

FOUNTAIN CAPITAL MANAGEMENT LLC
 Form 3
 March 04, 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 *		2. Date of Event Requiring Statement	3. Issuer Name and Ticker or Trading Symbol	
Â TACTICAL INVESTMENT MANAGERS, LLC		(Month/Day/Year)	TORTOISE ENERGY INDEPENDENCE FUND, INC.	
(Last)	(First)	07/31/2012	[NDP]	
4200 W 115TH ST,Â STE 100			4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)
(Street)			(Check all applicable)	
LEAWOOD,Â KSÂ 66211			<input type="checkbox"/> Director	6. Individual or Joint/Group Filing(Check Applicable Line)
(City)	(State)		<input type="checkbox"/> 10% Owner	<input type="checkbox"/> Form filed by One Reporting Person
	(Zip)		<input checked="" type="checkbox"/> Officer	<input checked="" type="checkbox"/> Form filed by More than One Reporting Person
			(give title below)	
			(specify below)	
			Affiliate	

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 Shares	0	D	Â

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) Title	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
---	---	---	--	---	--

Date Exercisable	Expiration Date	Amount or Number of Shares	or Indirect (I) (Instr. 5)
---------------------	--------------------	----------------------------------	----------------------------------

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
TACTICAL INVESTMENT MANAGERS, LLC 4200 W 115TH ST STE 100 LEAWOOD, KS 66211	Â	Â	Â	Affiliate
ENTERPRISE RISK STRATEGIES, LLC 4200 W 115TH ST STE 100 LEAWOOD, KS 66211	Â	Â	Â	Affiliate
ERS INSURANCE, INC 4200 W 115TH ST STE 100 LEAWOOD, KS 66211	Â	Â	Â	Affiliate
CORRIDOR ENERGY LLC 4200 W 115TH ST STE 100 LEAWOOD, KS 66211	Â	Â	Â	Affiliate
MONTAGE SEED CAPITAL, LLC 4200 W 115TH ST STE 100 LEAWOOD, KS 66211	Â	Â	Â	Affiliate
Adams Hall Wealth Advisors, LLC 4200 W 115TH STE STE 100 LEAWOOD, KS 66212	Â	Â	Â	Affiliate
FOUNTAIN CAPITAL MANAGEMENT LLC 10801 MASTIN BLVD OLVERLAND PARK, KS 66210	Â	Â	Â	Affiliate
BRINTON EATON ASSOCIATES INC 1 GIRALDA FARMS SUITE 130 MADISON, NJ 07940	Â	Â	Â	Affiliate

Signatures

/s/ Martin Bicknell, on behalf of all other
persons

03/04/2013

__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).

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.