

KOSKI ROBERT E
Form 4
March 20, 2006

FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

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)

(Last) (First) (Middle)

3. Date of Earliest Transaction (Month/Day/Year)
03/16/2006

Director 10% Owner
 Officer (give title below) Other (specify below)

1500 WEST UNIVERSITY PARKWAY

(Street)

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)

Form filed by One Reporting Person
 Form filed by More than One Reporting Person

SARASOTA, FL 34243

(City) (State) (Zip)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Ownership (Instr. 4)
			Code	V	Amount	(D)			
Common Stock	03/16/2006		S		10,000	D	\$ 26 3,070,309	D ⁽¹⁾	
Common Stock							100,000	D ⁽²⁾	
Common Stock							141,216	D ⁽³⁾	
Common Stock							97,316	D ⁽⁴⁾	
Common Stock							340	I ⁽⁵⁾	BY ESOP TRUST

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

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(9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
(e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Owned Following Transaction (Instr. 3 and 4)
				Code	V (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
KOSKI ROBERT E 1500 WEST UNIVERSITY PARKWAY SARASOTA, FL 34243	X	X		
KOSKI BEVERLY		X		
KOSKI FAMILY LP		X		
KOSKI CHRISTINE L	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

03/20/2006

__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).
- 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.
- (1) Shares owned directly by Robert E. Koski and indirectly by Beverly Koski, Robert E. Koski's spouse.
 - (2) Shares owned directly by Beverly Koski and indirectly by Robert E. Koski, Beverly Koski's spouse.
 - (3) Shares owned directly and solely by Christine L. Koski.
 - (4) 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.