

TORTOISE ENERGY INFRASTRUCTURE CORP

Form 3

December 21, 2012

FORM 3UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

OMB
Number: 3235-0104Expires: January 31,
2005Estimated 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 METROPOLITAN LIFE
INSURANCE CO/NY

(Last) (First) (Middle)

10 PARK AVENUE,Â P.O. BOX
1902

(Street)

MORRISTOWN,Â NJÂ 07962

(City) (State) (Zip)

2. Date of Event Requiring
Statement(Month/Day/Year)
12/19/20123. Issuer Name **and** Ticker or Trading SymbolTORTOISE ENERGY INFRASTRUCTURE CORP
[TYG]4. Relationship of Reporting
Person(s) to Issuer5. If Amendment, Date Original
Filed(Month/Day/Year)

(Check all applicable)

____ Director ____X__ 10% Owner
____ Officer ____ Other
(give title below) (specify below)6. Individual or Joint/Group
Filing(Check Applicable Line)
X Form filed by One Reporting
Person
____ 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)Tortoise Energy Infrastructure Corporation ⁽¹⁾ \$ 4,000,000

D Â

Tortoise Energy Infrastructure Corporation ⁽²⁾ \$ 11,000,000

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 Security4. Conversion
or Exercise5. Ownership
Form of6. Nature of Indirect
Beneficial Ownership
(Instr. 5)

Date Exercisable	Expiration Date	Title (Instr. 4)	Amount or Number of Shares	Price of Derivative Security	Derivative Security: Direct (D) or Indirect (I) (Instr. 5)

Reporting Owners

Relationships

Reporting Owner Name / Address

Director 10%
Owner Officer Other

METROPOLITAN LIFE INSURANCE CO/NY
10 PARK AVENUE
P.O. BOX 1902
MORRISTOWN, NJ 07962

Â Â X Â Â

Signatures

/s/ Daniel F. Scudder, Associate General
Counsel

12/20/2012

__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) 3.30% Senior Notes, Series J, Due 12/19/2019. *See* Exh 99-1.
- (2) 3.99% Senior Notes, Series L, Due 12/19/2024. *See* Exh 99-2.

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.