FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL						
OMB Number:	3235-0287					
Estimated average burden						

0.5

hours per response:

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

					or S	Secti	on 30(h)	of the Ir	nvestmer	nt Con	npany Act	of 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) 500 PAR	(Fi	,	Middle)			Date of Earliest Transaction (Month/Day/Year) 9/13/2011									fficer elow)	(give title		Other below)	(specify	
(Street) NEW YC (City)			10022 Zip)		4. If Amendment, Date of Original Filed (Month/Day/Year)						ine) F X F	Form filed by One Reporting Person								
		Tab	e I - No	n-Deriva	ative	Se	curitie	s Acq	uired,	Dis	posed o	f, or	Bene	eficia	ally Ov	ned				
Date			2. Transa Date (Month/D	Execution Date,			3. 4. Securities Acqu Disposed Of (D) (II Code (Instr. 5)					nd Se Be Ov	5. Amount of Securities Beneficially Owned Following		Fo (D)	Ownership rm: Direct) or Indirect (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A (D) or)	Price	Tra	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Class A Common Stock 09/1			09/13/	2011		P		720	720 A \$		\$26	.85	781,262			D				
		Ta									sed of, onvertib				y Own	ed				
1. Title of Derivative Security (Instr. 3)	rive Conversion Date Execution Date, Transactive or Exercise (Month/Day/Year) if any Code (Ins		ction of I			6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		str. 3	8. Price Derivativ Security (Instr. 5)	ive derivative y Securities		,	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)		Date Exercisa		Expiration Date	Title	or	ount nber ares						
	d Address of	Reporting Person*																		

1. Name and Address of Reporting Person* <u>TOWERVIEW LLC</u>								
,								
(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						
(City)	(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 09/13/2011 Daniel R. Tisch 09/13/2011 Date

** Signature of Reporting Person

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.