FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| 1 | OIVIB APP | RUVAL |
|---|---------------------|----------|
| | OMB Number: | 3235-028 |
| П | Estimated average b | urdon |

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

| obligations may continue. See Instruction 1(b). | | | | | ant to Section 16(a) | of the S | Securit | ies Exchange A | 34 | ho | urs per response: | 0.5 | |
|---|--------------------|---|-----------|---|---|-----------|-----------------------------------|----------------|---------------|--|---|---|------------|
| | | | | | ection 30(h) of the Ir | | | | | | | | |
| 1. Name and Address of Reporting Person* COLLINS MALCOLM KEVIN | | | | | uer Name and Ticke | | ading \$ | Symbol | | all applicable) Director | 10% Owner | | |
| (Last) 1801 OATLAND | (First) S COURT | (Middle) | | | e of Earliest Transa 1/2006 | action (N | /lonth/ | Day/Year) | | X | Officer (give title below) Senior Vio | vice President | |
| (Street) WAKE FOREST NC 27587 | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | Form filed by 0 | oup Filing (Check A One Reporting Pers More than One Rep | son |
| (City) | (State) | (Zip) | | | | | | | | | 1 010011 | | |
| | 7 | Γable I - No | n-Deriva | tive S | Securities Acq | uired | , Dis | posed of, o | or Ben | eficially | Owned | | |
| 1. Title of Security (Instr. 3) | | 2. Transaction Date (Month/Day/Year | | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transaction Code (Instr. 8) | | 4. Securities A Disposed Of (I | | | 5. Amount of Securities Beneficially Owned Followin Reported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (111501.4) |
| Common Stock 03 | | 03/01/2 | 006 | | A | | 31,690(1) | A | \$39.785 | 31,690 | D | | |
| | | Table II | Davissati | 6- | | : | Diam | | D | e a la lla a O | | | |

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 Exerc Expiration Da (Month/Day/\) | ate | 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 | | | | |
| Employee Stock Option (Right to Buy) | \$39.785 | 03/01/2006 | | A | | 70,870 | | (2) | 03/01/2016 | Common Stock | 70,870 | \$0 ⁽³⁾ | 70,870 | D | |

Explanation of Responses:

- 1. This is a performance-based restricted stock award that vests after three years, if performance measures are met.
- $2. \ The \ options \ vest \ in \ four \ equal \ annual \ installments \ beginning \ March \ 1, \ 2007.$
- 3. These options were granted under the NCR Management Stock Plan.

Nelson F. Greene, Attorney-in-03/03/2006 fact for Malcolm Kevin Collins

** 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.