FORM 4

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

OMB APPROVAL									
OMB Number:	3235-0287								
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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

(Fillit of 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) 1500 WEST UNIVERSITY PARKWAY					3. Date of Earliest Transaction (Month/Day/Year) 05/03/2013							X Officer (give title below) Other (specify below) Chief Financial Officer					
(Street)					4. If Amendment, Date Original Filed(Month/Day/Year)							6. Individual or Joint/Group Filing(Check Applicable Line) X. Form filed by One Reporting Person					
SARASOTA, FL 34243												Form filed by More than One Reporting Person					
(City))	Table I - Non-Derivative Securities Acqu							quired, Disposed of, or Beneficially Owned								
1.Title of Security (Instr. 3)		2. Transac Date (Month/D	ay/Year)	2A. Deemed Execution Date any (Month/Day/Ye		e, if Code (Instr. 8)		(A) or D		of	ed 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		Following (s)	6. Ownership Form: Direct (D) or Indirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
							Code	v	Amount	(A) or (D)	Price				(I) (Instr. 4)		
Common	Stock		05/03/20	13			S ⁽¹⁾		500	D	\$ 34	30,657.1	177 (2)		D		
Common Stock											3,365.338			I (3)	BY ESOP TRUST		
Reminder: indirectly.	Report on a	separate line fo	r each clas	ss of secur	rities beneficia	ılly o	I	Pers	ons who	this fo	rm ar	e not req	uired to re	formation espond unl etrol numb	ess	EC 1474 (9- 02)	
			Tal		erivative Secu								l				
1. Title of	2	3. Transaction	3Δ 1	(e. Deemed	g., puts, calls		rrants, opt 5. Number					itle and	8 Price of	9. Number o	of 10.	11. Nature	
Derivative Security	Conversion		Year) Exe	ution Dat		if Transaction Code		and Expiration (Month/Day/Y		n Date	Am Und Sec	dount of derlying urities str. 3 and	Derivative Security (Instr. 5)	Derivative Securities Beneficially Owned Following Reported Transactior (Instr. 4)	Owners: Form of Derivati Security Direct (1) or Indire	hip of Indirect Beneficial Ownership (Instr. 4)	
					Code	V	(A) (D)	Date Exe	e I rcisable I	Expiratio Date	n Titl	Amount or e Number of Shares					
Repor	ting O	wners															
Reporting Owner Name / Address					Relationships												
Direct				Director	r 10% Owner	er Officer				Other							
Fulton Tricia L 1500 WEST UNIVERSITY PARKWAY SARASOTA, FL 34243					C	Chief Financial Officer			r								

Explanation of Responses:

Signatures

* 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).
- $\textbf{(1)} \ \ Sales \ were \ \ effected \ pursuant \ to \ a \ Rule \ 10b5-1 \ \ trading \ plan \ adopted \ by \ the \ reporting \ person \ on \ March \ 28, \ 2013.$
- (2) Includes shares purchased through the Sun Hydraulics Corporation Employee Stock Purchase Plan (191.4774 during the quarter ended December 29, 2012, and 119.7098 during the quarter ended March 30, 2013).

05/07/2013

Date

(3) 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.