FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. 20549 |
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| Check this box if no longer subject to Section 16. Form 4 or Form 5 | STATEMENT |
|---|-----------|
| obligations may continue. See | |
| Instruction 1(b). | Filed nu |

OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 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* <u>Kulhari Ruchi</u> | | | | | 2. Issuer Name and Ticker or Trading Symbol UNISYS CORP [UIS] | | | | | | | | | | eck all app Direc | tor | ng Pers | 10% Ov | wner |
|---|--|---------|---------|---|---|--|---------------------------|--|--------|---|---|-------------------|--------------------------------|---|---|-------------------------------|--|---------------------------------------|------------|
| (Last) | (Fi | , | Middle) | | 3. Date of Earliest Transaction (Month/Day/Year) 05/01/2024 | | | | | | | | |] ; | V Office below | er (give title v) SVP & | c CHR | Other (s below) | pecify |
| 801 LAKEVIEW DRIVE, SUITE 100 | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | Line | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | |
| (Street) BLUE BELL PA 19422 | | | | | | | | | | | | | | | X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| (City) | (St | ate) (Z | Zip) | | Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10. | | | | | | | | | nded to | | | | | |
| | | Table | I - Noi | n-Deriva | | | | | | | posed of | | | | | ed | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | Executy/Year) if an | | Deemed ecution Date, any onth/Day/Year) | | 3. 4. Securities Acquired Disposed Of (D) (Instr. 8) | | | | | Securit Benefic Owned | . Amount of ecurities eneficially wned Following | | Direct Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | | Code | v | Amount | (A) (D) |) or) | Price | Report Transa (Instr. 3 | ted action(s) 3 and 4) | | | (Instr. 4) |
| Common Stock 05/01 | | | | | 2024 | | A | | 25,592 | 1 | A | \$ <mark>0</mark> | \$0 25,59 | | 2 D | | | | |
| | 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) | rivative Conversion Date Execution Date, curity or Exercise (Month/Day/Year) if any | | | 4. Transaction Code (Instr. 8) | | of Deriv Secu Acqu (A) o Dispo | r osed) r. 3, 4 | Expiratio (Month/D | | | 7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4) | | 1 5 | s. Price of Derivative Security Instr. 5) | ative derivative rity Securities | | 0. Ownership Form: Direct (D) or Indirect I) (Instr. 4) | Beneficial Ownership (Instr. 4) | |
| | | | | Code | | v | (A) | (D) | | | Expiration Date | Title | Amo or Num of Shar | ber | | | | | |

Explanation of Responses:

/s/ Alex Gonzalez, Attorney-

in-Fact

** Signature of Reporting Person Date

05/02/2024

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.