FORM 4

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

OMB APPROVAL						
OMB Number: 3235-0287						
Estimated average burden nours per response 0.5						
ours 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 Typ	pe Response	es)												
1. Name and Address of Reporting Person *- KOSKI ROBERT E			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					
1500 WEST UNIVERSITY PARKWAY				3. Date of Earliest Transaction (Month/Day/Year) 12/08/2007					Office	er (give title belo		Other (specify	y 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)	Tal	hle I - Nor	-Der	ivative S	ecuritie	s Acan	ired Disn	osed of, or	Reneficially	Owned	
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year)		2A. Deemed 3. Tran Execution Date, if Code		saction 4. Securities Acquired (A) or Disposed of (D		quired of (D)	d 5. Amount of Securities			6.	7. Nature p of Indirect Beneficial Ownership			
				(monus Buj, rous)	Code	v	Amount	(A) or (D)	Price	(IIISU, 3 and 4)			or Indirec (I) (Instr. 4)	
Common	Stock		12/08/2007		A		83	1 ^	\$ 30.09	146,826	146,826		D (1)	
Common	Stock									60,364			D (2)	
Common	Stock									4,350,40	350,463		D (3)	
Common	Stock									211,824	1,824		D (4)	
Common	Stock									634			I (5)	BY ESOP TRUST
Reminder: Findirectly.	Report on a	separate line t	for each class of secu	urities beneficially	owned dire	ectly o	or							
						con	tained ir	n this fo	orm ar	e not req	ection of ir juired to re d OMB cor	spond un	less	SEC 1474 (9- 02)
				Derivative Securiti e.g., puts, calls, wa							i			
(Instr. 3)	Conversion	3. Transaction Date (Month/Day/	on 3A. Deemed Execution Day (Year)	~		r 6. E and e (Mo	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. T Am Und Sec	Title and mount of inderlying ecurities astr. 3 and	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Owner Form of Deriva Securi Direct or Indi	Ownershi tty: (Instr. 4) (D) irect
				Code V			e ercisable	Expirati Date	on Titl	Amount or e Number of				

Reporting Owners

Relationships					
Director	10% Owner	Officer	Other		
X	X				
	X				
	X				
X	X				
	X	Director 10% Owner X X X	Director 10% Owner Officer X X X X X		

KOSKI ROBERT C	X	
KOSKI THOMAS L	X	

Signatures

Paul R. Lynch, as Attorney-in-Fact for ROBERT E. KOSKI, BEVERLY KOSKI, KOSKI FAMILY LIMITED			
PARTNERSHIP, CHRISTINE L. KOSKI, ROBERT C. KOSKI AND THOMAS L. KOSKI			
**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).
- (1) Shares owned directly and solely by Christine L. Koski.
- (2) Shares owned directly by Robert E. Koski and indirectly by Beverly Koski, Robert E. Koskis spouse.
- (3) Shares owned directly by Koski Family Limited Partnership. Shares owned indirectly by Robert E. Koski, 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.
- (4) Shares owned directly by Beverly Koski and indirectly by Robert E. Koski, Beverly Koskis spouse.
- (5) Reflects allocations of shares to Robert E. Koski 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.