FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washi

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

ington, D.C. 20549	OMB APPROVAL

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## Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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

									investment (		, ,								
1. Name and Address of Reporting Person*					2. Issuer Name and Ticker or Trading Symbol UNISYS CORP [ UIS ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
MARTIN THEODORE E													X	Directo	or		10% Ov	/ner	
(Last) (First) (Middle) UNISYS CORPORATION UNISYS WAY				3. Date of Earliest Transaction (Month/Day/Year) 01/28/2005										Officer below)	(give title		Other (s below)	pecify	
UNISTS WAT				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable					
(Street) BLUE BELL PA 19424												Line)  X Form filed by One Reporting Person  Form filed by More than One Reporting  Person							
(City)	(Si	tate)	(Zip)																
		Tah	le I - Nor	- Dariy	ative	S S S S	curitio	<u> Λ</u>	quired, D	ienos	end c	of or Ro	neficia	alla, i	Owner	1			
			16 1 - 1401			_								_					
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da						ar) E	2A. Deemed Execution Date, f any Month/Day/Year)		Transaction Disposed C Code (Instr. 5)		ities Acquired (A) o d Of (D) (Instr. 3, 4		and Securiti Benefic		ies Formially (D) (Following (I) (I		n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	/ An	mount	t (A) or (D)		.	Transact	saction(s) r. 3 and 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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Yea	Date, 1	Code (Ins				6. Date Exer Expiration D (Month/Day/	ate	e Amount of		f [5] g (e Security		Price of rivative curity str. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code		v	(A)	(D)	Date Exercisable	Expira Date	ation	Title	Amount or Number of Shares						
Phantom Stock Units/1- for-1 <sup>(1)</sup>	\$0	01/28/2005			A <sup>(2)</sup>		128.7		(3)	(3	3)	Common Stock	128.7		\$7.77	44,192.26	526	D	
			-								_								

## **Explanation of Responses:**

- 1. Common stock-equivalent units (1-for-1).
- 2. Phantom stock units acquired under the terms and provisions of the Unisys Corporation 2003 Long-Term Incentive and Equity Compensation Plan and deferred in accordance with the Deferred Compensation Plan for Directors of Unisys Corporation.
- 3. The phantom stock units are payable in Unisys common stock, either upon termination of service or on any date at least five years (two years for stock units awarded after January 1, 2001) after the stock units are awarded, at the director's option, under the terms and provisions of the Deferred Compensation Plan for Directors of Unisys Corporation.

By: Susan T. Keene, attorney-02/01/2005 in-fact For: Theodore E. Martin

\*\* 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.