SHIFFMAN GARY A

Form 4

January 07, 2010

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB Number: 3235-0287

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Expires: January 31, 2005
Estimated average

OMB APPROVAL

Form 4 or Form 5 obligations may continue.

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

burden hours per response... 0.5

See Instruction

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person **
SHIFFMAN GARY A

2. Issuer Name **and** Ticker or Trading

SUN COMMUNITIES INC [SUI]

5. Relationship of Reporting Person(s) to Issuer

Symbol

(Last)

(Middle)

3. Date of Earliest Transaction

(Check all applicable)

27777 FRANKLIN ROAD, SUITE

(Street)

(First)

200

5. Date of Earliest Transaction

(Month/Day/Year) 01/06/2010

__X__ Director __X__ 10% Owner __X__ Officer (give title ____ Other (specify below)

200

Chairman, President, & CEO

4. If Amendment, Date Original

6. Individual or Joint/Group Filing(Check

Filed(Month/Day/Year)

Applicable Line)

X Form filed by One Reporting Person ___ Form filed by More than One Reporting

Person

SOUTHFIELD, MI 48034

(City)	(State)	(Zip) Tabl	e I - Non-D) Perivative	Secui	ities Ac	quired, Disposed	of, or Benefici	ally Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired on(A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code V	Amount		Price	(Instr. 3 and 4)		
Common Stock, \$.01 par value	01/06/2010		S	70	A	\$ 20.5	891,263	D	
Common Stock, \$.01 par value	01/06/2010		S	300	A	\$ 20.5	890,963	D	
Common Stock, \$.01 par value	01/06/2010		S	30	A	\$ 20.5	890,933	D	
Common Stock, \$.01							453,841	I	Owned by certain

par value

limited liability companies of which the reporting person is a member and a manager

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

SEC 1474 (9-02)

9. Nu

Deriv

Secu

Bene Own Follo Repo Trans (Instr

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

Derivative Conversion (Month/Day/Year) Execution Date, if TransactionNumber Expiration Date Amount of	Derivative
Derivative Conversion (Month/Day/ Tear) Execution Date, if Transaction valued Expiration Date Amount of	α
Security or Exercise any Code of (Month/Day/Year) Underlying	Security
(Instr. 3) Price of (Month/Day/Year) (Instr. 8) Derivative Securities	(Instr. 5)
Derivative Securities (Instr. 3 and 4)	
Security Acquired	
(A) or	
Disposed	
of (D)	
(Instr. 3,	
4, and 5)	
Amount	
Amount	
Date Expiration or Title Number	
Exercisable Date	
Code V (A) (D) Shares	

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

SHIFFMAN GARY A 27777 FRANKLIN ROAD SUITE 200

X Chairman, President, & CEO

SOUTHFIELD, MI 48034

Signatures

Gary A. 01/07/2010 Shiffman

**Signature of Date
Reporting Person

Reporting Owners 2

Edgar Filing: SHIFFMAN GARY A - Form 4

Explanation of Responses:

- * 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. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.