Edgar Filing: Berman Michael B - Form 4

Berman Mic Form 4 March 12, 20										
FORM	14						NOLO		OMB AF	PPROVAL
	UNII	EDSTATE			AND EX , D.C. 20		NGE C	COMMISSION	OMB Number:	3235-0287
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction Kase STATEMENT OF CHAN Filed pursuant to Section 1 Section 17(a) of the Public Us 30(h) of the In				GES IN SECUF 6(a) of th ility Hol	BENEF RITIES ne Securit ding Corr	ICIA ties E	e Act of 1934, 71935 or Section	January 3 Expires: 200 Estimated average burden hours per response 0.		
1(b). (Print or Type I	Responses)									
1. Name and A Berman Mie	address of Repo	orting Person <u>*</u>	Symbol EQUIT	Y LIFES	l Ticker or TYLE NC [ELS		ng	5. Relationship of Issuer (Chec	Reporting Pers k all applicable	
(Last) 424 WEST	(First) HURON ST	(Middle)	3. Date of (Month/D 12/31/20	-	ransaction			Director X Officer (give below) E		Owner er (specify
CHICAGO,	(Street) IL 60610			ndment, D hth/Day/Yea	ate Origina r)	1		6. Individual or Jo Applicable Line) _X_ Form filed by O Form filed by M Person	One Reporting Pe	rson
(City)	(State)	(Zip)	Tabl	e I - Non-l	Derivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction (Month/Day/	any		3. Transacti Code	4. Securi on(A) or D (Instr. 3,	ties A ispose	cquired d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial
Common Stock, par	12/31/2008	3		Code V $J_{(1)}^{(1)}$	Amount 0.002	(D) D	Price \$ 0	(Inst. 5 and 4) 120.298	I	401K
value \$.01 Common Stock, par value \$.01	02/10/2009)		J <u>(2)</u>	0.711	A	\$ 38.47	121.009	I	401K
Common Stock, par value \$.01	06/22/2009)		J <u>(3)</u>	0.567	D	\$ 36.95	120.442	I	401K
Common Stock, par	09/30/2009)		J <u>(3)</u>	0.491	D	\$ 43.01	119.951	Ι	401K

value \$.01

Common Stock, par value \$.01	12/23/2009	J <u>(3)</u>	0.451	D	\$ 48.96	119.5	Ι	401K
Common Stock, par value \$.01						36,651.88	D	
Common Stock, par value \$.01						8,333	Ι	by Trust

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

Persons who respond to the collection of	SEC 1474
information contained in this form are not	(9-02)
required to respond unless the form	
displays a currently valid OMB control	
number.	

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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. ionNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	s	Date	7. Title Amou Under Securi (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	⁴, and 3)⁷ (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Berman Michael B 424 WEST HURON STREET CHICAGO, IL 60610	424 WEST HURON STREET							
Signatures								
Mary Jo Kucera by Power of A Berman		03/12/2010						
**Signature of Report		Date						

Explanation of Responses:

- * 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).
- (1) Adjustment due to rounding of shares as a result of change in 401K provider.
- (2) Dividends were reinvested into Michael B Berman's ELS 401K share account.
- (3) Shares were sold on a pro rata basis to pay for the Trustee Fee.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.