| SEC Form 4 | |
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| FORM | 4 |

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| OMB APPROVAL | |
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| | Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). |
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| Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense correlition of Built 005 |
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| defense conditions of Rule 10b5- 1(c). See Instruction 10. |

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

| 1. Name and Address of Reporting Person [*] BOBINSKI CATHERINE A | 2. Issuer Name and Ticker or Trading Symbol <u>SAGA COMMUNICATIONS INC</u> [SGA] | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner |
|---|---|---|
| (Last) (First) (Middle) C/O SAGA COMMUNICATIONS, INC. 73 KERCHEVAL AVENUE | 3. Date of Earliest Transaction (Month/Day/Year) 12/05/2024 | Officer (give title Other (specify below) SVP, CHIEF ACCOUNTING OFFICER |
| (Street) GROSSE POINTE MI 48236 FARMS | 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 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) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | | | Disposed Of | sed Of (D) (Instr. 3, 4 and E | | 5. Amount of Securities Beneficially Owned Following Reported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---------------------------------|--|---|------|---|-------------|-------------------------------|-------------------|---|---|---|
| | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (1150.4) |
| Class A Common Stock | 12/05/2024 | | A | | 8,432 | A | \$ <mark>0</mark> | 34,395 | D | |
| Class A Common Stock | | | | | | | | 1,123 | Ι | In 401(k) plan |

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) 4. 5. Number 6. Date Exercisable and Expiration Date (Instr. Derivative (Month/Day/Year) 10. Ownership 3. Transaction Date 3A. Deemed Execution Date, 1. Title of 2. Conversion 7. Title and 8. Price of 9. Number of 11. Nature Derivative Amount of Derivative derivative of Indirect Security or Exercise (Month/Day/Year) if any Securities Security Securities Form: Beneficial

| (Instr. 3) | Price of Derivative Security | (Month/Day/Year) | 8) | | Acqu (A) of Dispo of (D) | r osed) :. 3, 4 | | | Under Deriv Secur 3 and | ative rity (Instr. | (Instr. 5) | Owned | Direct (D) or Indirect (I) (Instr. 4) | Ownership (Instr. 4) | |
|------------|------------------------------------|------------------|------|---|-----------------------------------|---------------------------|---------------------|--------------------|----------------------------------|--|------------|-------|---|-------------------------|--|
| | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | | |

Explanation of Responses:

| 1-1 | Collection . | D - 1. (| |
|-----|--------------|----------|--|
| /S/ | Catherine | BODINSKI | |

12/09/2024 ** 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.