Edgar Filing: SHIFFMAN GARY A - Form 4

SHIFFMAN Form 4											
January 06, 2	ПЛ	STATES	SECU	RITIES A	AND EX	CHA	ANGE (COMMISSION		APPROVAL	
<i>a</i>			Wa	shington,	, D.C. 20	0549			Number:	3235-0287	
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). Set in 16. Filed pursuant to Section Section 17(a) of the Public 1 30(h) of the 1				SECUR 6(a) of th tility Hole	RITIES le Securi ding Cor	January 31 2005 Estimated average burden hours per response 0.5					
(Print or Type]	Responses)										
SHIFFMAN GARY A Symbol			er Name and Ticker or Trading COMMUNITIES INC [SUI]				5. Relationship of Reporting Person(s) to Issuer				
(Last)	(First) (I	Middle)		f Earliest Ti		-	-	(Cheo	ck all applicab	le)	
				onth/Day/Year) /05/2010				_X_ Director _X_ 10% Owner _X_ Officer (give title Other (specify below) below) Chairman, President, & CEO			
SOUTHFIE	(Street) ELD, MI 48034			endment, Da nth/Day/Year	-	al		6. Individual or J Applicable Line) _X_ Form filed by Form filed by M Person	One Reporting I	Person	
(City)	(State)	(Zip)	Tab	le I - Non-I	Derivative	Secu	rities Acc	uired, Disposed o	f. or Beneficia	ally Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	n Date 2A. Deemed			3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or				6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect	
Common Stock, \$.01 par value	01/05/2010			Code V S	Amount 300	(D) D	Price \$ 19.95	(Instr. 3 and 4) 896,743	D		
Common Stock, \$.01 par value	01/05/2010			S	300	D	\$ 20	896,443	D		
Common Stock, \$.01 par value	01/05/2010			S	100	D	\$ 20.02	896,343	D		
Common Stock, \$.01	01/05/2010			S	100	D	\$ 20.02	896,243	D		

par value										
Common Stock, \$.01 01/05/2 par value	010	S	300	D $\frac{$}{20.0}$	895,943	3 D				
Common Stock, \$.01 par value					453,84	l I		Owned certai limite liabili comp of wh the repor perso memil and a mana	in ed ity panies nich ting on is a ber	
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02) required to respond unless the form displays a currently valid OMB control number.										
			numbe	er.						
	Table II - Derivative S (e.g., puts, ca	ecurities Acq Ills, warrants	uired, Disp	oosed of, oi		Owned				
1. Title of 2. Derivative Conversion Security or Exercise (Instr. 3) Price of Derivative Security	(<i>e.g.</i> , puts , c 3. Transaction Date 3A. D (Month/Day/Year) Exect any	alls, warrants	uired, Disp	5 . of Number of	6. Date Exer Expiration D (Month/Day,	cisable and ate	7. Title Amoun Underl Securi (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
Derivative Conversion Security or Exercise (Instr. 3) Price of Derivative	(<i>e.g.</i> , puts , c 3. Transaction Date 3A. D (Month/Day/Year) Exect any	alls, warrants eemed tion Date, if	4. Transactic Code (Instr. 8)	5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5	6. Date Exer Expiration D (Month/Day,	cisable and ate	Amour Under Securi (Instr.	nt of lying ties	Derivative Security	Deriv Secur Bene Owne Follo Repo Trans

Reporting Owner Name / Address	Relationships						
1 0	Director	10% Owner	Officer	Other			
SHIFFMAN GARY A 27777 FRANKLIN ROAD SUITE 200	Х	Х	Chairman, President, & CEO				

n 1

SOUTHFIELD, MI 48034

Signatures

Gary A. Shiffman

01/06/2010

<u>**</u>Signature of Reporting Person Date

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.