FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
OMB Number:	2225 02							

OMB Number: Estimated average burden hours per response: 0.5

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

		Reporting Person* DORE E							ker or Trad [<mark>UIS</mark>]	ing S	ymbol		(Ch	eck all applic	able)	g Person(s) to			
(Last) UNISYS	(Fi		(Middle)		02	. Date of Earliest Transaction (Month/Day/Year) 2/07/2009								below)	(give title	Othe belov			
(Street) BLUE B			19424-000 (Zip))1	_ 4.										Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(,)	(-		,	n-Deri	vativ	e Se	curit	ties Ac	auired.	Dis	posed c	of. or Be	neficial	ly Owned	<u> </u>				
1. Title of Security (Instr. 3) 2. Transa Date			nsaction	action 2 E Day/Year) i		2A. Deemed Execution Date, if any (Month/Day/Year)		3. 4. So Transaction Disp Code (Instr. 5)		Securities Acquired (A) osposed Of (D) (Instr. 3, 4		5. Amou Securitie Beneficia Owned F	int of es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership				
								Code	v	Amount	(A) o	r Price	Reported Transact (Instr. 3	ion(s)		(Instr. 4)			
Common Stock				02/0	02/07/2009				М		10,51	.8 A	\$0	44,	,393	D			
Common Stock			02/08/2009		9			М		3,61	0 A	\$0	48,	,003	D				
Common Stock			02/0	09/2009				М		5,13	2 A	\$0	53,	,135	D				
		-	Гable II -						uired, D s, option					Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution I if any (Month/Day	d Date,	4. Transaction Code (Instr. 8)		5. N of Deri Sec Acq (A) Disp of (I	umber ivative urities uired	6. Date Ex	6. Date Exercisable a Expiration Date (Month/Day/Year)				8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Owners Form: Direct (I or Indire (I) (Instr	Beneficial Ownership ct (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	Amount or Number of Shares						
Restricted Stock Units 06	(1)	02/09/2009			M			5,132	(2)		(2)	Common Stock	5,132	\$0	0	D			
Restricted Stock Units 07	(1)	02/08/2009			M			3,610	(3)		(3)	Common Stock	3,610	\$0	3,609	D			
Restricted Stock Units 08	(1)	02/07/2009			M			10,518	(4)		(4)	Common Stock	10,518	\$0	21,036	6 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 terms and provisions of the Unisys Corporation 2003 Long-Term Incentive and Equity Compensation Plan. The restricted stock units vest in three annual installments beginning February 9, 2007.
- 3. Time-based restricted stock units granted under the terms and provisions of the Unisys Corporation 2003 Long-Term Incentive and Equity Compensation Plan. The restricted stock units vest in three annual installments beginning February 8, 2008.
- 4. Time-based restricted stock units granted under the terms and provisions of the Unisys Corporation 2007 Long-Term Incentive and Equity Compensation Plan. The restricted stock units vest in three annual installments beginning February 7, 2009.

By: Susan T. Keene, attorneyin-fact For: Theodore E. Martin

02/10/2009

** 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.