FORM 4

Check this box if no
longer subject to
Section 16. Form 4 or
Form 5 obligations
may continue. See
Instruction 1(b).

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

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response... 0.5

SEC 1474 (9-

02)

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 Type Respon	ises)										
1. Name and Address Fulton Tricia L	2. Issuer Name an SUN HYDRAU			0,		5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
1500 WEST UNIV	3. Date of Earliest Transaction (Month/Day/Year) 03/06/2018						X Officer (give title below) Other (specify below) Chief Financial Officer				
SARASOTA, FL	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 Form filed by More than One Reporting Person				
(City)	(State)	(Zip)	Tabl	Owned							
1.Title of Security (Instr. 3)		Date (Month/Day/Year)	Execution Date, if	Code (Instr. 8)		n 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		d of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	Ownership o Form: E Direct (D) O	7. Nature of Indirect Beneficial Ownership
				Code	v	Amount	(A) or (D) Price			or Indirect (I) (Instr. 4)	(Instr. 4)
Common Stock		03/06/2018		А		13,200 (1)	А	\$ 53.81	69,874.1809	D	
Common Stock									5,384.484	I <u>(2)</u>	BY ESOP TRUST

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(<i>e.g.</i> , puts, calls, warrants, options, convertible securities)															
1. Title of	2.	3. Transaction	3A. Deemed	4.	5	5. Nu	mber	6. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transactio	n o	of and		and Expiration Date		Amo	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code	Γ	Deriva	ative	(Month/Day	(Month/Day/Year)		rlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	S	Securi	ities			Securities		(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative				P	Acqui	red				. 3 and		Owned	Security:	(Instr. 4)
	Security				(.	A) or				4)			Following	Direct (D)	
						Dispo		ed					· F · · · · ·	or Indirect	
						of (D)							Transaction(s)	(I)	
					~	Instr.	· · ·						(Instr. 4)	(Instr. 4)	
					4	l, and	5)								
											Amount				
								Date	Expiration		or				
								Exercisable Date		Title Number					
											of				
				Code V	/ ((A)	(D)				Shares				

Reporting Owners

	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Fulton Tricia L 1500 WEST UNIVERSITY PARKWAY SARASOTA, FL 34243			Chief Financial Officer					

Signatures

Gregory C. Yadley, as Attorney-in-Fact for TRICIA L. FULTON	03/08/2018
	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) Includes shares purchased through the Sun Hydraulics Corporation Employee Stock Purchase Plan (242.7286 during the quarter ended July 1, 2017; 178.1558 during the quarter ended September 30, 2017, and 42.7791 during the quarter ended December 30, 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.