FORM 4

obligations may continue. See

Instruction 1(b)

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* <u>Thomson Michael M</u>				2. Issuer Name and Ticker or Trading Symbol UNISYS CORP [UIS]								(Ch	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify					
	ast) (First) (Middle) 01 LAKEVIEW DRIVE UITE 100						3. Date of Earliest Transaction (Month/Day/Year) 12/02/2015							X Officer (give title Other (specify below) below) VP and Corporate Controller				
(Street) BLUE B (City)			19422 (Zip)		4. If Amendment, Date of Original Filed (Month/Day/Year)						Lin	Individual or Joint/Group Filing (Check Applicable le) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
		Tah	le I - Non	-Deriva	ative	Sec	uritie	s Ac	quired, Di	isno	nsed o	of or Re	neficial	lly Owner	1			
1. Title of Security (Instr. 3) 2. Transa Date (Month/D.			2A. Deemed Execution Date,		3. Transaction	3. 4. Securities Transaction Code (Instr. 5)		ities Acquired (A) or d Of (D) (Instr. 3, 4 ar		5. Amou Securitie Benefici Owned I	nt of es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership				
					Code V	-	Amount	(A) or (D) Price		Reporte Transac (Instr. 3	action(s)			(Instr. 4)				
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)	Title of 2. 3. Transaction Date Execution Date, or Exercise (Month/Day/Year)		Date, T	Transaction of Ex Code (Instr. Derivative (N			6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Ownership Form:	Beneficial Ownership t (Instr. 4)			
				c	code \	v	(A)		Date Exercisable	Expi Date	iration e	Title	Amount or Number of Shares					
Restricted Stock Units ⁽¹⁾	\$0	12/02/2015			A		2,000		(2)		(3)	Common Stock	2,000	\$0	2,000)	D	
Stock Option (Right to	\$13.345	12/02/2015			A		4,000		(4)	12/0	02/2022	Common Stock	4,000	\$0	4,000		D	

Explanation of Responses:

- 1. Each restricted stock unit represents a contingent right to receive one share of Unisys Corporation common stock.
- 2. Time-based restricted stock units granted under the Unisys Corporation 2003 Long-Term Incentive and Equity Compensation Plan. The restricted stock units vest in three annual installments beginning
- 3. Time-based restricted stock units granted under the Unisys Corporation 2003 Long-Term Incentive and Equity Compensation Plan. The restricted stock units vest in three annual installments beginning December 2, 2016.
- 4. Stock option granted under the terms and provisions of the Unisys Corporation 2003 Long-Term Incentive and Equity Compensation Plan. The stock option is exercisable in three annual installments beginning December 2, 2015.

/s/ Susan B. Asch, attorney-in-

12/03/2015

** Signature of Reporting Person

Date

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

- * 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).

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

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 Number.