## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-0287							
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*  CHISHOLM DONALD S					EC	2. Issuer Name and Ticker or Trading Symbol EQUITY LIFESTYLE PROPERTIES INC [ ELS ]											ationship of Reportin call applicable) Director Officer (give title		10% C		
(Last) (First) (Middle) 505 E. HURON, SUITE 307							3. Date of Earliest Transaction (Month/Day/Year) 04/01/2005										belov			below)	
(Street) ANN AR (City)			48104 Zip)		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Indiv Line) X	Forn	or Joint/Group Filing (Check Applicable m filed by One Reporting Person m filed by More than One Reporting son			
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
			2. Transaction Date (Month/Day/Year)		ar)   E	2A. Deemed Execution Date, if any (Month/Day/Year)		Cod	Transaction Code (Instr.						, 4 and Sec Bei Ow		Amount of curities neficially vned Following ported		wnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Cod	e v		Amount		(A) or (D)	or Price		Transaction(s) (Instr. 3 and 4)				(IIISU: 4)	
Common Stock, par value \$.01 04/0					L/ <b>200</b> 5	/2005			I			271		A	\$2	29.54	14,059			I	**(1)
Common Stock, par value \$.01																62,432		D			
Common Stock, par value \$.01																7,000			I	*(2)	
		Та	able II - I (									sed of, onvertib					wned				
1. Title of Derivative Security (Instr. 3)	reirivative ecurity or Exercise nstr. 3)  Price of Derivative Security  Date (Month/Day/Year)  (Month/Day/Year)  Execution Date, if any (Month/Day/Year)  (Month/Day/Year)  Symptotic description or Exercise (Month/Day/Year)  Execution Date, if any (Month/Day/Year)  Execution Date, if any (Month/Day/Year)			4. Transa Code ( 8)	(Instr.	str. Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)					Amount of Securities Underlying Derivative Security (Inst and 4)  Amount of Securities Underlying Derivative Security (Inst and 4)		of s ng e (Instr. :	Deri Sec (Ins	rice of vative urity tr. 5)	ative derivative rity Securities		10. Ownership Form: Direct (D) or Indirect I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

## **Explanation of Responses:**

- 1. Shares reported herein are beneficially owned by The Security Trust Company as Trustee of the Manufactured Home Communities, Inc. Supplemental Employees Retirement Plan for the benefit of the Reporting Person.
- 2. Shares reported herein are beneficially owned by the Donald S. Chisholm Trust, Samuel Zell, Trustee. Mr. Chisholm is the beneficiary of such trust.

By: Jennifer L. Usher, by

04/04/2005 Power of Atty. For: Donald S.

Chisholm

\*\* 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.