MAYNARD ROGER

Check this box

if no longer

subject to

Form 4

January 02, 2013

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB 3235-0287

Number:

January 31,

2005

0.5

Expires:

Estimated average

OMB APPROVAL

burden hours per response...

Section 16. Form 4 or Form 5 obligations may continue.

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

1(b).

Shares

(Print or Type Responses)

See Instruction

1. Name and Address of Reporting Person * MAYNARD ROGER			2. Issuer Name and Ticker or Trading Symbol EQUITY LIFESTYLE PROPERTIES INC [ELS]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) EQUITY LIFT PROPERTIES RIVERSIDE 1	S, INC., TWO	3. Date of Earliest Transaction (Month/Day/Year) 12/31/2012					Director 10% Owner Officer (give title Other (specify below) EVP Asset Management				
	4 If Δmeno	4 If Amendment Date Original					6. Individual or Joint/Group Filing(Check				
	(Street)		4. If Amendment, Date Original Filed(Month/Day/Year)					Applicable Line)			
CHICAGO, II	,					_X_ Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(State)	(Zip)	Table	I - Non-Dei	rivative S	ecurit	ies Acqı	uired, Disposed of	f, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Year	Execut any		3. Transactic Code (Instr. 8)	4. Securion(A) or D (D) (Instr. 3,	ities Arispose 4 and (A) or	cquired d of	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 Ownership (Instr. 4)	
Common Stock, par value \$.01	12/31/2012			F	4,131	` /	\$ 66.5	59,073	D		
Common Stock, par value \$.01								510.806	I	by 401K Plan	
Depositary Shares								8,000	D		

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

Edgar Filing: MAYNARD ROGER - Form 4

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 control number.

SEC 1474 (9-02)

9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr

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

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Titl	le and	8. Price of	
Derivative Conversion		(Month/Day/Year)	Execution Date, if	TransactionNumber		Expiration Date		Amount of		Derivative	
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	rlying	Security	
(Instr. 3) Pric	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	Derivative Securities Acquired		Securities (Instr. 3 and 4)		(Instr. 5)	i
	Derivative				Securities						
	Security				Acquired						1
	·				(A) or						1
					Disposed						,
					of (D)						,
					(Instr. 3,						
					4, and 5)						
					, ,						
									Amount		
							Expiration Date	Title Num of			
									Number		
									of		
				Code V	$^{\prime}$ (A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

MAYNARD ROGER EQUITY LIFESTYLE PROPERTIES, INC. TWO NORTH RIVERSIDE PLAZA #800 CHICAGO, IL 60606

EVP Asset Management

Signatures

Mary Jo Kucera by Power of Attorney for Roger Maynard

01/02/2013

**Signature of Reporting Person

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).

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.

Reporting Owners 2