FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

	Washington, D.C. 2	20549	
STATEMENT OF	CHANGES IN BE	ENEFICIAL OV	VNERSHIP

OMB APPROVAL							
OMB Number:	3235-0287						
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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).

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

					01 5	secu	ion 30(n)	or the ii	nvesimei	IL COI	прапу Аст	01 1940	,							
1. Name and Address of Reporting Person* TISCH DANIEL R					2. Issuer Name and Ticker or Trading Symbol SAGA COMMUNICATIONS INC [SGA]												p of Reportin blicable) ctor	ng Per	.,	
(Last) (First) (Middle) 500 PARK AVENUE						3. Date of Earliest Transaction (Month/Day/Year) 06/02/2009									Officer (give title below)					(specify
(Street) NEW YORK NY 10022 (City) (State) (Zip)						Lin								. Indivine)	Form filed by One Reporting Person					
		Tabl	le I - No	n-Deriv	ative	Se	curitie	s Acc	quired,	Dis	posed o	f, or	Bene	eficia	ally	Owne	ed			
1. Title of Security (Instr. 3)		2. Transa Date (Month/I		Execution Date,		n Date,	3. Transa Code 8)		Disposed	ties Acquired (A) o I Of (D) (Instr. 3, 4				5. Amount of Securities Beneficially Owned Following Reported		Forn (D) c	vnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	v	Amount	(/	() or ()	Price	•	Transa	action(s) 3 and 4)			(
Class A C	ommon St	ock		06/02	2/2009				P		100		Α	\$6	5.3	3 462,000		D		
Class A Common Stock				06/02	2/2009				P		100		Α	\$6	5.2	462,100		D		
Class A Common Stock				06/02	2/2009			P		25		Α	\$6.	.17	462,125		D			
		Та	able II - I								sed of, onvertib					vned				
1. Title of Derivative Security (Instr. 3)	ivative Conversion Date Execution Date, Transcurity or Exercise (Month/Day/Year) if any Code		Transa Code (i				6. Date Exercisable and Expiration Date (Month/Day/Year) (Month/Day/Year) 7. Title and Amount of Securities Underlying Derivative Security (Inst and 4)				str. 3			ive derivative y Securities		Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amo or Num of Sha							
1. Name and Address of Reporting Person* TISCH DANIEL R																				

1. Name and Address of Reporting Person* TISCH DANIEL R								
(Last)	(First)	(Middle)						
500 PARK AVENUE								
(Street)								
NEW YORK	NY	10022						
(City)	(State)	(Zip)						
1. Name and Address of Reporting Person* TOWERVIEW LLC								
(Last)	_ast) (First)							
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 Daniel R. Tisch 06/02/2009 06/02/2009

** 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.