FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| 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

OMB APPROVAL OMB Number: 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

| Name and Address of Reporting Person* LEVINSON LINDA FAYNE | | | | | | 2. Issuer Name and Ticker or Trading Symbol NCR CORP [NCR] | | | | | | | | Relationship leck all app X Direc | icable) | ig Pers | son(s) to Iss 10% Ov | |
|--|---|--|--|------------------------|--------------------------------|--|----------|---|---------------------------------------|--|--------------------|---|--|---|--------------------|-------------------------------------|---|---------------------------------------|
| (Last) 710 22N | (Last) (First) (Middle) 710 22ND STREET | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/01/2010 | | | | | | | | Office below | r (give title) | | Other (s below) | specify |
| (Street) SANTA MONICA CA 90402 (City) (State) (Zip) | | | | | 4.1 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | ndividual or Joint/Group Filing (Check Applicable e) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| | | Tab | le I - Noi | n-Deri | vativ | e Se | curities | s Ac | quired, | Dis | posed o | of, or Be | neficial | ly Owne | d | | | |
| Date | | | | te onth/Day/Year) i | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5) | | | Benefic | ies ially Following | Form (D) o | n: Direct r Indirect istr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | | V | Amount | (A) or (D) | Price | Transa (Instr. 3 | ction(s) | | | | |
| Common Stock 05/01/2 | | | | | | 2010 | | A | | 5,908 ⁽¹⁾ A \$ | | \$13.1 | .6 7 | 7,448 | | D | | |
| | | - | Гable II - | | | | | | | | | , or Ben ble secเ | | 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 if any (Month/Day | Date, | 4. Transactic Code (Inst | | | | 6. Date Ex Expiration (Month/Da | Date | • | 7. Title and Amour of Securities Underlying Derivative Securit (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | | e s Illy | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4 | Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercisab | | Expiration Date | Title | Amount or Number of Shares | | | | | |
| Stock Option (Right to Buy) | \$13.16 | 05/01/2010 | | | A | | 13,830 | | 05/01/201 | 1 (| 05/01/2020 | Common Stock | 13,830 | \$0 ⁽²⁾ | 13,83 | 0 | D | |

Explanation of Responses:

- 1. Represents an annual grant of restricted stock units under the NCR Corporation 2006 Stock Incentive Plan which may be paid only in shares of NCR common stock. The restricted stock units vest during the one-year period beginning on the grant date, in equal quarterly installments commencing three months after the grant date, provided the reporting person continues to serve as a director until each vesting date.
- 2. The options were granted under the NCR Corporation 2006 Stock Incentive Plan and the price is determined at the time the option is exercised.

Nelson F. Greene, Attorney-infact for Linda Fayne Levinson

05/04/2010

** 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.