### FORM 4

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

☐ 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.

# Estimated average burden hours per response... 0.5

OMB APPROVAL OMB Number: 3235-0287

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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 *					2. Issuer Name and Ticker or Trading Symbol									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
Adams Benjamin Carlton					Western Union CO [ WU ]								Director	,	100	O		
(Zaat) (Table) (Made)				3. I	3. Date of Earliest Transaction (MM/DD/YYYY)  2/26/2024							Director 10% Owner X Officer (give title below) Other (specify below) Chief Legal Officer						
7001 EAST BELLEVIEW AVENUE									0, = 0				J	6. Individual or Joint/Group Filing (Check Applicable Line)				
	(Stre	eet)		4. I	lf An	nendmei	nt, Da	ite O	rigin	al Fil	ed (MM/D	D/YYYY	6. Individual	or Joint/G	roup Filing	(Check Appl	icable Line)	
DENVER, CO 80237														_X _ Form filed by One Reporting Person				
(City) (State) (Zip)													Form filed by	Form filed by More than One Reporting Person				
									•				eneficially Own			T	I	
1. Title of Security (Instr. 3) 2. Trans			ans. Date	Execution Date, if any		3. Trans. Code (Instr. 8)		or Disposed of (D)		Following Reported Transaction(s)  (Instr. 3 and 4)  Ownership of Indire Form: Beneficial Direct (D)  Ownership of Ownership of Indire Form: Beneficial Direct (D)			Beneficial Ownership					
							Coo	de	V	Amo	unt (A) o					or Indirect (I) (Instr. 4)	(Instr. 4)	
Common Stock			2/2	26/2024			A	١		24,84	4 (1) A	\$0			135,207	D		
	Tab	ole II - Deri	ivative Sec	curities l	Bene	eficially	Own	ed (	<b>e.g.,</b> ]	puts,	calls, wa	ırrants,	options, conve	rtible secu	urities)			
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Trans. Date	3A. Deemed Execution Date, if any	4. Trans. Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		ities	6. Date Exercisal and Expiration D			Securitie	Underlying Derivative Security Security		9. Number of derivative Securities Beneficially Owned	Ownership Form of Derivative	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
	Security			Code	V	(A)		(D)	Date Exerc	cisable	Expiration Date	Title	Amount or Number of Shares		Following Reported Transaction(s) (Instr. 4)	or Indirect	_	
Employee Stock Option (Right to Buy)	\$12.8	2/26/2024		A		143,	,244		()	(2)	2/26/2034	Commo Stock		\$0	143,244	D		

#### **Explanation of Responses:**

- (1) Restricted stock unit award which vests in three substantially equal installments, if the reporting person is employed by the Company at the time, on February 26, 2025, 2026, and 2027.
- (2) This option vests in four substantially equal annual installments beginning on February 26, 2025.

Reporting Owners

Reporting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Adams Benjamin Carlton								
7001 EAST BELLEVIEW AVENUE			Chief Legal Officer					
DENVER, CO 80237								

#### Signatures

Darren Dragovich, As Attorney-in-Fact 2/28/2024

\*\*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 control number.