FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 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

1. 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 Officer (give title Check (specify))					er	
(Last) (First) (Middle) 27777 FRANKLIN ROAD SUITE 200						3. Date of Earliest Transaction (Month/Day/Year) 02/16/2021									X Officer (give title Other (specify below) Chairman & CEO					
(Street) SOUTHFIELD MI 48034					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(Sta		Zip)	D	45	0	-141 4		•			£ F	 f		U- 0	1				
Table I - Non-Derivat 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/You				2A. Deem		med on Date,	3. Tra	3. Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4		d (A) or		5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
								Co	de	v	Amount	(A) or (D)	Price		Reported Transacti (Instr. 3 a	on(s)			(Instr.	4)
COMMON STOCK, \$0.01 PAR VALUE 02/16				02/16/202	21			F	7		2,267	D	\$149	0.69	772,	707]	D		
COMMON STOCK, \$0.01 PAR VALUE														460,	060		I	Own a gra retain annu trust ⁽	ned iity	
COMMON STOCK, \$0.01 PAR VALUE														86,8	310		I		ed by ocable	
COMMON STOCK, \$0.01 PAR VALUE													16,671		I		Owned by spouse			
COMMON STOCK, \$0.01 PAR VALUE													76,000		I		Owned by irrevocable trust. ⁽³⁾			
		Та	ble I	l - Derivati (e.g., pu				•			posed of, convertik				y Owne	d				
Derivative Conversion		3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date,		4. Trans	saction (Instr.		ber 6 Eive ies ed	f 6. Date Exe Expiration (Month/Day		rcisable and Date			8	3. Price of Derivative Security Instr. 5)	9. Numb derivativ Securiti Benefici Owned Followir Reporte Transac (Instr. 4)	tive ties Cornection Cially Direction (I) (In the cially c		hip o B D) O ect (I	1. Nature of Indirect seneficial Ownership Instr. 4)
					Code	v	(A) (I		Date Exerc	isable	Expiration Date	Title	Amou or Numb of Shares	er						

Explanation of Responses:

- 1. Owned by grantor retained annuity trust of which the reporting person is not a trustee. The reporting person is the only beneficiary during the term of the grantor retained annuity trust. At the end of the annuity term, the remaining property in the grantor retained annuity trust will be distributed to a trust for the benefit of the reporting person's spouse and descendants of which the reporting person is not a
- 2. Owned by irrevocable trust of which the reporting person is not a trustee.
- 3. Owned by irrevocable trust of which the reporting person is a trustee and the reporting person's spouse is a beneficiary.

Remarks:

Gary A. Shiffman

02/17/2021

** 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.