Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

| Washington, | D.C. 20549 |
|-------------|------------|
|-------------|------------|

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL             |           |  |  |  |  |  |  |  |  |
|--------------------------|-----------|--|--|--|--|--|--|--|--|
| OMB Number:              | 3235-0287 |  |  |  |  |  |  |  |  |
| 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*  KRITZMACHER JOHN A  |  |         |         |   | 2. Issuer Name and Ticker or Trading Symbol UNISYS CORP [ UIS ] |                         |                           |   |                  |      |  |   |                                 |   | ck all app   | tor  | ng Per  | 10% O   | wner    |
|---|--|---------|---------|---|---|-------------------------|---------------------------|---|------------------|------|--|---|---------------------------------|---|--|--|---|---|---------|
| (Last)  | (Fir   | st) (M  | Middle) |   | 3. Date of Earliest Transaction (Month/Day/Year) 02/28/2023     |                         |                           |   |                  |      |  |   |                                 |   |  | Officer (give title below)                                     |   | Other (<br>below)   | specify |
| 801 LAKEVIEW DRIVE  |  |         |         |   | 4. If Amendment, Date of Original Filed (Month/Day/Year)        |                         |                           |   |                  |      |  | 6. Individual or Joint/Group Filing (Check Applicable Line) |                                 |   |  |  |   |   |         |
| (Street) BLUE B   | ELL PA   | . 1     | 9422    |   |   |                         |                           |   |                  |      |  |   | 1 1                             | X Form filed by One Reporting Person Form filed by More than One Reporting Person |  |  |   |   |         |
| (City)  | (St  | ate) (Ž | Zip)    |   |   |                         |                           |   |                  |      |  |   |                                 |   |  |  |   |   |         |
|   |  | Table   | I - Noi | n-Deriva                                | tive S  | Secu                    | rities                    | Acq                                     | uired,           | Dis  | posed of   | , or E  | 3ene                            | ficial  | ly Own   | ed   |   |   |         |
| 1. Title of Security (Instr. 3)  2. Transac Date (Month/Date) |  |         |         |   | Execution Date  |                         | Date,                     | 3.<br>Transaction<br>Code (Instr.<br>8) |                  |      |  |   | , 4 and Secur<br>Benef          |   | cially<br>Following  | Form<br>(D) o  | vnership<br>n: Direct<br>r Indirect<br>nstr. 4) | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |         |
|   |  |         |         |   | Code  | v                       | Amount                    | (A)<br>(D)                              | or F             | rice | Transa   | ction(s)<br>3 and 4)  |                                 |   | (111341. 4)  |  |   |   |         |
| Common Stock 02/28/2  |  |         |         | 2023                                    |   | <b>A</b> <sup>(1)</sup> |                           | 46,854                                  | A .              |      | \$ <mark>0</mark>  | 46,854  |                                 |   | D  |  |   |   |         |
|   | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |         |         |   |   |                         |                           |   |                  |      |  |   |                                 |   |  |  |   |   |         |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)           | vative Conversion Date Execution Date, urity or Exercise (Month/Day/Year) if any   |         |         | 4.<br>Transaction<br>Code (Instr.<br>8) |   | of<br>Deriv             | r<br>osed<br>)<br>r. 3, 4 | Expiration Da<br>(Month/Day/Y           |                  | te   | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>Security (Ins<br>3 and 4) |   | str.                            | . Price of<br>lerivative<br>ecurity<br>nstr. 5)                                   | 9. Number<br>derivative<br>Securities<br>Beneficiall<br>Owned<br>Following<br>Reported<br>Transactio<br>(Instr. 4) | Ownershi<br>Form:<br>Direct (D)<br>or Indirec<br>(I) (Instr. 4 | Ownership<br>Form:                              | Beneficial<br>Ownership<br>(Instr. 4)                             |         |
|   |  |         |         |   | Code  | v                       | (A)                       | (D)                                     | Date<br>Exercisa | able | Expiration<br>Date   | Title   | or<br>Numb<br>of<br>Title Share |   |  |  |   |   |         |

## **Explanation of Responses:**

1. Restricted stock units granted under the Unisys Corporation 2019 Long-Term Incentive and Equity Compensation Plan. The restricted stock units vested 100% on the date of grant, February 28, 2023, into shares of Unisys Corporation common stock.

Natasha Redding, attorney-in-

fact

\*\* Signature of Reporting Person Date

03/02/2023

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.