## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL							
OMB Number:	3235-0287						
Estimated average burden							
hours per response:	0.5						

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 Section 30(h) of the Investment Company Act of 1940

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1. Name and Address of Reporting Person*  TOWERVIEW LLC					2. Issuer Name <b>and</b> Ticker or Trading Symbol SAGA COMMUNICATIONS INC [ SGA ]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director X 10% Owner						
(Last) (First) (Middle) 460 PARK AVENUE					3. Date of Earliest Transaction (Month/Day/Year) 08/28/2015										Officer (give title below)				(specify		
(Street)  NEW YORK NY 10022  (City) (State) (Zip)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)										Individual or Joint/Group Filing (Check Applicable ine)  Form filed by One Reporting Person  X Form filed by More than One Reporting Person					
		Tabl	le I - No	n-Deriv	ative	Se	curitie	s Acc	quired,	Dis	posed o	f, or	Bene	ficially	/ Own	ed					
1. Title of Security (Instr. 3)			Date	te onth/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)								6. Ownership Form: Direct (D) or Indirec (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Code	v	Amount	(A (E	() or ()	Price	Transa	action(s) 3 and 4)			(1130.4)		
Class A Common Stock				08/28	3/2015				P		1,000		Α	\$35.1	1,2	297,000	I	)			
Class A Common Stock 08					/2015	2015			P		1,000		A	\$35	1,2	298,000	D				
Class A Common Stock 08/28/				/2015	015			P		720		A	\$34.9	1,2	1,298,720		)				
		Та	able II - I (								sed of, onvertib				Owned						
1. Title of Derivative Security (Instr. 3)  2. Conversion or Exercise Price of Derivative Security  Security  Conversion Date (Month/Day/Year)  (Month/Day/Year)  (Month/Day/Year)  (Month/Day/Year)		Date, Transact					6. Date E Expiratio (Month/D	n Date	e Amount of		De Se (Ir	Price of erivative ecurity estr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	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 Shar	ber							
	d Address of RVIEW I	Reporting Person*																			

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)	(First)	(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 by it.

Daniel R. Tisch Daniel R. Tisch

08/28/2015 08/28/2015

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.