EQUITY RESIDENTIAL

Form 4

November 03, 2014

FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION									OMB APPROVAL		
								OMB	3235-0287		
Washington, D.C. 20549 Check this box							Number:	January 31			
if no lon	E CHAN	ICES IN	BENEFIC	DSHID OF	Expires:	2005					
subject t Section Form 4 o	r Char	SECUE		KSHIF OF	Estimated average burden hours per response						
Form 5 obligation may con <i>See</i> Instruction 1(b).	Section 17(a) of the	Public U	tility Hol	e Securities ding Compa Company	any A	ct of 19	ct of 1934, 35 or Section			
(Print or Type	Responses)										
1. Name and Address of Reporting Person * Powers John			Symbol		l Ticker or Tra			5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (I	Middle)	_	of Earliest T	ENTIAL [I ransaction	2QK]		(Check	all applicable))	
TWO NORTH RIVERSIDE PLAZA, SUITE 400				(Month/Day/Year)				Director 10% Owner _X_ Officer (give title Other (specify below) Executive Vice President			
	(Street)			endment, Da onth/Day/Year	ate Original		Ap	Individual or Joir plicable Line) _ Form filed by On			
CHICAGO	, IL 60606						_	Form filed by Mo			
(City)	(State)	(Zip)	Tab	le I - Non-I	Derivative Sec	curities	s Acquire	ed, Disposed of,	or Beneficiall	y Owned	
1.Title of Security (Month/Day/Year) Execution any (Month/D			Date, if Transaction Disposed of (D) Code (Instr. 3, 4 and 5)				red (A)	5. Amount of 6. Securities Ownershi Beneficially Form: Owned Direct (D) Following or Indirect Reported (I) Transaction(s) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
~				Code V	Amount	(D)	Price	(Instr. 3 and 4)			
Common Shares Of Beneficial Interest	10/31/2014			S	5,649.859	D	\$ 69.56	0	I	SERP Account	
Common Shares Of Beneficial Interest								1,500.4199	D		
Common Shares Of Beneficial Interest								292.613 <u>(1)</u>	I	401(k) Plan	

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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.

SEC 1474

(9-02)

9. Nu Deriv Secur Bene

Follo Repo Trans (Insti

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	isable and	7. Titl	e and	8. Price of	9
Derivative C		Conversion	(Month/Day/Year)	Execution Date, if	Transaction	orNumber	Expiration Date		Amount of		Derivative	J
	Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	,
(Instr. 3)		Price of		(Month/Day/Year)	(Instr. 8)	Derivative			Securities (Instr. 3 and 4)	(Instr. 5)]	
	Derivative					Securities					(
		Security				Acquired]
						(A) or						J
						Disposed						-
						of (D)						(
						(Instr. 3,						
						4, and 5)						
										A		
										Amount		
						Date Exercisable		Title N	or			
									Number			
				C 1 17	(A) (D)				of			
					Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Powers John TWO NORTH RIVERSIDE PLAZA, SUITE 400 CHICAGO, IL 60606

Executive Vice President

Signatures

s/ By: Jane Matz, Attorney-in-fact

**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).

Represents shares acquired through profit sharing contributions and dividend reinvestment activity in the reporting person's account with the Equity Residential Advantage 401(k) Retirement Savings Plan, a plan qualified under Section 401(k) of the Internal Revenue Code of 1986, as amended. Such shares represent acquisitions through October 11, 2014.

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