FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

C. 20549

	Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).	STATE					
1 Name and Address of Departing Derson*							

MENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company 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) 460 PAR	ast) (First) (Middle) I					B. Date of Earliest Transaction (Month/Day/Year) 03/08/2017							Officer (give title Other (specify below) below)				specify		
(Street) NEW YORK NY 10022 (City) (State) (Zip)						4. If Amendment, Date of Original Filed (Month/Day/Year)									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	e I - Non	n-Deriva	ative	Sec	curitie	s Ac	quired,	Dis	posed o	f, o	r Ben	efici	ally Own	ed			
Da			Date	te onth/Day/Year) if		2A. Deemed Execution Date, if any (Month/Day/Year)		Code	Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			nd Secu Bene Own	ficially ed Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
								Code	v	Amount	mount (A) or (D)		Price		saction(s) 3 and 4)			(Instr. 4)	
Class A Common Stock			03/08/	2017		S		13		D	\$51	.25 1	203,802	D					
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
L. Title of Derivative Security Instr. 3) 2. Conversion Date (Month/Day/Year) Price of Derivative Security Derivative Security		Date,	4. Transaction Code (Instr. 8)		n of		6. Date Exercisa Expiration Date (Month/Day/Yea		e An Ar) Se Un De Se		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)		Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	(D) rect	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Titl	or Nur of	ount nber ares					
	d Address of	Reporting Person*																	
(Last) 460 PAR	K AVENU	(First)	(Midd	le)															

1. Name and Address of Reporting Person* TOWERVIEW LLC									
(Last)	(First)	(Middle)							
460 PARK AVENUE									
(Street)									
NEW YORK	NY	10022							
(City)	(State)	(Zip)							
1. Name and Address of Reporting Person* <u>TISCH DANIEL R</u>									
(Last)	(Middle)								
460 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 it.

> Daniel R. Tisch 03/13/2017 Daniel R. Tisch 03/13/2017 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.