Instruction 1(b)

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPROVAL

OMB Number: 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>Ledford Andrea</u>				2. Issuer Name and Ticker or Trading Symbol NCR CORP [NCR]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
(Last) 7 WORL	(Fi	•	, ,			3. Date of Earliest Transaction (Month/Day/Year) 02/24/2014								SV	below)		Chief ficer	Other (s below) Human Ro	
250 GRE	EENWICH	STREET, 35TH	FLOOR													Oil	iicer		
(Street) NEW YO	ORK N	Y	10007		4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)						Line	ndividual or Joint/Group Filing (Check Applicable) X Form filed by One Reporting Person Form filed by More than One Reporting						
(City)	(S	tate)	(Zip)												Person			-	
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transposite (Month/L			Exe		2A. Deemed Execution Date, if any (Month/Day/Year)		Code (I	Transaction Disposed Code (Instr. 5)		rities Acquired (A) d Of (D) (Instr. 3, 4			5. Amou Securitie Benefici Owned F Reporter	es ally Following	Form (D) o	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A (D) or)	Price	Transact (Instr. 3	tion(s)			msu. 4)
Common Stock 02/24			4/201	/2014			A		3,366 ⁽¹⁾ A		A	\$0	50,4	50,475 ⁽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) 2. Conversion Onte (Month/Day/Year) (Instr. 3) 3. Transaction Date (Execution Date (Month/Day/Year) (Month/Day/Year) (Month/Day/Year)		Date, Transaction Code (Instr.		n of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amour of Securities Underlying Derivative Security (Instr. 3 and 4)		curity	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)		Date Exercisab		xpiration ate	Title	or No of	ımber					
Restricted Stock	\$0 ⁽³⁾	02/24/2014			Α		19.960		(3)		(3)	Commo	on 19	9.960	\$0	19.960	,]	D	

Explanation of Responses:

Units

- 1. These are time-based restricted stock units that will vest on February 24, 2017, subject to the reporting person's continued employment with the issuer on that date and in accordance with the terms and conditions of the applicable award agreement.
- 2. Includes 92.21 shares acquired under the NCR Employee Stock Purchase Plan in January 2014. These shares were rounded to 92 for disclosure in this table.
- 3. These are restricted stock units as to which certain performance-related conditions to vesting have been satisfied. The units will vest 50% on February 28, 2015 and 50% on October 28,2015, subject to the reporting person's continued employment with the issuer on these dates and in accordance with the terms and conditions of the applicable award agreement.

<u>Jennifer M. Daniels, Attorney-</u> <u>in-Fact for Andrea Ledford</u> 02/26/2014

** 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.