## FORM 4

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

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

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 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

|   | e Responses   | 5)   |   |   |                                      |                                    |  |                          |  |                                     |                               |  |  |                  |   |  |                                 |
|---|---|--|---|---|--------------------------------------|------------------------------------|--|--------------------------|--|-------------------------------------|-------------------------------|--|--|------------------|---|--|---------------------------------|
| 1. Name and Address of Reporting Person* CARY MARTIN E    |   |  |   | 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)  VP & GM Managed Broadband Svcs |  |                  |   |  |                                 |
| (Last) (First) (Middle)<br>2550 DENALI STREET, SUITE 1000 |   |  |   | 3. Date of Earliest Transaction (Month/Day/Year) 02/12/2013                   |                                      |                                    |  |                          |  |                                     | //Year)                       |  | VP & GM  | Managed Bro      | adband Svc  | 8  |                                 |
| (Street) ANCHORAGE, AK 99503                              |   |  |   | 4. If Amendment, Date Original Filed(Month/Day/Year)                          |                                      |                                    |  |                          |  |                                     | n/Day/Year)                   | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person |  |                  |   |  |                                 |
| (City)  | )   | (State)                                    | (Zip)   |   |                                      | Tal                                | ble I -  | Non-                     | -Deri  | vative S                            | Securities                    | s Acq  | uired, Disp  | osed of, or I    | Beneficially (  | Owned  |                                 |
| 1.Title of Security<br>(Instr. 3)                         |   | 2. Transaction<br>Date<br>(Month/Day/Year) | 2A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) |   |                                      | Code<br>(Instr. 8)                 |  |                          | 4. Securities Acqu (A) or Disposed of (Instr. 3, 4 and 5)  (A) or Amount (D) I |                                     | of (D                         | D) Beneficially Owned For Reported Transaction(s) (Instr. 3 and 4)   |  | following<br>(s) | \ /   | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4)    |                                 |
| Class A C   | Common S  | tock                                       | 02/12/2013  |   |                                      |                                    | A  |                          |  | 42,682                              | 2 A                           | \$<br>8.12   | 56,830   |                  |   | D  |                                 |
|   |   |  |   |   |                                      |                                    |  | uire                     | conta<br>he fo   | ained ir<br>orm dis<br>sposed o     | n this for<br>splays a        | rm a<br>curr<br>neficia  | re not requently valid   | OMB cont         | ormation<br>spond unle<br>trol numbe  | ss   | 1474 (9-02)                     |
| Security (Instr. 3)                                       | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transactio<br>Date<br>(Month/Day/       | n 3A. Deemed<br>Execution Da                                | Year)   | I.<br>Fransacti<br>Code<br>Instr. 8) | 55 ion N o I S A (() I I o () () 4 | Number of Deriva Securit Acquir A) or Disposof (D) Instr. 1, and 1 | er tive ies ed ed ed 33, | 6. Da<br>and E<br>(Mon   | te Exerc<br>Expiration<br>htth/Day/ | on Date<br>Year)<br>Expiratio | 7. Ar<br>Ur<br>Se<br>(In<br>4)   | Title and nount of derlying curities str. 3 and  Amount or Number of |                  | 9. Number of<br>Derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction<br>(Instr. 4) | Ownersh<br>Form of<br>Derivati<br>Security<br>Direct (I<br>or Indire | Beneficial Ownership (Instr. 4) |
|   |   |  |   |   | Code                                 | V (                                | (A)  | (D)                      |  |                                     |                               |  | Shares   |                  |   |  |                                 |

#### **Reporting Owners**

| P. (1.0. N. /  | Relationships |              |                                |       |  |  |  |  |
|--|---------------|--------------|--------------------------------|-------|--|--|--|--|
| Reporting Owner Name /<br>Address  | Director      | 10%<br>Owner | Officer                        | Other |  |  |  |  |
| CARY MARTIN E<br>2550 DENALI STREET<br>SUITE 1000<br>ANCHORAGE, AK 99503 |               |              | VP & GM Managed Broadband Svcs |       |  |  |  |  |

### **Signatures**

| By:Lynda L. Tarbath For:Martin E. Cary | 02/14/2013 |
|--|------------|
| **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).

Note: File three copies of this Form, one of which must be manually signed. If space 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.