FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| washington, D.C. 205 |
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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).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

| | | | | | 01.56 | ection | 1 30(11) | or the r | nvesime | ni Co | трапу Аст | 01 1940 | | | | | | | |
|---|---|--|---|---------|--|---|--|---------------------------------|----------------------------|---|----------------------|--|---|---|---|---|---|---|--|
| 1. Name and Address of Reporting Person* TOWERVIEW LLC | | | | | 2. Issuer Name and Ticker or Trading Symbol SAGA COMMUNICATIONS INC [SGA] | | | | | | | Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner | | | | | | | |
| (Last) (First) (Middle) L | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 03/11/2013 | | | | | | | | Officer (give title below) Officer (spe below) | | | | (specify | |
| (Street) NEW YC | | | 10022 (Zip) | | 4. If A | | | | | | | Line) | 6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person X Form filed by More than One Reporting Person | | | | | | |
| | | Tabl | le I - No | n-Deriv | ative S | Sec | uritie | s Acc | uired. | Dis | posed o | f, or I | 3enef | icially | Own | ed | | | |
| 1. Title of Security (Instr. 3) | | 2. Transa Date | 2. Transaction | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | 3. Transaction Code (Instr. | | 4. Securities Acquired (A) | | | or | 5. Amount of Securities Beneficially Owned Following | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | Code | v | Amount | (A) (D) | or Pr | ice | | action(s) 3 and 4) | | | (Instr. 4) | | |
| Class A C | ommon Sto | ock | | 03/11 | /2013 | 2013 | | | S | | 100 | I |) \$ | 48.31 | 1,3 | 281,406 | | D | |
| Class A Common Stock | | | 03/11 | /2013 | 2013 | | S | | 500 | I |) \$4 | \$48.355 1 | | 280,906 | | D | | | |
| | | Та | | | | | | | | | osed of, onvertib | | | | wned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deer Execution if any (Month/E | | 4. Transact Code (In 8) | | 5. Numof Derive Securion Acquired (A) or Disposof (D) (Instrand 5) | ative rities ired osed | Expiration | Exercisable and on Date Day/Year) | | d 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | | Price of rivative curity str. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | C | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code \ | , | (A) | (D) | Date Exercisa | | Expiration Date | Title | Amou or Number of Shares | er | | | | | |
| | d Address of RVIEW I | Reporting Person* | | | | | | | | | | | | | | | | | |

| 1. Name and Address of Reporting Person* TOWERVIEW LLC | | | | | | | | |
|--|---------|----------|--|--|--|--|--|--|
| (Last) | (First) | (Middle) | | | | | | |
| 500 PARK AVENUE | | | | | | | | |
| (Street) | | | | | | | | |
| NEW YORK | NY | 10022 | | | | | | |
| (City) | (State) | (Zip) | | | | | | |
| 1. Name and Address of Reporting Person* TISCH DANIEL R | | | | | | | | |
| (Last) | (First) | (Middle) | | | | | | |
| 500 PARK AVENUE | | | | | | | | |
| (Street) | | | | | | | | |
| NEW YORK | NY | 10022 | | | | | | |
| | (State) | (Zip) | | | | | | |

Explanation of Responses:

Remarks:

1. In addition to TowerView LLC, this Form 4 is being jointly filed by Daniel R. Tisch, who is General Member of, and has the same business address as, TowerView LLC and may be deemed to have a pecuniary interest in securities owned by it.

Daniel R. Tisch

Daniel R. Tisch

03/11/2013 03/11/2013

** Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * 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.

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 Number.