FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB Number: 3235-0104 Estimated average burden hours per 0.5 response: 0.5

OMB APPROVAL

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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* <u>Castro-Caratini Fernando</u>	2. Date of E Requiring S (Month/Day 05/02/202	tatement /Year)	3. Issuer Name and Ticker or Trading Symbol SUN COMMUNITIES INC [SUI]					
(Last) (First) (Middle) 27777 FRANKLIN RD. SUITE 200	0513212022		Relationship of Reporting Issuer (Check all applicable) Director	g Person(s 10% C	Fi	If Amendment, Date of Original Filed (Month/Day/Year) Individual or Joint/Group Filing		
(Street) SOUTHFIELD MI 48034			X Officer (give title below) EVP, CFO, Sec.	below)	(specify (C	heck Applicable X Form filed Person	by One Reporting by More than One	
(City) (State) (Zip)								
Table I - Non-Derivative Securities Beneficially Owned								
1. Title of Security (Instr. 4)			. Amount of Securities Beneficially Owned (Instr.	3. Owner Form: I (D) or II (I) (Inst	Direct Owndirect	t. Nature of Indirect Beneficial Ownership (Instr. 5)		
COMMON STOCK, \$0.01 PAR VALUE			18,650	I)			
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)								
1. Title of Derivative Security (Instr. 4) 2. Date Exercisable an Expiration Date (Month/Day/Year)		ate	3. Title and Amount of S Underlying Derivative Se (Instr. 4)		4. Conversion or Exercise	se Form: Direct (D)	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
	Date Exercisable	Expiration Date	Amor or Numi of Share		Price of Derivative Security			

Explanation of Responses:

Remarks:

Fernando Castro-Caratini 05/02/2022

** Signature of Reporting

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 5 (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.