FORM 4

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

OMB APPROVAL									
OMB Number:	3235-0	287							
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nours per response									

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)																			
Name and Address of Reporting Person * Fulton Tricia L				2. Issuer Name and Ticker or Trading Symbol SUN HYDRAULICS CORP [SNHY]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner								
	(Last) (First) (Middle) 1500 WEST UNIVERSITY PARKWAY					3. Date of Earliest Transaction (Month/Day/Year) 05/03/2017								Director 10% Owner X Officer (give title below) Other (specify below) Chief Financial Officer							
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year)								ar)	6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person								
SARASC	OTA, FL 34	243												-	Form file	d by More than	One Reporting	Person			
(City	")	(State)	(Zip)			Tal	ble I -	Non-	Deri	vative S	ecuritie	es A	cquir	ed, Dispo	osed of, or l	Beneficially	Owned			
1.Title of Security (Instr. 3)		2. Transact Date (Month/Da	nnsaction th/Day/Year)		Deemed ution Date, if th/Day/Year)		Cod (Inst	e	etion	4. Securities Acquire (A) or Disposed of ((Instr. 3, 4 and 5)			f (D) Beneficia		unt of Securities ially Owned Following d Transaction(s) and 4)		6. Ownersh Form: Direct (I	ip of Be	Nature Indirect eneficial wnership		
							Code		v	Amoun	(A) or t (D)		or Indirect (Instr. 4)				nstr. 4)				
Common	Stock		05/03/201	17				S	(1)		2,000	D	\$ 39.	.75	59,210.5	5174		D			
Common	Common Stock														5,384.88	34	I (2)		Y SOP RUST		
Reminder: indirectly.	Report on a	separate line fo	or each clas	s of secu	ırities	beneficia	lly	owned		•									ana	1454 (2)	
										cont	ained i	n this f	orm	n are	not req	uired to re	formation spond unl itrol numb		SEC	1474 (9- 02)	
			Tal			tive Secu uts, calls,									ly Owned						
1. Title of	2.	3. Transaction	3A. I	Deemed	8, P	4.	,				ate Exe				tle and	8. Price of	9. Number	of 10.		11. Nature	
Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative Security	Date (Month/Day/Y	(ear) any		ĺ					and Expiration (Month/Day/Y				Amount of Underlying Securities (Instr. 3 and 4)		Derivative Security (Instr. 5)	Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Form of Derivation Security Direct (or Indirect	of rative rity: t (D) lirect	of Indirect Beneficial Ownership (Instr. 4)	
						Code	V	(A)	(A) (D)		e rcisable	Expirati Date	ion	Title	Amount or Number of Shares						
Repor	ting O	wners																			
							Rel	lation	ships												
Reporting Owner Name / Address Director			Or 10% Owner Officer				C		er												
Fulton Tricia L 1500 WEST UNIVERSITY PARKWAY SARASOTA, FL 34243			Chief Financia				ncia	l Officer													
Signa	tures																				

05/04/2017

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

Gregory C. Yadley, as Attorney-in-Fact for TRICIA L. FULTON

Signature of Reporting Person

- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- $\textbf{(1)} \ \ Sales \ were \ effected \ pursuant \ to \ a \ Rule \ 10b5-1 \ trading \ plan \ adopted \ by \ the \ reporting \ person \ on \ March \ 31, \ 2017.$
- (2) Reflects allocations of shares under the Sun Hydraulics Corporation Employee Stock Ownership Plan.

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.