

(Print or Tyne Resn

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

Washington, D.C. 20549
INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL	
OMB Number:	3235-0104
Estimated average burden hours per	
response	0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person – GUILFORD CAPITAL MANAGEMENT LLC	2. Date of Event Requiring Statement (Month/Day/Year) 09/15/2009		3. Issuer Name and Ticker or Trading Symbol TORTOISE CAPITAL RESOURCES CORP [TTO]				
(Last) (First) (Middle) 4200 W. 115TH STREET, SUITE 100	09/13/2009		(Check all applicable)		5. If Amendm	ent, Date Original Filed(Month/Day/Year)	
(Street)			Officer (give title below) Affil	10% Owner _X Other (specify below iate of Inv Advisor	Form filed by	Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person	
LEAWOOD, KS 66211					_/_ roim med b.	whole than one reporting retion	
(City) (State) (Zip)	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 Benefic (Instr. 5)	cial Ownership		
Common Stock	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)							
Title of Derivative Security (Instr. 4)	Date Exercisable and Expiration Date (Month/Day/Year)	ate Derivative Security		4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D) or Indirect (I)	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
	Date Expiration Exercisable Date	Title Amount or Number	er of Shares		(Instr. 5)		

Reporting Owners

		<u></u>	Relatio	onships
Reporting Owner Name / Address	Director	10% Owner	Officer	Other
GUILFORD CAPITAL MANAGEMENT LLC 4200 W. 115TH STREET SUITE 100 LEAWOOD, KS 66211				Affiliate of Inv Advisor
ASCENT INVESTMENT PARTNERS, LLC 4200 W. 115TH STREET SUITE 100 LEAWOOD, KS 66211				Affiliate of Inv Advisor
NATIONS GROUP ADVISORS, LLC 4200 W. 115TH STREET SUITE 100 LEAWOOD, KS 66211				Affiliate of Inv Advisor
MARINER ASSET MANAGEMENT, LLC 4200 W. 115TH STREET, SUITE 100 LEAWOOD, KS 66211				Affiliate of Inv Advisor
PALMER SQUARE CAPITAL MANAGEMENT, LLC 4200 W. 115TH STREET SUITE 100 LEAWOOD, KS 66211				Affiliate of Inv Advisor
PALMER SQUARE CAPITAL ADVISORS LLC 4200 W. 115TH STREET SUITE 100 LEAWOOD, KS 66211				Affiliate of Inv Advisor

Signatures

/s/ Martin C. Bicknell	03/10/2010
Signature of Reporting Person	Date

Explanation of Responses:

- $\mbox{\ensuremath{\star}}$ 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:

This Form 3 is filed today and reports the same securities by the following six filers Guilford Capital Management, LLC, Ascent Investment Partners, LLC, The Nations Group Advisors, LLC, Mariner Asset Management, LLC, Palmer Si

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.