FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington,	D.C.	20549	

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHI

OMB APPROVAL											
OMB Number:	3235-0287										
Estimated average burden											
hours per respons	e 0.5										

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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*  Miller Laura Marie					2. Issuer Name <b>and</b> Ticker or Trading Symbol NCR Voyix Corp [ VYX ]						(Che	elationshipeck all app	,	ng Per	son(s) to Is				
(Last)	(Fir	st) (M	/liddle)		3. Date of Earliest Transaction (Month/Day/Year) 05/29/2024								Office below	er (give title v)		Other (s below)	specify		
C/O NCR VOYIX CORPORATION					4. If <i>A</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable						
864 SPR	864 SPRING STREET NW												Line)  X Form filed by One Reporting Person						
(Street)												Form filed by More than One Reporting Person							
AILAN	LANTA GA 30308				Rui	Pule 10h5 1(c) Transaction Indication													
(City)	(Sta	ate) (Z	Žip)		\	Rule 10b5-1(c) Transaction Indication													
(- 5)	(	(	.,			Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.													
		Table	I - No	n-Deriva	tive S	Secui	rities	Acq	uired,	Dis	posed of	, or E	3enet	ficia	lly Own	ed			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da			Execution Date,				es Acquired (A) o Of (D) (Instr. 3, 4 a			Benefic	ies cially Following	Form (D) or	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership					
									Code	v	Amount	(A)	or F	Price	Transa	action(s) 3 and 4)			(Instr. 4)
Common Stock			05/29/2	5/29/2024				A		12,413(1	1) A \$		\$ <mark>0</mark>	0 21,809			D		
		Tal									osed of, o				/ Owne	d	,	,	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	emed ion Date, /Day/Year)	Code (Instr.		5. Nu of Deriv Secu Acqu (A) or Dispo of (D) (Instr	rities ired r osed ) : 3, 4	6. Date Exerc Expiration Da (Month/Day/)		te	7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		(	3. Price of Derivative Security Instr. 5)	ve derivative Securities	ly Ov Fo Dii or (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amou or Numb of Share	ber					

## Explanation of Responses:

1. Reflects a grant of restricted stock units ("RSUs") pursuant to the Issuer's non-employee director compensation program. The RSUs will vest on the first anniversary of the grant date, subject to the reporting person's continued service as a director.

## Remarks:

/s/ Kelli Sterrett, Attorney-in-Fact for Laura M. Miller

05/31/2024

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.