## FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington,	DC	20549
wasnington,	D.C.	20049

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burd	len								
hours per response:	0.5								

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

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 Freedman Constance					EC	2. Issuer Name and Ticker or Trading Symbol   EQUITY LIFESTYLE PROPERTIES INC   [ELS]									all applicable)  Director		10% Ov	ner
(Last) (First) (Middle) C/O EQUITY LIFESTYLE PROPERTIES, INC.							of Earlie	est Tra	nsaction (	Month	/Day/Year)		Officer below)	r (give title )		Other (s below)	specify	
TWO NORTH RIVERSIDE PLAZA, SUITE 800				4. It	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person					
(Street) CHICAGO IL 60606												Form filed by More than One Reporting Person						
(City) (State) (Zip)				-   Ru	Rule 10b5-1(c) Transaction Indication  Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.													
		Tab	le I - No	n-Deri	vative	Se	curiti	es A	cquired	l, Dis	sposed (	of, or Be	neficia	Ily Owne	d			
1. Title of Security (Instr. 3)  2. Transar Date (Month/Da				ay/Year)   E		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disposed Code (Instr. 5)		ities Acquired (A) or d Of (D) (Instr. 3, 4 and		5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	v	Amount	(A) or (D)	Price	Transac	Transaction(s) (Instr. 3 and 4)			(111511. 4)	
Common	Stock, par	value \$.01		04/03	3/2023	3			<b>A</b> <sup>(1)</sup>		288	A	\$56.3	6,	,522	D		
		Т										, or Ben ible secເ		y Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	ercise (Month/Day/Year) of vative	3A. Deem Executior if any (Month/Da	n Date, Transacti Code (Ins			5. Number on of		6. Date Exercisable and Expiration Date (Month/Day/Year)		Amount of		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transactions (Instr. 4)	s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amount or Number of Shares					
Non- Qualified Stock Option (Right to Buy)	\$66.81								01/28/20	)21	07/28/2030	Common Stock, par value \$.01	7,485		7,485	i	D	
Non- Qualified Stock Option (Right to Buy)	\$66.81								07/28/20	)21	07/28/2030	Common Stock, par value \$.01	1,120		8,605	i	D	
Non- Qualified Stock Option (Right to Buy)	\$68.74								10/27/20	)21	04/27/2031	Common Stock, par value \$.01	7,275		15,880	0	D	
Non- Qualified Stock Option (Right to Buy)	\$68.74								04/27/20	)22	04/27/2031	Common Stock, par value \$.01	1,090		16,970	0	D	
Non- Qualified Stock Option (Right to Buy)	\$79.72								10/26/20	)22	04/26/2032	Common Stock, par value \$.01	6,270		23,240	0	D	
Non- Qualified Stock Option (Right to	\$79.72								04/26/20	)23	04/26/2032	Common Stock, par value \$.01	940		24,180	0	D	

**Explanation of Responses:** 

1. Represents shares acquired through ELS' Employee Stock Purchase Plan

Remarks:

## Attorney for Constance Freedman

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.