П

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| OMB APPRO | VAL | | | | | | |
|-------------------------|-----|--|--|--|--|--|--|
| OMB Number: 3235-0287 | | | | | | | |
| Estimated average burde | en | | | | | | |
| hours per response: | 0.5 | | | | | | |

| | | | 2. Issuer Name and Ticker or Trading Symbol EQUITY LIFESTYLE PROPERTIES INC ELS | | ationship of Reporting Person(s) to Issuer k all applicable) Director 10% Owner | | |
|--------------------------------------|---------|----------|---|------------------|---|-----------------------|--|
| | | (Middle) | | x | Officer (give title below) | Other (specify below) | |
| C/O FOUITV LIFESTVLE DDODEDTIES INC | | | 3. Date of Earliest Transaction (Month/Day/Year) | | Co-Vice Chairman | of the Board | |
| TWO NORTH RIVERSIDE PLAZA, SUITE 800 | | | 04/30/2019 | | | | |
| (Street) | | | - 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Indi Line) | vidual or Joint/Group Fili | ng (Check Applicable | |
| CHICAGO | Ц | 60606 | | X | Form filed by One Re | porting Person | |
| | | | - | | Form filed by More the Person | an One Reporting | |
| (City) | (State) | (Zip) | | 1 | | | |

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| ······································ | | | | | | | | | | | |
|--|--|---|------------------------------|---|--------|---------------|---|---|---|---------------------------------|--|
| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transa Code (8) | | | | 5. Amount of Securities Beneficially Owned 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 value \$.01 | 04/30/2019 | | A ⁽¹⁾ | | 857 | A | \$116.7 | 65,757 | D | | |
| Common Stock, par value \$.01 | 04/30/2019 | | A ⁽²⁾ | | 342 | A | \$116.7 | 66,099 | D | | |
| Common Stock, par value \$.01 | | | | | | | | 149,400 | I | By Spouse and Children | |
| Common Stock, par value \$.01 | | | | | | | | 130,236 | I | By Spouse | |

| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned |
|---|
| (e.g., puts, calls, warrants, options, convertible securities) |

| I | | | | | | | | | | | | | | | |
|---|---|--|---|------------------------------|---|--|--|---------------------|-------------------------------------|-------|--|---|--|--|--|
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transa Code (8) | | of Deriv Secu Acqu (A) or Dispo of (D) | Expiration Date (Month/Day/Year) (Month/Day/Year) (N) or (D) sposed (D) str. 3, 4 | | Expiration Date (Month/Day/Year) | | and ht of ties ying tive ty (Instr. 3 | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |

Explanation of Responses:

1. Grant of restricted stock subject to vesting as follows: 1/3 on 10/30/19, 1/3 on 4/30/20, and 1/3 on 4/30/21

2. Grant of restricted stock subject to vesting as follows: 1/3 on 4/30/20, 1/3 on 4/30/21, and 1/3 on 4/30/22

Remarks:

Jennifer Krebs by Power of Attorney for Thomas

05/02/2019

Date

Heneghan ** Signature of Reporting Person

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.