Voya Natural Resources Equity Income Fund Form 5

March 06, 2015

# FORM 5

#### **OMB APPROVAL**

3235-0362

2005

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

Number: January 31, Expires:

**OMB** 

no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction

Check this box if

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Estimated average burden hours per response...

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, 1(b). Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or Section Reported

30(h) of the Investment Company Act of 1940 Form 4

Transactions Reported

1. Name and Address of Reporting Person \* 2. Issuer Name and Ticker or Trading 5. Relationship of Reporting Person(s) to Issuer Earley J Michael Symbol Voya Natural Resources Equity (Check all applicable) Income Fund [IRR]

3. Statement for Issuer's Fiscal Year Ended (Last) (First) (Middle) \_X\_ Director 10% Owner Officer (give title Other (specify (Month/Day/Year)

below) below) 02/28/2015

4100 QUAIL PARK DRIVE

(Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Reporting

Filed(Month/Day/Year)

(check applicable line)

WEST DES MOINES, Â IAÂ 50265

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

(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of 2. Transaction Date 2A. Deemed 3. 4. Securities 5. Amount of 6. Ownership 7. Nature of Security (Month/Day/Year) Execution Date, if Transaction Acquired (A) or Securities Form: Direct Indirect (Instr. 3) Code Disposed of (D) Beneficially (D) or Beneficial (Month/Day/Year) (Instr. 3, 4 and 5) Owned at end Indirect (I) Ownership (Instr. 8) of Issuer's (Instr. 4) (Instr. 4) (A) Fiscal Year

or (Instr. 3 and 4) Amount (D) Price

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.

SEC 2270 (9-02)

#### 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 Exercisable and | 7. Title and | 8. Price of | 9. |
|-------------|-------------|---------------------|--------------------|-------------|-----------|-------------------------|--------------|-------------|----|
| Derivative  | Conversion  | (Month/Day/Year)    | Execution Date, if | Transaction | Number    | Expiration Date         | Amount of    | Derivative  | of |
| Security    | or Exercise |                     | any                | Code        | of        | (Month/Day/Year)        | Underlying   | Security    | D  |
| (Instr. 3)  | Price of    |                     | (Month/Day/Year)   | (Instr. 8)  | Derivativ | e                       | Securities   | (Instr. 5)  | S  |

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Derivative Securities (Instr. 3 and 4) Security Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) (A) (D) Date Expiration Title Amount Exercisable Date or Number of

0

E

Shares

## **Reporting Owners**

| Reporting Owner Name / Address   | Relationships |           |         |       |  |
|--|---------------|-----------|---------|-------|--|
|  | Director      | 10% Owner | Officer | Other |  |
| Earley J Michael<br>4100 QUAIL PARK DRIVE<br>WEST DES MOINES, IA 50265 | ÂΧ            | Â         | Â       | Â     |  |

## **Signatures**

Deborah
Hammalian

\*\*Signature of Reporting Person

Deborah
O3/06/2015

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).

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#### **Remarks:**

Resigned as Director on 12/29/14.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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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