FORM	4
------	---

Check this box if no
longer subject to
Section 16. Form 4 or
Form 5 obligations
may continue. See
Instruction 1(b).

(Print or Type Pesponses)

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

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

SEC 1474 (9-02)

#### 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 Type Responses)		·								
1. Name and Address of Reporting Per CARY MARTIN E	2. Issuer Name <b>and</b> Ticker or Trading Symbol GENERAL COMMUNICATION INC [GNCMA]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director			
(Last) (First) 2550 DENALI STREET, SUIT	3. Date of Earliest Transaction (Month/Day/Year) 12/10/2016						5VP & 0M 0CT	Business		
(Street) ANCHORAGE, AK 99503	4. If Amendment, Date Original Filed(Month/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)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned								
1.Title of Security (Instr. 3)		Execution Date, if	Code (Instr. 8)	ction	(A) or Disposed of (D) (Instr. 3, 4 and 5)		d of (D)	5. Amount of Securities     6.     7. N       Beneficially Owned Following     Ownership     of I       Reported Transaction(s)     Form:     Ber       (Instr. 3 and 4)     Direct (D)     Ownership		
			Code	v	Amount	(A) or (D)	Price		or Indirect (I) (Instr. 4)	(Instr. 4)
Class A Common Stock	12/10/2016		А		75,000 (1)	А	\$ 18.49	128,916	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.

 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.	1	5.		6. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transactio	on 1	Numb	ber	and Expirati	on Date	Amo	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code	(	of		(Month/Day	/Year)	Unde	rlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	]	Deriv	ative			Secur	rities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative					Secur	ities			(Instr	. 3 and		Owned	Security:	(Instr. 4)
	Security				4	Acqui	ired			4)			Following	Direct (D)	
						(A) 01							1	or Indirect	
					Disposed							Transaction(s)			
						of (D)							(Instr. 4)	(Instr. 4)	
						(Instr. 3,									
					4	4, and	nd 5)								
											Amount				
								Date	Emination		or				
								Exercisable	Expiration	Title	Number				
								Exercisable	Date		of				
				Code V	V	(A)	(D)				Shares				

### **Reporting Owners**

	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
CARY MARTIN E 2550 DENALI STREET SUITE 1000 ANCHORAGE, AK 99503			SVP & GM GCI Business					

## Signatures

By: Bryan Fick For: Martin E. Cary	12/13/2016
**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) Shares granted pursuant to a restricted stock award agreement. The related unvested shares will vest on November 30, 2021.

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.