FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF **SECURITIES**

OMB APPROVAL								
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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*  Gupta Shalabh  2. Date of Event Requiring Statement (Month/Day/Year) 08/14/2017			nent	3. Issuer Name <b>and</b> Ticker or Trading Symbol <u>UNISYS CORP</u> [ UIS ]							
(Last) 801 LAKEVI	(First) EW DRIVE	(Middle)			Relationship of Reporting Per (Check all applicable)     Director		10% Own	er	5. If Amendment, Date of Original Filed (Month/Day/Year)		
SUITE 100					X	Officer (give title below)  Vice President and 7	Other (sp below)	есіту	6. Individual or Joint/Group Filing (Check Applicable Line)		
(Street) BLUE BELL	PA	19422				vice Fresident and .	rreasurer		X		y One Reporting Person y More than One erson
(City)	(State)	(Zip)									
Table I - Non-Derivative Securities Beneficially Owned											
					ınt of Securities ially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		4. Nature of Indirect Beneficial Ownership (Instr. 5)			
No Securities Owned					0	D					
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)											
1. Title of Derivative Security (Instr. 4)  2. Date Exercisable a Expiration Date (Month/Day/Year)		ate	nd 3. Title and Amount of Securit Underlying Derivative Securit				rcise Form:		6. Nature of Indirect Beneficial Ownership (Instr. 5)		
			Date Exercisable	Expiratio Date	n Title	2	Amount or Number of Shares	Deriva Securi	tive	Direct (D) or Indirect (I) (Instr. 5)	

**Explanation of Responses:** 

/s/ Felicia D. Garnett, attorneyin-fact for Shalabh Gupta

\*\* Signature of Reporting Person

Date

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

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.

<sup>\*</sup> If the form is filed by more than one reporting person, see Instruction 5 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).