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**

Vashington,	D.C.	20549	

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL							
OMB Number: 3235-0287							
Estimated average burden							
hours per response: 0.5							

1. Name and Address of Reporting Person* BERGERON STEPHANIE W			2. Issuer Name <b>and</b> Ticker or Trading Symbol SUN COMMUNITIES INC [ SUI ]									5. Relationship of Reporting Person(s) Check all applicable) X Director 100							
(Last) (First) (Middle) 27777 FRANKLIN ROAD					3. Date of Earliest Transaction (Month/Day/Year) 05/04/2021									Λ	Office	Officer (give title below)		10% O Other ( below)	specify
(Street)	00 FIELD M	I 4	8034		4. If <i>i</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)								Indivi ne) X	ividual or Joint/Group Filing (Ch Form filed by One Reporting Form filed by More than One Person			orting Pers	son
(City)	(St	ate) (2	Zip)																
		Table	I - N	on-Deriva	tive S	Secui	rities	Ac	quire	ed, Di	sposed o	f, or E	Benefic	ially	Own	ed			
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Yell)			/ear)   i	Execution Date,		'	3. Transaction Code (Instr. 8)  4. Securities Acq Disposed Of (D)				and 5) Secu Bene		urities F eficially (I ned Following   Ir		wnership n: Direct or rect (I) tr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
						Code	v	Amount	(A) or (D)	Price	Transa		action(s) 3 and 4)		u. → <i>j</i>	(111301.4)			
COMMON STOCK, \$0.01 PAR VALUE 05/0		05/04/202	21			S		2,800	D	\$165.5	5969 2		22,400		D				
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
Derivative Security (Instr. 3) Conversion or Exercise (Price of Derivative Security Security Execution Date, if any (Month/Day/Year)		4. Transa Code ( 8)	(Instr.			Expiration Date (Month/Day/Year)		expiration	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)  Amour or Numbe of Title Shares		nt er		9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			

**Explanation of Responses:** 

Remarks:

Stephanie W. Bergeron

05/05/2021

\*\* 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.