## Edgar Filing: NCR CORP - Form 4

NCR CORP											
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April 20, 201	16										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								OMB AF	OMB APPROVAL		
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB Number:	3235-0287			
Check the									Expires:	January 31,	
if no longer subject to STATEMENT OF CHANG				GES IN BENEFICIAL OWNE				NERSHIP OF	P OF <sup>1</sup>		
Section 1				SECUR	SECURITIES				Estimated average burden hours per		
Form 4 o	or							response			
Form 5 obligation	-						-	e Act of 1934,			
may cont				•	•	· ·		f 1935 or Section	n		
See Instru		30(h)	of the In	vestment	Compan	y Ac	t of 194	10			
1(b).											
(Print or Type I	Responses)										
1. Name and Address of Reporting Person <sup>*</sup> 2. Issuer Name and Ticker or Tradi					Tradii	ng	5. Relationship of Reporting Person(s) to				
LEVINSON LINDA FAYNE Symbo				-				Issuer			
			NCR C	ORP [NC	R]			(Chao	k all applicable	)	
(Last)	(First)	(Middle)	3. Date of	f Earliest Tr	ansaction			(Cliec	k all applicable	)	
			(Month/D	ay/Year)				_X_ Director	10%	Owner	
7 WORLD TRADE CENTER, 250 04/18/			04/18/2	8/2016				Officer (give title Other (specify below) below)			
	CH STREET, 3	35TH						below)	Delow)		
FLOOR											
	(Street)		4. If Ame	mendment, Date Original				6. Individual or Joint/Group Filing(Check			
Filed(Mo			Filed(Mor	nth/Day/Year	)			Applicable Line)			
								_X_ Form filed by C Form filed by M			
NEW YOR	K, NY 10007							Person		porting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction D	3. 4. Securities Acquired				5. Amount of	6. Ownership				
Security (Month/Day/Year) Execution Date, if (Instr. 3) any (Month/Day/Year)			· · · · · · · · · · · · · · · · · · ·					Securities Beneficially	Form: Direct (D) or	Indirect Beneficial	
			Code (Instr. 3, 4 and 5) (Instr. 8)				Owned		Ownership		
		× ×	, , , , , , , , , , , , , , , , , , ,	· · · ·				Following	(Instr. 4)	(Instr. 4)	
						(A)		Reported			
						or		Transaction(s) (Instr. 3 and 4)			
C				Code V	Amount	(D)	Price	(mour o und T)			
Common Stock	04/18/2016			М	3,724	А	\$ 20.25	120,488	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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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. Transactic Code (Instr. 8)	5. Number ctionof Derivative Securities 3) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		of Derivative Expiration Date Securities (Month/Day/Year) Acquired A) or Disposed of D) Instr. 3, 4,		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. D S (I
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option (Right to Buy)	\$ 20.25	04/18/2016		М	3	3,724	04/26/2007	04/26/2016	Common Stock	3,724	

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>		Relationships					
	Director	10% Owner	Officer	Other			
LEVINSON LINDA FAYNE 7 WORLD TRADE CENTER 250 GREENWICH STREET, 35TH FLOOR NEW YORK, NY 10007	X						
Signatures							
Laura J. Foltz, Attorney-in-Fact for Linda Fayı Levinson	ne	04/20/2016					
**Signature of Reporting Person			Date				

## **Explanation of Responses:**

\* 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. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.