## FORM 4

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

OMB APPROVAL									
DMB Number:	3235-0287								
stimated average burden									
ours per respon	se 0.5								

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 * Roser Craig				2. Issuer Name and Ticker or Trading Symbol SUN HYDRAULICS CORP [SNHY]      3. Date of Earliest Transaction (Month/Day/Year) 03/06/2018								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director X Officer (give title below) OFFICER  OTHER						
(Last) (First) (Middle) 1500 WEST UNIVERSITY PARKWAY																		
(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) (State) (Zip)					Table I - Non-Derivative Securities Acqu									ired, Disp	osed of, or l	Beneficially	Owned	
1.Title of Security (Instr. 3)		2. Transact Date (Month/Da	ey/Year) Exe				f Code (Instr. 8)			A. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			Beneficially Owned Following Reported Transaction(s)			6. Ownership Form:	Beneficial	
				(Mon	Ionth/Day/Year	ear)	Code		V	(A) or Amount (D)		Price	or (I)			Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
Common	Stock		03/06/201	18				A			5,000	A	\$ 53.81	19,479.	175 (1)		D	
Common Stock													319.544	19.544 <sup>(2)</sup>		I	BY ESOP TRUST	
Reminder: indirectly.	Report on a	separate line fo	or each clas	s of secu	ırities	beneficial	lly o	wned	ļ	Perso	ons wh				ection of in			EC 1474 (9- 02)
			Tal			ntive Secur			uire	d, Dis	posed	of, or Be	eneficia	ally Owned	d OMB cor	ntrol numb	er.	
1. Title of Derivative Security (Instr. 3)	Conversion	3. Transaction Date (Month/Day/\footnote{\text{Month/Day/\footnote{\text{V}}}}	Exec Year) any	Deemed	ate, if	4. Transaction Code ar) (Instr. 8)		5. Number of		6. Da and I	tte Exercisable Expiration Date tth/Day/Year)		7. Te Am Und Sec	Citle and abount of derlying urities str. 3 and	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owners Form of Derivati Security Direct ( or Indire	Ownershi y: (Instr. 4) (D) ect
						Code	V	(A)	(D)	Date Exp Exercisable Date		Expirati Date	on Tit	Amount or le Number of Shares				
Repor	ting O	wners																
						Relation	nshi	ips										
Reporting Owner Name / Address Director			or 10	% Owner	O	fficer		Oth	er									
Roser Craig 1500 WEST UNIVERSITY PARKWAY SARASOTA, FL 34243					С	FFIC	CER											
Signa	tures																	

## **Explanation of Responses:**

Gregory C. Yadley, as Attorney-in-Fact for Craig Roser

\*\*Signature of Reporting Person

- \* 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 (208.7266 during the quarter ended April 1, 2017; 13.5188 during the quarter ended July 1, 2017, 11.9585 during the quarter ended September 30, 2017, and 9.476 during the quarter ended December 30, 2017).

03/08/2018

(2) Reflects allocations of shares under the Sun Hydraulics Corporation Employee Stock Ownership Plan.

 $Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, {\it see}\ Instruction\ 6 for procedure.$ 

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.