FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

heck this box if no longer subject to
ection 16. Form 4 or Form 5
bligations may continue. See
otrustion 1/h)

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: 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

1. Name and Address of Reporting Person* Tecotzky Mark (Last) (First) (Middle) 53 FOREST AVENUE						Issuer Name and Ticker or Trading Symbol Ellington Financial LLC [EFC] Date of Earliest Transaction (Month/Day/Year) 12/27/2011								(Chec	k all app Direct Offict below Co	olicable) ctor er (give title w) -Chief Inve	below estment Office	Owner (specify) er	
(Street) OLD GREENV (City)			06870 		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indi Line) X	Forn	lual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person			
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day)				ction	ion 2A. Deemed Execution Date,			3. Transaction Code (Instr. 8) 4. Securit Disposed			s Acqui	red (A)	or	5. Am Secur Benef Owne	ount of ities icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
Common Shares rep. limited liability company interests				12/27/	2011	2011				v	Amount 154	(A) o (D)	Pil	7.17 ⁽¹⁾	(Instr.	ted action(s) 3 and 4) 4,212	D	(Instr. 4)	
Common Shares rep. limited liability company interests 12/28/			2011	011			P		190	A	\$	17.2 ⁽²⁾	4,402		D				
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	Exercise Le of Ivative curity (Month/Day/Year) if any (Month/Day/Year) Code 8)		Transa Code (nstr.	5. Nu of Deriv Secul Acqu (A) or Dispo of (D) (Instr and 5	ative rities ired osed	Expirat (Month)	ate Expiration Date		7. Title and Amount of Securities Underlying Derivative Security (Instr.: and 4) Amount or Number of Title Shares		nt er		9. Number of derivative Securities Beneficially Owned Following Reported Transactions (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

Explanation of Responses:

- 1. This transaction was executed in multiple trades at prices ranging from \$17.15 to \$17.17. The price reported above reflects the weighted average purchase price. The reporting person hereby undertakes to provide upon request to the SEC staff, the issuer or a security holder of the issuer full information regarding the number of shares and prices at which the transaction was effected. All purchases pursuant to this transaction were made pursuant to a 10b5-1 trading plan adopted by the reporting person.
- 2. This transaction was executed in multiple trades at prices ranging from \$17.15 to \$17.27. The price reported above reflects the weighted average purchase price. The reporting person hereby undertakes to provide upon request to the SEC staff, the issuer or a security holder of the issuer full information regarding the number of shares and prices at which the transaction was effected. All purchases pursuant to this transaction were made pursuant to a 10b5-1 trading plan adopted by the reporting person.

/s/ Sara Walden Brown, as attorney-in-fact for Mark <u>Tecotzky</u>

12/29/2011

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.