### Edgar Filing: UNISYS CORP - Form 4

UNISYS CC	ORP										
Form 4											
January 06, 2	2017										
FORM	14								OMB AF	PROVAL	
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287		
Check th				0 /					Expires:	January 31	
if no long		MENT O	F CHAN	GES IN	GES IN BENEFICIAL OWNERSHIP OF				200		
subject to STATEMENT OF CHAIN Section 16. Form 4 or				SECURITIES					Estimated average burden hours per response 0.5		
Form 5		irsuant to !	Section 1	6(a) of the	e Securit	ies E	xchange	e Act of 1934,	response	0.0	
obligatio	ns Section 1'						-	1935 or Section	ı		
may cont <i>See</i> Instru 1(b).	unue.			vestment	•	· ·			-		
1(0).											
(Print or Type I	Responses)										
1. Name and Address of Reporting Person _ 2. Issue				Name and Ticker or Trading			5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
ALTABEF PETER Symbol				6							
•				YS CORP [UIS]							
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Check				( all applicable)				
			(Month/E					X Director	10%	Owner	
801 LAKEV	VIEW DRIVE,	SUITE	01/05/2	-				X Officer (give		r (specify	
100								below) Presi	below) dent and CEO		
	(Street)		4 If Ame	ndment Da	te Original			6 Individual or Io	int/Group Filin	g(Check	
			nendment, Date Original Ionth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line)				
					,			_X_ Form filed by C			
BLUE BEL	L, PA 19422							Form filed by M Person	ore than One Re	porting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	Derivative S	Securi	ties Acqu	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction Da			3.	4. Securit			5. Amount of	6.	7. Nature of	
Security	(Month/Day/Year		n Date, if	Transaction(A) or Disposed of (D)				Securities	Ownership Indirect		
(Instr. 3)		any (Month/I	Day/Year)	Code (Instr. 3, 4 and 5) (Instr. 8)			<b>)</b> )	Beneficially Owned	Form: Direct Benefic (D) or Owners	Ownership	
		(11101111)1	<i>suj(1001)</i>	(115411-0)				Following	Indirect (I)	(Instr. 4)	
						(A)		Reported	(Instr. 4)		
						or		Transaction(s) (Instr. 3 and 4)			
~				Code V	Amount	(D)	Price	(Instr. 5 and 4)			
Common	01/05/2017			Μ	10,000	А	\$0	10,000	D		
Stock											
Common Stock	01/05/2017			F	3,177	D	\$ 14.81	6,823	D		

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

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# 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/Year)	4. Transactic Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. 1 De Sea (In
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Restricted Stock Units (1)	\$ 0	01/05/2017		М	10,000	(2)	(2)	Common Stock	10,000	

## **Reporting Owners**

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
ALTABEF PETER 801 LAKEVIEW DRIVE, SUITE 100 BLUE BELL, PA 19422	Х		President and CEO			
Signatures						
/s/ John M. Armbruster, attorney-in-fact	01/	06/2017				

\*\*Signature of Reporting Person

Date

## **Explanation of Responses:**

- \* 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).
- (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 of the Unisys Corporation 2003 Long-Term Incentive and Equity Compensation Plan. The restricted stock units vest in three equal annual installments starting January 5, 2016.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.