FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	JVAL						
OMB Number:	3235-0287						
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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

					01 \	JCCI	1011 30(11) 01 11	ic ilive	Council	COII	ipariy Aci	. 01 13-										
1. Name and Address of Reporting Person* <u>Huang Tao</u>					EC	2. Issuer Name and Ticker or Trading Symbol EQUITY LIFESTYLE PROPERTIES INC [ELS]										5. Relationship of Reportin (Check all applicable) X Director				ing Person(s) to Issuer			
							[HEO]											Officer (give title		Other (specify			
(Last)	(F	2 5	O Data of Fadinat Transaction (At 11 /D AY)														below)						
C/O EQUITY LIFESTYLE PROPERTIES						3. Date of Earliest Transaction (Month/Day/Year) 06/01/2017																	
TWO NORTH RIVERSIDE PLAZA, SUITE 800																							
					_ 4. If	Am	endme	nt, Dat	e of C	riginal F	iled	(Month/D	ay/Yea	ır)	6.	6. Individual or Joint/Group Filing (Check Applicable							
(Street)													Lir	Line)									
CHICAGO IL 60606																	X Form filed by One Reporting Person						
GIIIGIIG	,,		00000																re tha	n One Repo	orting		
(0::)	(0		(Persor	1					
(City)	(S	tate)	(Zip)																				
		Tab	le I - Nor	n-Deriv	/ative	Se	curit	ies A	cqu	ired, C	Disp	osed (of, or	Ben	eficia	lly	Owned	l					
1. Title of	Security (Ins	tr. 3)		2. Trans	saction	\Box	2A. De			3.		4. Secur					5. Amou			vnership	7. Nature		
				Date (Month/	Dav/Ye	Day/Year) i		Execution Date, if any (Month/Day/Year)		Code (Instr. 5)			sed Of (D) (Instr. 3,		. 3, 4 ar	id	Securities Beneficially			: Direct r Indirect	of Indirect Beneficial		
					,.							'				Owned Following		(l) (Instr. 4)		Ownership			
										Code	v	Amount		A) or	Price		Reported Transaction(s)				(Instr. 4)		
										Couc		Amount	" (D)		Trice		(Instr. 3	and 4)					
Common Stock, par value \$.01 06/01					1/2017	/2017				A ⁽¹⁾		1,44	8	A	\$69	.1	5,	5,773		D			
				ve Securities Acquii								. ,											
			abie II -	Deriva (e.g., p	itive s outs, (sec call	uritie Is, wa	s Ac ırran	quir ts, o	ea, Di ptions	spc s, c	osea oi onverti	, or E ible s	senet ecur	iciaii ities)	y O	wnea						
1. Title of	2.	3. Transaction	3A. Deeme	74 T	4.		5 N	umber	le D	ate Ever	rical	nle and	7 Titl	a and A	mount	8	Price of	9. Number	of	10.	11. Nature		
Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative Security	Date (Month/Day/Year)	Execution if any (Month/Da	Date,	4. Transaction Code (Instr 8)		n of E		Exp (Mo	. Date Exercisable an Expiration Date Month/Day/Year)			7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		ecurity	De Se	rivative curity str. 5)	derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Owners Form: Direct (or Indir (I) (Inst	Ownership	of Indirect Beneficial Ownership ct (Instr. 4)		
			ŀ			anu s)		+				<u> </u>			-								
					Code	v	(A)	(D)	Date Exe	e ercisable		piration ite	Title	O N O	umber								
Non- Qualified Stock	\$74.53								11/	10/2016	05	/10/2026	Comn	k, ا	6,710			6,710		D			
Option (Right to Buy)													par value \$.01										
Non- Qualified Stock Option (Right to Buy)	\$ 81.15								11/	02/2017	05	/02/2027	Comn Stoc par va \$.0	k, lue 1	3,710			13,710)	D			
		-					-	+	+		+			_		+							
Non- Qualified Stock Option (Right to Buy)	\$81.15								05/	02/2018	05	/02/2027	Comn Stoc par va \$.0	k, lue 1	4,480			14,480)	D			
Non- Qualified Stock Option (Right to	\$74.53								05/	10/2017	05	/10/2026	Comm Stoc par va \$.0	k, lue	840			7,550		D			

Explanation of Responses:

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

Remarks:

Jennifer Krebs by Power of Attorney for Tao Huang

06/05/2017

** Signature of Reporting Person

Date

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

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.

 $^{^{\}star}$ 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).