Form **8937**(December 2011) Department of the Treasury Internal Revenue Service

Report of Organizational Actions Affecting Basis of Securities

► See separate instructions.

OMB No. 1545-2224

Part I Reporting I	ssuer			2 1 1
1 Issuer's name		2 Issuer's employer identification number (EIN)		
TORTOISE MLP FUND, INC				
3 Name of contact for additional information 4 Teleph			e No. of contact	5 Email address of contact
PAM KEARNEY			(866) 362-9331	TAXINFO@TORTOISEADVISORS.COM
6 Number and street (or P	O. box if mail is not	7 City, town, or post office, state, and Zip code of contact		
11FF0 ACH CTDEET CHIT	- 200	LEAWOOD KS 66311		
11550 ASH STREET, SUITE 8 Date of action	2 300	LEAWOOD, KS 66211		
o bato or action		-	sification and description	
11/30/2013		соммо	N STOCK	
10 CUSIP number	11 Serial number(12 Ticker symbol	13 Account number(s)
	,			
89148B101			NTG	
				ee back of form for additional questions.
				ate against which shareholders' ownership is measured for
				MMON SHAREHOLDERS DURING 2013 INCLUDING A
197 State 127 (21 - 1000) 1984	ERMINED TO BE N	ONTAXABLE	UPON COMPUTATION OF	NTG'S EARNINGS AND PROFITS AFTER THE TAX
YEAR-END.				
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7				
1 				
				rity in the hands of a U.S. taxpayer as an adjustment per
share or as a percenta	ige of old basis ► A	SHAREHOLI	DER'S BASIS IN NTG STO	CK IS REDUCED BY THE NONTAXABLE PORTION OF
DISTRIBUTIONS PAID PER	SHARE, AS FOLL	OWS: \$0.397	494 ON 3/1/2013, \$0.39868	8 ON 6/3/2013, \$0.399881 ON 9/3/2013, AND \$0.401075 ON
11/29/2013.				
				· · · · · · · · · · · · · · · · · · ·
<u> </u>				
16 Describe the calculation	on of the change in t	pasis and the	data that supports the calcu	ulation, such as the market values of securities and the
	-		# 100	OF CAPITAL AND REDUCE THE SHAREHOLDER'S BASIS
				'S BASIS ARE TREATED AS CAPITAL GAIN.
		٧		
I-				

Part I		Organizational Action (continued)				
17 Lis	st the a	applicable Internal Revenue Code sectio	n(s) and subsection(s) upon wh	nich the tax treatment is based ▶	TAX TREATMENT IS BASED		
UPON II	NTER	NAL REVENUE CODE SECTIONS 301(c) AND 316(a).				
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		*					
							
1							
18 C	an any	resulting loss be recognized? ► N/A					
				ji			
	3						
	-						
	•		District Control of the Control of t				
STOPMAN STEERING	2000,000						
19 P	rovide	any other information necessary to imple	ement the adjustment, such as	the reportable tax year ▶ N/A			
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r	Unde	r penalties of perjury, I declare that I have exa , it is true, correct, and complete. Declaration	amined this return, including accord of preparer (other than officer) is ba	npanying schedules and statements, a	and to the best of my knowledge and rer has any knowledge.		
Sign		6 // 4//	,		1		
Here	Signa	7 /14					
Signature ► ////// Date ► /////							
Table 200 - 200	Print	your name ► BRAD ADAMS	Preparer's signature	Title ► CFO	Obsert C is PTIN		
Paid	20.00	Print/Type preparer's name	1 Topardi 3 Signature	Date	Check if self-employed		
Preparent of the Prepar		Firm's name	_		Firm's EIN ▶		
		Firm's address ▶			Phone no.		
Send F	orm 89	37 (including accompanying statements) to: Department of the Treasur	ry, Internal Revenue Service, Ogd	en, UT 84201-0054		