BENJAMIN ANN H

Form 4

August 10, 2010

# FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

OMB Number:

3235-0287

Expires:

January 31, 2005

0.5

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**OMB APPROVAL** 

response...

if no longer subject to Section 16. Form 4 or Form 5

Check this box

obligations may continue. See Instruction

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

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \* BENJAMIN ANN H

2. Issuer Name and Ticker or Trading

Symbol

NEUBERGER BERMAN HIGH YIELD STRATEGIES FUND

[NHS]

(Last) (First) (Middle)

3. Date of Earliest Transaction

(Month/Day/Year) 08/06/2010

5. Relationship of Reporting Person(s) to

Issuer

(Check all applicable)

Director

below)

10% Owner \_\_X\_\_ Other (specify

Officer (give title below)

Portfolio Manager

C/O NEUBERGER BERMAN MANAGEMENT LLC, 605 THIRD **AVENUE** 

> (Street) 4. If Amendment, Date Original

> > Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check

Applicable Line)

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

NEW YORK, NY 10158

(City) (State) (Zip)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1.Title of Security (Instr. 3)

2. Transaction Date 2A. Deemed (Month/Day/Year)

Execution Date, if (Month/Day/Year)

3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) 5. Amount of Securities Beneficially Owned Following

6. Ownership 7. Nature of Form: Direct Indirect (D) or Beneficial Indirect (I) Ownership (Instr. 4) (Instr. 4)

Reported Transaction(s)

(Instr. 3 and 4)

or Code V Amount (D) Price

(A)

D

Common

Interest

Shares of Beneficial

08/06/2010

7,300

J(1)

0 (1)

D

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

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SEC 1474 (9-02)

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#### number.

# Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Tit	le and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	orNumber	Expiration D	ate	Amou	unt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Unde	rlying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Secur	rities	(Instr. 5)	Bene
	Derivative				Securities			(Instr	. 3 and 4)		Own
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
							Expiration Date	Title N	or Number		
				Codo V	(A) (D)						
				Code v	(A) (D)				Shares		

## **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

BENJAMIN ANN H C/O NEUBERGER BERMAN MANAGEMENT LLC 605 THIRD AVENUE NEW YORK, NY 10158

Portfolio Manager

## **Signatures**

/s/ Sheila R. James for Ann Benjamin by power of attorney

08/10/2010

\*\*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).

Disposed of 7,300 common shares of beneficial interest of the issuer, Neuberger Berman High Yield Strategies Fund ("Old NHS"), in exchange for 7,300 shares of common stock of Neuberger Berman High Yield Strategies Fund Inc. ("NHS") pursuant to an agreement and plan of reorganization among Old NHS, NHS and Neuberger Berman Income Opportunity Fund Inc. On the effective date of the reorganization, the closing market price of Old NHS common shares was \$13.76.

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.

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