| SEC Form 4 | |
|------------|--|
|------------|--|

 \square

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

|) | 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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden

| hours per response: | 0.5 |
|--------------------------|-----|
| Estimated average burden | |

| Coppedge Roy F III | | erson* | 2. Issuer Name and Ticker or Trading Symbol <u>SAGA COMMUNICATIONS INC</u> [SGA] | | ationship of Reporting Pe k all applicable) Director | erson(s) to Issuer 10% Owner |
|---------------------------------------|---------|----------|---|-----------------------|---|---------------------------------|
| | | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) 11/28/2016 | | Officer (give title below) | Other (specify below) |
| (Street) GROSSE POINTE FARMS | МІ | 48236 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Indi Line) X | vidual or Joint/Group Fili Form filed by One Re Form filed by More th Person | porting Person |
| (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/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | ecution Date, Transaction ny Code (Instr. | | 4. Securities Disposed Of 5) | | | Owned Following | Form: Direct | 7. Nature of Indirect Beneficial Ownership |
|---------------------------------|--|---|--|---|------------------------------------|---------------|-----------------------|--|--------------|---|
| | | | Code | v | Amount | (A) or (D) | Price | Reported Transaction(s) (Instr. 3 and 4) | | (Instr. 4) |
| Class A Common Stock | 11/28/2016 | | A | | 434 | Α | \$48.6 ⁽¹⁾ | 2,475 | D | |

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transa Code (8) | | 5. Nu of Deriv Secu Acqu (A) or Dispo of (D) (Instr and 5 | Expiration Date (Month/Day/Year) ired r ssed) : 3, 4 | | Expiration Date A (Month/Day/Year) S L L S | | | ate Amount of Year) Securities | | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---|---|--|---|------------------------------|---|--|---|---------------------|--|-------|--|-----------------------------------|--|--|---|--|--|--|
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | | | | |

Explanation of Responses:

1. Grant of restricted stock which vests in one-third increments on November 6, 2017, 2018 and 2019 unless reporting person is no longer a director on the applicable date. Any restricted stock which does not vest is forfeited. Notwithstanding the above, if the reporting person is a director on the occurrence or deemed occurrence of a change in control, all restricted stock shall vest.

<u>Carrie Leahy, Attorney-in-Fact</u> <u>by Power of Attorney</u> <u>11/30/2016</u>

** 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.