FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | | | |
|--------------|----------|--|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-028 | | | | | | | | | |

| OMB Number: | 3235-0287 | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|
| Estimated average burden | | | | | | | | |
| 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

| Name and Address of Reporting Person* MAYNARD ROGER | | | | | EC | 2. Issuer Name and Ticker or Trading Symbol EQUITY LIFESTYLE PROPERTIES INC [ELS] | | | | | | | | | | all appl Direct Office | icable) or r (give title | Other | Owner (specify |
|--|--|------|-----------|---|---|---|--|---|-------------------------|---|---------|--|-------------------|--|--------------------------|--|---|--|---|
| (Last) (First) (Middle) C/O EQUITY LIFESTYLE PROPERTIES, INC. TWO NORTH RIVERSIDE PLAZA #800 | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 09/25/2017 | | | | | | | | | below) below) EVP - Investments | | | | | |
| (Street) CHICAGO IL 60606 (City) (State) (Zip) | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| | | Tabl | e I - Non | n-Deriva | ative | Se | curitie | s Ac | quired, | Dis | posed o | f, or | Ben | efici | ally | Owne | d | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da | | | | | | Execut ay/Year) if any | | A. Deemed kecution Date, any lonth/Day/Year) | | Transaction Disposed Code (Instr. 5) | | ties Acquired (A) d Of (D) (Instr. 3, 4 | | | 4 and Seco | | ially Following | 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 | | e | Transaction(s) (Instr. 3 and 4) | | | |
| Depositary Shares ⁽¹⁾ 09/25/ | | | | | /2017 | | | | J ⁽²⁾ | | 8,000 | D ⁽²⁾ \$ | | \$2 | 25 ⁽²⁾ | | 0 | 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) | tive Conversion Date ty or Exercise (Month/Day/Year) if any | | Date, | 4. Transaction Code (Instr. 8) | | Deriv | rative rities ired r osed) | 6. Date Expiratic (Month/E | on Date | Amount Securitie Underlyi Derivativ Security and 4) | | unt of urities erlying vative urity (In 4) Amor Nur of | ount nber | | vative urity r. 5) | 9. Number o 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. Each Depositary Share represents 1/100th of a share of the issuer's 6.75% Series C Cumulative Redeemable Perpetual Preferred Stock (the "Series C Preferred Stock").
- 2. The Series C Preferred Stock was redeemed by the issuer on September 25, 2017. In connection with the Series C Preferred Stock redemption, the Depositary Shares were redeemed by the issuer at a price of \$25.00 per depositary share.

Remarks:

Jennifer Krebs by Power of Attorney for Roger Maynard

09/27/2017

** 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.