FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

wasnington,	D.C. 20549	

OMB APPRO	VAL
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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

					or s	Section	on 30(h)	of the I	nvestmer	nt Coi	mpany Act	of 1940							
1. Name and Address of Reporting Person*  TOWERVIEW LLC					2. Issuer Name and Ticker or Trading Symbol SAGA COMMUNICATIONS INC [ SGA ]									neck all a	hip of Reportin oplicable) ector	*			
(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 07/27/2015										icer (give title ow)	Other (spe below)			
(Street)  NEW YORK  NY  10022  (City) (State) (Zip)				4. If	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											on			
		Tabl	e I - No	n-Deriv	ative	Se	curitie	s Acc	quired,	Dis	posed o	f, or l	Bene	ficial	lly Owi	ned			
1. Title of S	ecurity (Inst	r. 3)		2. Transa Date (Month/E		ar) E	A. Deen Execution fany Month/D	n Date,	3. Transa Code ( 8)						Secu Bend Own	mount of irities eficially ed Following orted	6. Owne Form: D (D) or In (I) (Instr	irect direct	7. Nature of Indirect Beneficial Ownership
									Code	v	Amount	(A (D	) or )	Price	Tran	saction(s) r. 3 and 4)			(Instr. 4)
Class A C	ommon Sto	ock		07/27	//2015	5			P		2,047		A	\$37.	3 1	,270,000	D		
Class A C	ommon Sto	ock		07/27	//2015	5			P		2,000		A	\$37.2	25 1	,272,000	D		
Table I - No  Table I - No  Table I - No  Table II		07/27	7/27/2015				P		2,000		A	\$37.	2 1	1,274,000					
Class A C	ommon Sto	ock		07/27	7/2015				P		1,832		A \$37.15		5 1,275,832		D		
		Та									sed of, onvertib				Owne	d			
Derivative Conversion Security or Exercise (Instr. 3) Price of Derivative Execution (Month/Day/Year) (Month/Day/Year)		3A. Deem Execution if any (Month/Da	n Date,	Date, Transactio		on of		6. Date Exercisable an Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)			8. Price of Derivative Security (Instr. 5)	ive derivative y Securities	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	n: ct (D) direct	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	Amo or Num of Shar	ber					
1. Name and Address of Reporting Person*  TOWERVIEW LLC																			

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

**Explanation of Responses:** 

 Daniel R. Tisch
 07/28/2015

 Daniel R. Tisch
 07/28/2015

 \*\* 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.