FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPRO	DVAL							
	OMB Number:	3235-0287							
	Estimated average burden								
l	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 an	EC	2. Issuer Name and Ticker or Trading Symbol EQUITY LIFESTYLE PROPERTIES INC [ELS]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify				Owner				
(Last) 2 NORTH	nst) (First) (Middle) NORTH RIVERSIDE PLAZA #800					3. Date of Earliest Transaction (Month/Day/Year) 11/01/2011								X	below) Exec VP- Property Management			
(Street) CHICAGO IL 60606 (City) (State) (Zip)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indiv Line) X	vidual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person			
		Tabl	le I - N	lon-Deriv	ative	Sec	uritie	s Ac	quire	ed, Di	isposed o	f, or E	Benefic	cially (Owne	ed		
1. Title of S	ion /Year)	Execution Date,		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 ar			d 5) Secu Bene Own		nount of rities ificially ed Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership					
								Code	v	Amount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)	
Common	Stock, par v	value \$.01		11/01/2	011	11			S		5,000	D	\$65.9	046(1)	046 ⁽¹⁾ 153,73		D	
Common	Stock, par v	011	11			S		5,000	D	\$65.1	812(2)	812 ⁽²⁾ 148,737		D				
Common	Stock, par v											1	,193.9	I	by 401K Plan			
Series A (Perpetual										10,000	D							
		Та	able II								oosed of, convertib				ned			
1. Title of Derivative Security (Instr. 3)	tive Conversion Date ty or Exercise (Month/Day/Year) if any		tion Date,	Code (Fransaction of Code (Instr. Derivative		ative rities ired osed	Expir. (Mont	te Exer ation D th/Day/	Year) Securities Underlying Derivative Security (Instr. 3 and 4) Amount or Number of		Deriv Secu (Inst		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 \$65.67 to \$66.03. The price reported above reflects the weighted average sale 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.

2. This transaction was executed in multiple trades at prices ranging from \$64.68 to \$65.67. The price reported above reflects the weighted average sale 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.

Remarks:

Kenneth Kroot by Power of Attorney for Ellen Kelleher

11/02/2011

** 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.