original Fil	ed(Month/D	oay/Year)		6. Individual or Joint/Group Reporting (check applicable line) _X_Form Filed by One Reporting Person _Form Filed by More than One Reporting Person		
(City)	(State)	(Zip)	Tab	le I - Non-Deri	red, Disposed of, or Beneficially	sposed 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	ecurities Acquired or Disposed of (D) tr. 3, 4 and 5) (A) or ount (D) Price		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 Sto	ock	12/31/2010(1)		I	195	A	\$ 9.99	10,927	I	by Trust
Class A Common Sto	ock							15	D	
Class A Common Sto	ock							18,000	D	
Class A Common Sto	ock							5,000	D	
Class A Common Sto	ock							20,000	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)

			(0.)											
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	Num	oer	and Expiration	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				Secui	ities			(Instr	. 3 and		Beneficially	Security:	(Instr. 4)
	Security				Acqu	ired			4)			Owned at	Direct (D)	, ,
					(A) o	r						End of	or Indirect	
					Dispo	sed						Issuer's	(I)	
					of (D)						Fiscal Year	(Instr. 4)	
					(Instr	. 3,						(Instr. 4)	, ,	
					4, and	15)						, ,		
										Amount				
							Dete	D		or				
							Date Exercisable	Expiration	Title	Number				
							Exercisable	Date		of				
					(A)	(D)				Shares				

Reporting Owners

Panarting Owner Name /	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Pidgeon Tina 2550 DENALI STREET SUITE 1000 ANCHORAGE, AK 99503			Sr. VP Governmental Affairs					

Signatures

Tina Pidgeon	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) Purchases made on behalf of the reporting person by the Company's Employee Stock Purchase Plan during the period September 17, 2010 to December 31, 2010.
- (2) 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.