

NEUBERGER BERMAN HIGH YIELD STRATEGIES FUND  
 Form 3  
 October 08, 2013

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

OMB APPROVAL

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**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,  
 Section 17(a) of the Public Utility Holding Company Act of 1935 or Section  
 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person *		2. Date of Event Requiring Statement	3. Issuer Name <b>and</b> Ticker or Trading Symbol	
METROPOLITAN LIFE INSURANCE CO/NY (Last) (First) (Middle)		(Month/Day/Year) 09/18/2013	NEUBERGER BERMAN HIGH YIELD STRATEGIES FUND [NHS]	
10 PARK AVENUE, P.O. BOX 1902 (Street)		4. Relationship of Reporting Person(s) to Issuer (Check all applicable)		5. If Amendment, Date Original Filed(Month/Day/Year)
MORRISTOWN, NJ 07962 (City) (State) (Zip)		___ Director ___X___ 10% Owner ___ Officer ___ Other (give title below) (specify below)		6. Individual or Joint/Group Filing(Check Applicable Line) ___X___ Form filed by One Reporting Person ___ 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)
Neuberger Berman High Yield Strategies Fund Inc. <sup>(1)</sup>	\$ 23,954,000	D	^
Neuberger Berman High Yield Strategies Fund Inc. <sup>(2)</sup>	\$ 26,432,000	D	^
Neuberger Berman High Yield Strategies Fund Inc. <sup>(3)</sup>	\$ 10,738,000	D	^
Neuberger Berman High Yield Strategies Fund Inc. <sup>(4)</sup>	\$ 28,876,000	D	^
Neuberger Berman High Yield Strategies Fund Inc. <sup>(5)</sup>	1,400	D	^

# Edgar Filing: NEUBERGER BERMAN HIGH YIELD STRATEGIES FUND - Form 3

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

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date <small>(Month/Day/Year)</small>	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	<small>Date Exercisable</small>	<small>Expiration Date</small>			
		Title	Amount or Number of Shares		

## Reporting Owners

**Reporting Owner Name / Address**

**Relationships**

Director    10%  
Owner    Officer    Other

METROPOLITAN LIFE INSURANCE CO/NY  
10 PARK AVENUE  
P.O. BOX 1902  
MORRISTOWN, NJ 07962

^    ^ X    ^    ^

## Signatures

/s/ Thomas J. Pasuit, Assistant General  
Counsel

10/08/2013

\*\*Signature of Reporting Person

Date

## Explanation of Responses:

- \* 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).
- (1) FRN Senior Note, Series A, Due 9/18/2023. See Exh 99-1.
- (2) FRN Senior Note, Series A, Due 9/18/2023. See Exh 99-2.
- (3) FRN Senior Note, Series A, Due 9/18/2023. See Exh 99-3.
- (4) FRN Senior Note, Series A, Due 9/18/2023. See Exh 99-4.
- (5) Series B Mandatory Redeemable Preferred Shares. See Exh 99-5.

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.