

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL

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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>Fishman Robert P</u> (Last) (First) (Middle) <u>1700 S. PATTERSON BOULEVARD</u> (Street) <u>DAYTON OH 45479</u> (City) (State) (Zip)	2. Date of Event Requiring Statement (Month/Day/Year) <u>10/23/2009</u>	3. Issuer Name and Ticker or Trading Symbol <u>NCR CORP [NCR]</u> <table style="width: 100%; border: none;"> <tr> <td colspan="2">4. Relationship of Reporting Person(s) to Issuer (Check all applicable)</td> </tr> <tr> <td style="width: 50%;"> <input type="checkbox"/> Director <input checked="" type="checkbox"/> Officer (give title below) <p style="text-align: center;"><u>Interim CFO</u></p> </td> <td style="width: 50%;"> <input type="checkbox"/> 10% Owner <input type="checkbox"/> Other (specify below) </td> </tr> </table>	4. Relationship of Reporting Person(s) to Issuer (Check all applicable)		<input type="checkbox"/> Director <input checked="" type="checkbox"/> Officer (give title below) <p style="text-align: center;"><u>Interim CFO</u></p>	<input type="checkbox"/> 10% Owner <input type="checkbox"/> Other (specify below)
4. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
<input type="checkbox"/> Director <input checked="" type="checkbox"/> Officer (give title below) <p style="text-align: center;"><u>Interim CFO</u></p>	<input type="checkbox"/> 10% Owner <input type="checkbox"/> Other (specify below)					
		5. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable Line) <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person				

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
<u>Common Stock</u>	<u>9,896.0953</u>	<u>D</u>	

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of Derivative Security	5. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares			
<u>Employee Stock Option (Right to Buy)</u>	<u>03/01/2005</u>	<u>03/01/2015</u>	<u>Common Stock</u>	<u>4,180</u>	<u>17.97</u>	<u>D</u>	
<u>Employee Stock Option (Right to Buy)</u>	<u>02/13/2006</u>	<u>02/13/2016</u>	<u>Common Stock</u>	<u>3,234</u>	<u>17.82</u>	<u>D</u>	
<u>Employee Stock Option (Right to Buy)</u>	<u>03/01/2007</u>	<u>02/28/2017</u>	<u>Common Stock</u>	<u>5,733</u>	<u>21.27</u>	<u>D</u>	
<u>Employee Stock Option (Right to Buy)</u>	<u>05/01/2007</u>	<u>04/30/2017</u>	<u>Common Stock</u>	<u>4,195</u>	<u>23.13</u>	<u>D</u>	
<u>Employee Stock Option (Right to Buy)</u>	<u>06/01/2007</u>	<u>05/31/2017</u>	<u>Common Stock</u>	<u>13,000</u>	<u>24.7</u>	<u>D</u>	
<u>Employee Stock Option (Right to Buy)</u>	<u>10/01/2007</u>	<u>09/30/2017</u>	<u>Common Stock</u>	<u>10,413</u>	<u>23.93</u>	<u>D</u>	
<u>Employee Stock Option (Right to Buy)</u>	<u>03/01/2008</u>	<u>02/28/2018</u>	<u>Common Stock</u>	<u>10,963</u>	<u>22.16</u>	<u>D</u>	

Explanation of Responses:

Nelson F. Greene, Attorney-in-fact for Robert P. Fishman 10/30/2009

** 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 5 (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.