FORM 4

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

OMB APPROVAL
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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 OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Print or Ty	pe Response	es)																	
1. Name and Address of Reporting Person * KOSKI CHRISTINE L						2. Issuer Name and Ticker or Trading Symbol SUN HYDRAULICS CORP [SNHY]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner					
(Last) (First) (Middle) 1500 WEST UNIVERSITY PARKWAY						3. Date of Earliest Transaction (Month/Day/Year) 12/09/2014								Officer (give title below) Other (specify below)					
(Street) SARASOTA, FL 34243						4. If Amendment, Date Original Filed(Month/Day/Year)								6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person X Form filed by More than One Reporting Person					
(City		(State)		(Zip)				Tabl	ie I -	Nor	ı-Deriva	tive Se	curities	Acqu	ired, Disp	osed of, or l	Beneficially (Owned	
1.Title of Security (Instr. 3)		Date (Month/Day/Year) Exec		Executany	Deemed cution Date, if nth/Day/Year)		3. Transaction Code			cquired d of	5. An Bene: Follo Trans	nount of Securities ficially Owned wing Reported saction(s) . 3 and 4)		6.	7. Nature of I Beneficial Ov (Instr. 4)				
								Cod	le	V	Amount	or (D)	Price			(Instr. 4)			
Common	Stock		12/09/201	14				A			625	A	\$ 40.16	353,	304		D (1)		
Common	Stock													2,32	8,493		D (2)		
Common	Stock													360,	983.427		D (3)		
Common Stock													16,0	000		_	BY KOSKI MANAGEMENT, INC.		
Common	Stock													436,	434		D (5)		
Common	Stock													160,	000		I (6)	BY WIFE	
Common	Stock													218,	988		D (7)		
Reminder:	Report on a	separate	line for each	h class o	f secur	rities bei	neficia	ally o	wned	l dire	ectly or								
											contair	ned in	this fo	rm aı	e not req		formation espond unle ntrol numbe	ss	1474 (9- 02)
				Table							ed, Dispo				illy Owned	l			
1. Title of Derivative Security (Instr. 3)	Conversion Date		Transaction e 3A. Deemed Execution Da any			4. 5. Numb of			vative rities pired or osed o)	r 6. Date Exercisable and Expiration Date (Month/Day/Year) S. (I			Am Uno Sec	Title and Security (Instr. 5) Title and Derivative Security (Instr. 5)		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Ownership Form of Derivative Security: Direct (D) or Indirect	Beneficial Ownership (Instr. 4)	
							Code	V	(A)	(D)	Date Exercis		Expiratio Date	on Titl	Amount or e Number of Shares				

Reporting Owners

Burnella Communication (Addison	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
KOSKI CHRISTINE L 1500 WEST UNIVERSITY PARKWAY SARASOTA, FL 34243	X	X					
KOSKI BEVERLY		X					
KOSKI FAMILY LP		X					

KOSKI ROBERT C	X	
KOSKI THOMAS L	X	

Signatures

Gregory C. Yadley, as Attorney-in-Fact for CHRISTINE L. KOSKI, BEVERLY KOSKI, KOSKI FAMILY LIMITED							
PARTNERSHIP, ROBERT C. KOSKI AND THOMAS L. KOSKI							
**Signature of Reporting Person							

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).
- (1) Shares owned directly by Christine L. Koski.
- (2) Shares owned directly by Koski Family Limited Partnership. Shares owned indirectly by Beverly Koski, Christine L. Koski, Robert C. Koski and Thomas L. Koski, each of whom is a general partner of the partnership or the controlling person of a corporate general partner of the partnership.
- (3) Shares owned directly by Beverly Koski.
- (4) Shares owned indirectly by Beverly Koski.
- (5) Shares owned directly by Thomas L. Koski.
- (6) Shares owned indirectly by Thomas L. Koski.
- (7) Shares owned directly by Robert C. Koski.

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.