Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

| OMB Number: | 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* | | | 2. Issuer Name and Ticker or Trading Symbol <u>SUN COMMUNITIES INC</u> [SUI] | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
|--|----------------------------|----------|---|-----------------------|------------------|---------------------------|--|--------------------------------------|-----------------|----------------|
| Allen Tonya | | | | | | | X | Director | 10% (| Owner |
| (Last) 27777 FRANKI | (First) LIN RD. STE. 20 | (Middle) | | ate of Earliest Trans | action (Month | /Day/Year) | | Officer (give title below) | Other below | (specify /) |
| ·, | | | 4. lf / | Amendment, Date o | of Original File | d (Month/Day/Year) | | vidual or Joint/Grou | p Filing (Check | Applicable |
| (Street) SOUTHFIELD | MI | 48034 | | | | | Line) | Form filed by On Form filed by Mo | | |
| (City) | (State) | (Zip) | | | | | | Person | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | |
| 1. Title of Security | (Instr. 3) | | 2. Transaction | 2A. Deemed | 3. | 4. Securities Acquired (A | | 5. Amount of | 6. Ownership | 7. Nature |

| | Date (Month/Day/Year) | Execution Date, if any (Month/Day/Year) | Transa Code (8) | | Disposed Of (D) (Instr. 5) | | : 3, 4 and | | (D) or Indirect (I) (Instr. 4) | of Indirect Beneficial Ownership (Instr. 4) |
|--------------------------------|--------------------------|---|------------------------|---|-------------------------------|---------------|------------|------------------------------------|-----------------------------------|--|
| | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (11150. 4) |
| COMMON STOCK, \$0.01 PAR VALUE | 02/11/2021 | | A | | 1,509 ⁽¹⁾ | Α | \$147.19 | 1,509 | D | |

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) 1. Title of 3. Transaction 3A. Deemed 5. Number 6. Date Exercisable and 7. Title and 8. Price of 9. Number of 10. 11. Nature Conversion Execution Date. Transaction Derivative Date Ownership Expiration Date Amount of Derivative derivative of Indirect of or Exercise Price of Derivative Security (Instr. 3) (Month/Day/Year) if any (Month/Day/Year) Code (Instr. Derivative (Month/Day/Year) Securities Security (Instr. 5) Securities Form: Direct (D) Beneficial 8) Securities Acquired Ownership (Instr. 4) Underlying Beneficially Derivative Owned or Indirect Security (A) or Disposed Security (Instr. 3 and 4) Following (I) (Instr. 4) Reported of (D) (Instr. 3, 4 Transaction(s) (Instr. 4) and 5) Amount or Number Expiration Date of v Title Code (A) (D) Exercisable Date Shares

Explanation of Responses:

1. Restricted stock. All shares vest on February 11, 2024, provided that the reporting person remains a director of Sun Communities, Inc. or a subsidiary.

Remarks:

| Tonya Allen | 02/12/2021 | | |
|----------------------------------|------------|--|--|
| ** 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.