

TORTOISE PIPELINE & ENERGY FUND, INC.

Form 3

December 06, 2011

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

OMB APPROVAL

OMB Number: 3235-0104
 Expires: January 31, 2015
 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 * CFC Transactions, L.L.C. (Last) (First) (Middle) TWO NORTH LASALLE STREET, SUITE 800 (Street) CHICAGO, IL 60602 (City) (State) (Zip)	2. Date of Event Requiring Statement (Month/Day/Year) 10/31/2011	3. Issuer Name and Ticker or Trading Symbol TORTOISE PIPELINE & ENERGY FUND, INC. [TTP]	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 of Inv Advisor	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
--	--	--	--	--	---

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	

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
CFC Transactions, L.L.C. TWO NORTH LASALLE STREET SUITE 800 CHICAGO, IL 60602	Â	Â	Â	Affiliate of Inv Advisor
MREM Cohen GP, LLC 4200 W. 115TH STREET SUITE 100 LEAWOOD, KS 66211	Â	Â	Â	Affiliate of Inv Advisor
MREM Cohen LP, LLC 4200 W. 115TH STREET SUITE 100 LEAWOOD, KS 66211	Â	Â	Â	Affiliate of Inv Advisor
MREC FUNDING, LLC 4200 W 115TH ST STE 100 LEAWOOD, KS 66211	Â	Â	Â	Affiliate of Inv Advisor
CYPRESS CAPITAL MANAGEMENT, LP 450 SANSOME ST STE 200 SAN FRANCISCO, CA 94111	Â	Â	Â	Affiliate of Inv Advisor
CAPSTAN ASSET MANAGEMENT, LLC 4200 W 115TH ST STE 100 LEAWOOD, KS 66211	Â	Â	Â	Affiliate of Inv Advisor
TACTICAL INVESTMENT MANAGERS, LLC 4200 W 115TH ST STE 100 LEAWOOD, KS 66211	Â	Â	Â	Affiliate of Inv Advisor
ENTERPRISE RISK STRATEGIES, LLC 4200 W 115TH ST STE 100 LEAWOOD, KS 66211	Â	Â	Â	Affiliate of Inv Advisor
ERS INSURANCE, INC 4200 W 115TH ST STE 100 LEAWOOD, KS 66211	Â	Â	Â	Affiliate of Inv Advisor
	Â	Â	Â	Affiliate of Inv Advisor

CORRIDOR ENERGY LLC
4200 W 115TH ST
STE 100
LEAWOOD, KS 66211

Signatures

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

12/06/2011

__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).

^

Remarks:

4^ of^ 5

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.