

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

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	5. Ownership Form of Derivative Security:	6. Nature of Indirect Beneficial Ownership (Instr. 5)
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Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Security	Direct (D) or Indirect (I) (Instr. 5)
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## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
LABEL REAL ESTATE, LLC 4200 W. 115TH STREET, SUITE 100 LEAWOOD, KS 66211	^	^	^	Affiliate
LABEL ARTS, LLC PO BOX 727 KEMP, TX 75143	^	^	^	Affiliate
MARINER HOLDINGS, LLC 4200 W. 115TH STREET, SUITE 100 LEAWOOD, KS 66211	^	^	^	Affiliate
MARINER CONSULTING, LLC 4200 W. 115TH STREET, SUITE 100 LEAWOOD, KS 66211	^	^	^	Affiliate
Orizon Investment Counsel, LLC 16924 FRANCES STREET SUITE 200 OMAHA, NE 68130	^	^	^	Affiliate
NUANCE INVESTMENTS, LLC 4200 W. 115TH STREET, SUITE 100 LEAWOOD, KS 66211	^	^	^	Affiliate
Convergence Investment Partners, LLC 4200 WEST 115TH STREET LEAWOOD, KS 66211	^	^	^	Affiliate
MARINER REAL ESTATE MANAGEMENT, LLC 4200 W. 115TH STREET, SUITE 100 LEAWOOD, KS 66211	^	^	^	Affiliate
MARINER REAL ESTATE PARTNERS, LLC 4200 W. 115TH STREET, SUITE 100 LEAWOOD, KS 66211	^	^	^	Affiliate
MARINER ANDERSON ONE, LLC 4200 W. 115TH STREET, SUITE 100 LEAWOOD, KS 66211	^	^	^	Affiliate

## Signatures

/s/ Kirk Lambright, on behalf of Label Real Estate, LLC and Label Arts, LLC

03/04/2013

\_\_Signature of Reporting Person

Date

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

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.