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Waite Patrick	k										
Form 4											
January 03, 2	2018										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								OMB AF	OMB APPROVAL		
	- UNITE	DSTATES		shington,			NGE C	COMMISSION	OMB Number:	3235-0287	
Check thi	is box		vv az	sington,	D.C. 20	549				January 31,	
if no longer subject to STATEMENT OF CI				GES IN I	BENEF	ICIA	NERSHIP OF	EXDIFES:			
subject to Section 1)			SECURITIES					Estimated average burden hours per		
Form 4 or									response	0.5	
Form 5	Filed p	ursuant to	Section 1	6(a) of the	e Securit	ies E	xchang	e Act of 1934,			
obligatior may conti		7(a) of the	Public Ut	ility Hold	ling Con	npan	y Act of	1935 or Section	1		
See Instru		30(h)	of the In	vestment	Compan	y Ac	t of 194	40			
1(b).											
	`										
(Print or Type R	(esponses)										
Waite Patrick Symbol				Name and Ticker or Trading 5. Relationship o					f Reporting Person(s) to		
				i tunic anu	Tieker of	maan	ing	Issuer			
				EQUITY LIFESTYLE							
			~	RTIES IN		1		(Check all applicable)			
(Last)	(First)	(Middle)	3. Date of	Earliest Tra	ansaction	-		Director	10%	Owner	
				h/Day/Year)				Officer (give title Other (specify			
				/31/2017				below) below) EVP & Chief Operating Officer			
PROPERTI	ES, INC., TWO	O NORTH							or operating o		
RIVERSIDE	E PLAZA, SUI	TE 800									
			4. If Ame	If Amendment, Date Original				6. Individual or Joint/Group Filing(Check			
			Filed(Mor	Month/Day/Year)				Applicable Line)			
								X Form filed by One Reporting Person Form filed by More than One Reporting			
CHICAGO,	IL 60606							Person		porting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction D	ate 2A. Deer		3.	4. Securi		_	5. Amount of	6. Ownership	-	
Security		n Date, if Transaction(A) or Disposed of (D)				-		Form: Direct			
(Instr. 3)		any	- (- -)	Code (Instr. 3, 4 and 5) (Instr. 8)			5)	-	(D) or	Beneficial Ownership	
		(Month/I	Day/Year)					Owned Following			
								Reported	(IIIsu: 4)	(Instr. 4)	
						(A) or		Transaction(s)			
				Code V	Amount		Price	(Instr. 3 and 4)			
Common							\$				
Stock, par	12/31/2017			F(1)	8,442	D	, 9.02	64,159	D		
value \$.01							07.02				

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

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.

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 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)	4. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration D (Month/Day, e	6. Date Exercisable and Expiration Date (Month/Day/Year)		le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address		Relationships						
	Director	10% Owner	Officer	Other				
Waite Patrick C/O EQUITY LIFESTYLE PROPERTIES, INC. TWO NORTH RIVERSIDE PLAZA, SUITE 800 CHICAGO, IL 60606			EVP & Chief Operating Officer					
Signatures								
Barb Itter by Power of Attorney for Patrick Waite	01/03	/2018						
**Signature of Reporting Person	D	ate						

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) Represents the withholding of shares for the payment of tax liablity incurred upon vesting of restricted shares.

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.