FORM 4

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

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Ington, D.C. 20549	OMB APPROVAL

OMB Number:	3235-0287				
Estimated average bure	den				
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).

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

	na Aaaress oi				121	CCLIER	Name an	d Tick	er or Trac	lina S	vmhol			5 Re	ationshin o	f Reporting Pa	rean(e) to lesi	er	
Name and Address of Reporting Person*  JONES CLAYTON M				2. Issuer Name <b>and</b> Ticker or Trading Symbol UNISYS CORP UIS									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
JUNES	CLAII	OIN IVI												X	Director		10% Ov	ner	
(Loot)	/5	-irot)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year)										Officer ( below)	give title	Other (s	pecify	
(Last) (First) (Middle) UNISYS CORPORATION						03/01/2004									50.044)		DCIOW)		
		ATION																	
UNISYS WAY						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable				
(Street)														Line)	F fil	- d b O D.	ti D		
BLUE B	ELL P.	A	19424											X		,	porting Persor		
DEGE DELL FA 13424															Form filed by More than One Reporting Person				
(City)	(5	State)	(Zip)																
		Ta	ble I - Non	-Deriva	ativ	e Se	curities	s Acc	quired,	Dis	posed c	of, or Be	enefic	ially	Owned				
1. Title of Security (Instr. 3)  2. Transa Date (Month/D						ear)	2A. Deemed Execution Date, if any (Month/Day/Yea		Code (Instr				l and Securition Benefici Owned I		es Form ally (D) o following (I) (In	rm: Direct or Indirect (Instr. 4)	7. Nature of ndirect Beneficial Ownership		
									Code	v	Amount (A) or (D)		or Pr	ice		ransaction(s) Instr. 3 and 4)		(Instr. 4)	
			Table II - I								osed of, converti				Owned				
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/Year)	Co	4. Transaction Code (Instr. ) 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amou of Securities Underlying Derivative Securi (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Co	ode	v	(A)		Date Exercisal		Expiration Date	Title	Amo or Num of Sh	ber		(Instr. 4)			
Phantom Stock	\$0	03/01/2004		A <sup>(</sup>	(2)		173.611		(3)		(3)	Common Stock	173.	.611	\$14.4	173.611	D		

## Explanation of Responses:

- 1. Common stock-equivalent units (1-for-1).
- 2. Phantom stock units acquired under the terms and provisions of the Deferred Compensation Plan for Directors of Unisys Corporation and the Unisys Corporation Director Stock Unit Plan.
- 3. The phantom stock units are payable in Unisys common stock, either upon termination of service or on any date at least two years 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 and the Unisys Corporation Director Stock Unit Plan.

By: Susan T. Keene, attorneyin-fact For: Clayton M. Jones

03/03/2004

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.