FORM 4

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

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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	s)																
	1. 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) 500 WEST UNIVERSITY PARKWAY						3. Date of Earliest Transaction (Month/Day/Year) 10/09/2009						X Officer (give title below) Other (specify below) Chief Financial Officer					
(Street) SARASOTA, FL 34243					4. If Amendment, Date Original Filed(Month/Day/Year)							r)	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person					
	(City) (State) (Zip)					Table I - Non-Derivative Securities Aco							acquired, Disposed of, or Beneficially Owned					
(Instr. 3) Date		2. Transact Date (Month/Da	y/Year)	2A. Deemed Execution Date, if		if	Code (Instr. 8)		4. Securities Acqu (A) or Disposed or (Instr. 3, 4 and 5)		quired of (D)	5. Amount of Securit Beneficially Owned Reported Transaction (Instr. 3 and 4)		ies Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common	Stock		10/09/200)9				A		3,025	A	\$ 21.07	12,276.3	3432 (1)		D		
Common Stock												1,364.85	1,364.854			BY ESOP TRUST		
1. Title of Derivative Security or Exercise (Month/Day/Year) (Month/Day/Year)			Persons who respondent contained in this for						orm ai a curre eneficia urities 7. T Am Une Sec (Ins 4)	7. Title and Amount of Underlying Securities (Instr. 3 and 4) Amount of Underlying Security Security (Instr. 5) Amount or Title Number 8. Price of 9. Number of Derivative Securities (Ownership Form of 19. Derivative Securities (Instr. 5) 9. Number of Derivative Securities Securities (Instr. 5) 9. Number of Derivative Securities Securities (Instr. 4) Nemount or Title Number (Instr. 4) 9. Number of Derivative Securities (Instr. 4) Number of Ownership of Derivative Owned Security: (Instr. 4) Number of Instr. 4 Number of Ownership of Ownership of Instr. 4 Ownership of Instr. 4 Ownership of Ownership of Instr. 4 Ownership of In								
						Code V	V ((A) (D)					of Shares					
Repor	ting O	wners																
Reporting Owner Name / Address				Relationships or 10% Owner Officer				Cul										
Fulton Tricia L 1500 WEST UNIVERSITY PARKWAY SARASOTA, FL 34243				or 10	WHET	Chief Finar			ıl Office	Othe	er .							
Signat	tures																	

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).
 Includes 75.468341 shares purchased through the Sun Hydraulics Corporation Employee Stock Purchase Plan during the quarter ended December 27, 2008; 91.802552
 (1) shares purchased through the Sun Hydraulics Corporation Employee Stock Purchase Plan during the quarter ended March 28, 2009; 91.067706 shares purchased through

10/13/2009

the Sun Hydraulics Corporation Employee Stock Purchase Plan during the quarter ended June 27, 2009, and 74.404591 shares purchased through the Sun Hydraulics Corporation Employee Stock Purchase Plan during the quarter ended September 26, 2009.

(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.