FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
Estimated average 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).

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 an	pe Response	/													
1. Name and Address of Reporting Person* BORLAND GINA				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) V.P. and G.M. Local Services						
510 BOU) JNTY DR	(First)	(Middle	,	3. Date of Earlie 08/05/2003	st Transac	tion (N	Month/Day	//Year)			V.P. and	1 G.M. Local	Services	
(Street)			4	4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person						
ANCHORAGE, AK 99515 (City) (State) (Zip))	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned											
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye:		y/Year) Ex		Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)			Ownership Form:	Beneficial		
				(N	Month/Day/Year	Code	V	Amount	(A) or (D)	Price	(Instr. 3 and 4) Direct (D) Or Indirect (I) (Instr. 4)		Ownership (Instr. 4)		
Class A (Common S	Stock	08/05/200	03		S		2,000	D	\$ 8.5025	475 D		D		
Class A Common Stock									34,059			т.	1 70 .		
			for each class	s of securit	ies beneficially	owned dir								1	by Trust
							Per cor the	rsons wh ntained in form dis	no resp n this f splays	form are a curre	the collect not requ ntly valid		ormation spond unle rol numbe	ss	1474 (9-02)
Reminder:	Report on a s	separate line	Ta	able II - Do (e.	erivative Secur g., puts, calls, v	ities Acqu	Per cor the ired, I	rsons what ntained in form dis Disposed on ns, conver	no responding the splays of, or B	form are a curre eneficial curities)	the collect not requ ntly valid	ired to res	pond unle	ss r.	1474 (9-02)
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Reporting Owners

P. (1. O. N. /	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
BORLAND GINA 510 BOUNTY DR ANCHORAGE, AK 99515			V.P. and G.M. Local Services			

Signatures

GINA BORLAND	08/05/2003
**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.