FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
notruction 1/h)

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* SHIFFMAN GARY A						2. Issuer Name and Ticker or Trading Symbol SUN COMMUNITIES INC [SUI]										Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last) (First) (Middle) 27777 FRANKLIN ROAD SUITE 200						3. Date of Earliest Transaction (Month/Day/Year) 03/01/2017									X Officer (give title Other (specify below) Chairman & CEO						
(Street) SOUTHE		MI (Stat	e)	48034 (Zip)		- 4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									Line	Individual or Joint/Group Filing (Check Applicable) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
Date				2. Transac Date (Month/Da		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a 5)				nnd Securities Beneficially Owned Following		es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount		(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
COMMON STOCK, \$0.01 PAR VALUE					03/01/2017					F		1,562	1	D	\$	0	1,233	1,233,952(1)		D	
COMMON STOCK, \$0.01 PAR VALUE 03				03/14/	2017				A		150,000 ⁽²⁾		A	\$	0	1,38	83,952		D		
COMMON STOCK, \$0.01 PAR VALUE																453	,841		I	Shares held by LLC ⁽³⁾	
COMMON STOCK, \$0.01 PAR VALUE																	86,810			I	Owned by irrevocable trust ⁽⁴⁾
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																					
1. Title of Derivative Security (Instr. 3) 2. Conversion Date (Month/Day/Year) (Month/Day/Year) Price of Derivative Security 3. Transaction Date Execution if any (Month/Day/Year)					on Date,	Date, Transact Code (Ins				6. Date Expirat (Month	ion Da		Am Sec Und Der Sec	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		Di Si (II	Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	e O s Fe llly D or	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					(A) (D)			Date Exercisable		Expiration Date	of		umbe hares								

Explanation of Responses:

- 1. Adjusted to reflect direct ownership of 2,475 shares unintentionally omitted from prior Form 4 filings.
- 2. Restricted stock. 75,000 of the shares are subject to time vesting and vest as follows: 15,000 shares vest on March 14, 2020; 22,500 shares vest on March 14, 2021; 26,250 shares vest on March 14, 2022; 7,500 shares vest on March 14, 2023; and 3,750 shares vest on March 14, 2024. 75,000 of the shares are subject to performance vesting based on certain market and financial performance criteria.
- 3. Owned by certain limited liability companies of which the reporting person is a member and a manager.
- 4. Owned by irrevocable trust of which the reporting person is not a trustee.

Remarks:

Gary A. Shiffman

03/15/2017

** Signature of Reporting Person

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.