FORM 4

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

OMB APPROVAL
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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

(Print or Ty	pe Response	s)																		
1. Name and Address of Reporting Person* HUGHES G WILSON				GE	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) EVP / AWN CEO							
(Last) (First) (Middle) 2550 DENALI STREET, SUITE 1000					3. Date of Earliest Transaction (Month/Day/Year) 06/25/2015									E	VP / AW	'N CEO				
(Street) ANCHORAGE, AK 99503				4. It	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								
(City) (State) (Zip)					Table I - Non-Derivative Securities Acqui								lired, Disposed of, or Beneficially Owned							
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Yea	Execur any	A. Deemed Execution Date, if any Month/Day/Year)		Code		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)				5. Amount of Securities Beneficially Owned Fol Reported Transaction(s) (Instr. 3 and 4)		Form: Direct		Beneficial (D) Ownership		t cial ship		
							Code	, ,	V	Amount	(A) or (D)	Price	e				or Indirect (I) (Instr. 4)		(IIISII. 4)	
Class A (Common S	Stock	06/25/2015				S			611	D	\$ 17.11 (1)	1	808,586	5		D			
Class A Common Stock													26,270			I		by Corporation		
Class A (Common S	Stock												21,614			Ι		by 40 (3)	1(k)
Reminder:	Report on a s	separate line	for each class of						Pe co the	ersons wontained e form d	ho re in thi isplay	s form	n a urr	o the collective not require not reality valid	ired to res	spond ι	ınless	SE	EC 147	4 (9-02)
				(e.g.,	puts, cal		arrant		tio	ns, conve	rtible	securi	ities	s)						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		Execution any	ned n Date, if Day/Year)	Code		5. Numb of Deriv Secur Acqu (A) or Dispo of (D) (Instr 4, and	ative ities ired sed	an	and Expiration Date (Month/Day/Year) AU Sign (I		Ar Ur Se	(Instr. 4		ive ies cially ing ed ction(s)	Ownership of Form of Be Derivative Ov Security: Direct (D) or Indirect		11. Nature of Indirect Beneficial Ownershij (Instr. 4)		
					Code	V	(A)			ate xercisable		ration	Tit	Amount or Number of Shares						

Reporting Owners

D 4 0 N /	Relationships								
Reporting Owner Name / Address	Director	10% Owner	Officer	Other					
HUGHES G WILSON 2550 DENALI STREET SUITE 1000 ANCHORAGE, AK 99503			EVP / AWN CEO						

Signatures

By:Bryan Fick For:G. Wilson Hughes	06/26/2015			
**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).
- This transaction was executed in multiple trades at prices ranging from \$17.10 to \$17.14. The price reported above reflects the weighted average price. The reporting person (1) hereby undertakes to provide upon request to the SEC staff, the issuer or a security holder of the issuer full information recording the number of shares and prices at which
- (1) hereby undertakes to provide upon request to the SEC staff, the issuer or a security holder of the issuer full information regarding the number of shares and prices at which the transaction was effected.
- (2) Owned by the issuer on behalf of the reporting person pursuant to a deferred compensation plan.
- (3) Shares allocated to Mr. Hughes under the Company's 401(k) Plan as of June 25, 2015.

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.