ING U.S., Inc.
Form 3
May 01, 2013

FORM 3

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

OMB APPROVAL

OMB Number:	3235-0104
Expires:	January 31, 2005
Estimated average burden hours per response...	0.5

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 *
Â ING GROEP NV
(Last) (First) (Middle)

BIJLMERPLEIN 888
(Street)

1102 MG
AMSTERDAM,Â P7Â
(City) (State) (Zip)

2. Date of Event Requiring Statement (Month/Day/Year)
05/01/2013

3. Issuer Name **and** Ticker or Trading Symbol
ING U.S., Inc. [VOYA]

4. Relationship of Reporting Person(s) to Issuer
(Check all applicable)
__X__ Director
__X__ 10% Owner
_____ Officer (give title below)
_____ Other (specify below)

5. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)
___ Form filed by One Reporting Person
_X_ 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)
Common Stock (par value $0.01 per share)	230,000,000	I	By subsidiary (1)

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

SEC 1473 (7-02)

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 (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 of Derivative Security: Direct (D) or Indirect	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of			

	Shares	(I) (Instr. 5)

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
ING GROEP NV BIJLMERPLEIN 888 1102 MG AMSTERDAM,Â P7Â	Â X	Â X	Â	Â
ING INSURANCE TOPHOLDING N.V. AMSTELVEENSEWEG 500 AMSTERDAM,Â P7Â 1081 KL	Â	Â X	Â	Â
ING VERZEKERINGEN N.V. AMSTELVEENSEWEG 500 AMSTERDAM,Â P7Â 1081 KL	Â	Â X	Â	Â
ING INSURANCE INTERNATIONAL B.V. AMSTELVEENSEWEG 500 AMSTERDAM,Â P7Â 1081 KL	Â	Â X	Â	Â

Signatures

/s/ Harris Oliner, attorney in fact	05/01/2013
**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) The securities reported herein are directly beneficially owned by ING Insurance International B.V. ING Verzekeringen N.V. is the sole stockholder of ING Insurance International B.V. ING Insurance Topholding N.V. is the sole stockholder of ING Verzekeringen N.V. ING Groep N.V. is the sole stockholder of ING Insurance Topholding N.V. ING Groep N.V., ING Insurance Topholding N.V. and ING Verzekeringen N.V. are indirect beneficial owners of the securities reported herein.

Â

Remarks:

ExhibitÂ List:
ExhibitÂ 24.1Â -Â PowerÂ ofÂ AttorneyÂ (INGÂ GroepÂ N.V.)
ExhibitÂ 24.2Â -Â PowerÂ ofÂ AttorneyÂ (INGÂ InsuranceÂ TopholdingÂ N.V.)
ExhibitÂ 24.3Â -Â PowerÂ ofÂ AttorneyÂ (INGÂ VerzekeringenÂ N.V.)
ExhibitÂ 24.4Â -Â PowerÂ ofÂ AttorneyÂ (INGÂ InsuranceÂ InternationalÂ B.V.)

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.