## Edgar Filing: GOPAL SHOBANA - Form 5

GOPAL SH Form 5 January 08,										
FORM							OMB AP	PROVAL		
Check the no longer	<b>UNITED</b> is box if						OMB Number: Expires:	3235-0362 January 31, 2005		
to Section Form 4 o 5 obligati may cont	r Form ANN ions inue.							Estimated average burden hours per response 1.0		
See Instru 1(b). Form 3 H Reported Form 4 Transacti Reported	Filed pur <sup>Ioldings</sup> Section 17( ons	(a) of the Pub	tion 16(a) of the S plic Utility Holdir the Investment C	ng Compan	y Act of 1	935 or Section				
1. Name and Address of Reporting Person <u>*</u> GOPAL SHOBANA			2. Issuer Name <b>and</b> Ticker or Trading Symbol TORTOISE ENERGY INDEPENDENCE FUND, INC. [NDP]			5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last) 11550 ASF					Linucu	Director 10% Owner X Officer (give title Other (specify below) below) Vice President				
	(Street)	4. ]	4. If Amendment, Date Original Filed(Month/Day/Year)			6. Individual or Joint/Group Reporting (check applicable line)				
LEAWOO	D, KS 66211				-	X_ Form Filed by O Form Filed by M Person				
(City)	(State)	(Zip)	Table I - Non-Der	ivative Secu	rities Acqui	red, Disposed of,	or Beneficiall	y Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Code		osed of (D)	of Issuer's Fiscal Year (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		

Common 15.835 \$ Â Â 12/01/2016 L А 649.987 D (1) 15.99 Shares Common 15.678 \$ Â А Â 03/01/2017 L 649.987 D 16.59 Shares (1) 18.293 Common \$ Â Â 06/01/2017 L А 649.987 D 14.59 Shares (1) Â Â Common 09/01/2017 L 21.47 \$ 649.987 D А

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## Shares

(1) 12.81

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.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. of D S B O Eı Is Fi (It
				(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Addre	SS	Relationships						
	Director	10% Owner	Officer	Other				
GOPAL SHOBANA 11550 ASH STREET SUITE 300 LEAWOOD, KS 66211	Â	Â	Vice President	Â				
Signatures								
Shobana Gopal 0	1/08/2018							

**Explanation of Responses:** 

\* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

Date

- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) Automatic reinvestment of distribution by broker not made at the NDP dividend reinvestment plan price. This transaction is being reported on Form 5 pursuant to Rule 16a-6.

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.

\*\*Signature of

Reporting Person

**SEC 2270** 

(9-02)