SEC Form 4

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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| Check this box if no long | er subiect to |
|---------------------------|---------------|
| Section 16. Form 4 or Fo | |
| obligations may continue | |
| Instruction 1(b). | |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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| | hours per response: | 0.5 |
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| I I Name and Address of Reporting Feison | | | 2. Issuer Name and Ticker or Trading Symbol <u>NCR CORP</u> [NCR] | | tionship of Reporting Person(s) to Issuer all applicable) Director 10% Owner | | |
|--|--------------|----------|--|-------------------------|--|-----------------------|--|
| | | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) 05/03/2011 | | Officer (give title below) | Other (specify below) | |
| (Street) LAGUNA | | 92651 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Indivi Line) X | dual or Joint/Group Filing (Form filed by One Report | | |
| BEACH | ACH CA 92651 | | | | Form filed by More than C Person | One Reporting | |
| (City) | (State) | (Zip) | | | | | |

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | Transaction Code (Instr. | | | | | 5. Amount of Securities Beneficially Owned Following Reported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership |
|---------------------------------|--|-----------------------------|---|--------|---------------|-------------------|---|---|---|
| | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (Instr. 4) |
| Common Stock ⁽¹⁾ | 05/03/2011 | Α | | 4,592 | Α | \$ <mark>0</mark> | 42,394 | 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) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transa Code (8) | | of | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---|---|--|---|------------------------------|---|--------|-----|--|--------------------|---|--|---|--|--|--|
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |
| Stock Option (Right to Buy) ⁽²⁾ | \$19.35 | 05/03/2011 | | A | | 11,363 | | 05/03/2012 | 05/03/2021 | Common Stock | 11,363 | \$0 | 11,363 | D | |

Explanation of Responses:

1. These are restricted stock units acquired under the NCR Director Compensation Program (the "Compensation Program") as part of the annual equity grant to directors. The restricted stock units vest in four equal quarterly installments beginning three months after the grant date, subject to the reporting person's continued service as a director on each vesting date. The restricted stock units may be paid only in shares of NCR common stock.

2. These are stock options granted under the Compensation Program as part of the annual equity grant to directors.

Chanda L. Kirchner, Attorneyin-Fact for Gary James

05/05/2011

Daichendt ** Signature of Reporting Person

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.

Date

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