FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington,	D.C.	20549	
vasimigton,	D.O.	200-0	

Wasnington, D.C. 20549	OMB APPROVAL			
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-0		

- 1		
	OMB Number:	3235-0287
	Estimated average but	rden
	hours per response.	0.5

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

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

	nd Address of MARY E	Reporting Person*			BO	STC	ON P	ROI	ker or Tradi PERTIES [N/A]					heck a		icable)	g Per	son(s) to Iss	
(Last) 800 BOY	(Fi /LSTON S	,	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 05/31/2023									Officer below)	(give title		Other (s below)	pecify
SUITE 1900					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)	N M	Α (02199													filed by Mor		orting Perso n One Repo	
(City)	(St	tate) ((Zip)		1_			. ,	Transa										
	Check this box to indicate that a transaction was made pursuant satisfy the affirmative defense conditions of Rule 10b5-1(c). See																		
		Table	e I - No	n-Deriva	ative \$	Secu	urities	s Ac	quired, D	isp	osed (of, or Be	enefici	ally O	wne	d			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						Execution Dat		Date,	e, Transaction D Code (Instr. 5		4. Secur Dispose 5)	i. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 S)			4 and Securit Benefic Owned		Form (D) o	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership
					Code V Amount (A) or (D)			Price	_ Ti	Reported Transaction(s) (Instr. 3 and 4)				Instr. 4)					
		Ta							uired, Dis , options						ned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deen Executio if any (Month/D	n Date,	4. Transaction Code (Instr. 3)		of		6. Date Exercisabl Expiration Date (Month/Day/Year)		Amount of		f s g Security			9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
c					Code	v	(A)	(D)	Date Exercisable	Ex _I	piration te	Title	Amount or Number of Shares	1					
LTIP Units ⁽¹⁾	(1)	05/31/2023			A		3,390		(1)(2)		(1)	Common OP Units	3,390	\$0	.25	4,894		D	

Explanation of Responses:

1. Represents units of limited partnership interest in the Issuer issued pursuant to Boston Properties, Inc.'s ("BXP"), the Issuer's general partner, equity based incentive programs ("LTIP Units"). Conditioned upon minimum allocations to the capital accounts of the LTIP Units for federal income tax purposes, each LTIP Unit may be converted, at the election of the Issuer or the holder, into a common unit of limited partnership interest in the Issuer ("Common OP Unit"). Each Common OP Unit acquired upon conversion of an LTIP Unit may be presented for redemption, at the election of the holder, for cash equal to the then fair market value of a share of BXP's common stock, except that BXP may, at its election, acquire each Common OP Unit so presented for one share of BXP's common stock. LTIP Units

2. The 3,390 LTIP Units will vest on the earlier of (i) May 31, 2024 and (ii) the date of BXP's 2024 annual meeting of stockholders.

Remarks:

Kelli A. DiLuglio, as Attorneyin-Fact

** 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.