FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b).

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* <u>Tecotzky Mark</u>					2. Issuer Name and Ticker or Trading Symbol Ellington Financial LLC [EFC]								(Chec	k all app Dire	olicable)		ssuer Owner (specify		
(Last) (First) (Middle) 53 FOREST AVENUE						3. Date of Earliest Transaction (Month/Day/Year) 12/05/2011								X	belo	w) ``	below estment Offic)`	
(Street) OLD GREENWICH CT 06870 (City) (State) (Zip)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indi Line) X	Forn	al or Joint/Group Filing (Check Applicable orm filed by One Reporting Person orm filed by More than One Reporting erson			
		Tab	le I - No	on-Deriv	/ative	Sec	uritie	s Ac	quired	l, Di	sposed o	f, or E	Benefi	cially	Own	ed			
Date			2. Transa Date (Month/D		Exec y/Year) if an		A. Deemed xecution Date, any Month/Day/Year)		action (Instr.	4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 a			and 5) Seci Ben Owr		ount of ities icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) c	Pric	е		action(s) 3 and 4)		(Instr. 4)	
Common Shares rep. limited liability company interests 12/0				12/05/	2011	:011			P		258	A	\$1	\$16.96(1)		2,088	D		
Common Shares rep. limited liability company interests				12/06/	2011	2011					130	A	\$1	7.08 ⁽²⁾		2,218	D		
		Ta	able II -								osed of, convertib				wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Exercise (Month/Day/Year) if any Code (Month/Day/Year) 8) code (month/Day/Year)		Transa Code (8)	Instr.	5. Nu of Deriv Secu Acqu (A) o O Dispo of (D) (Instr and 5	rities ired r osed) : 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Exercisable Date		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amoun or Number of Title Shares		Der Sec (Ins	rice of ivative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (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 \$16.93 to \$17.00. 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 \$16.98 to \$17.14. 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 **Tecotzky**

12/07/2011

** 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.