FORM 4

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington,	D.C. 20549
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STATEMENT	OF	CHANGES	IN BEN	EFICIAL	OWNERSHIP

OMB APP	ROVAL								
OMB Number: 3235-02									
Estimated average burden									
hours per response:	0.5								

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 Michael F	Reporting Person*			BO	STC	N PI	ROP	er or Tradir ERTIES [N/A]					heck a	all applic Directo	able)	g Perso	on(s) to Issu 10% Ow Other (s	rner
(Last) 800 BOY	(Fi LSTON ST	,	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 02/02/2024								X	svp &	t Chief A	.cctg.	off. of G	P	
(Street) BOSTON (City))2199 Zip)						of Original Fi				Lir	ne) X	Form fi	led by One	Repo	(Check App rting Persor One Repor	1
	`				s	Check t satisfy t	this box the affirr	to indi- native	Transa	ansac	ction was r	made pursua 10b5-1(c). S	ant to a co ee Instruc	tion 10.	•		plan th	at is intended	d to
		Tabl	e I - Non-	Derivat	tive	Secu	urities	S Ac	quired, D	isp	osed c	of, or Be	neficia	illy O	wnec	l .			
Date				2. Transact Date Month/Day	Execution Date			Date,	Transaction Disposed (rities Acquired (A) or ad Of (D) (Instr. 3, 4 and		Benefici Owned F		es For ially (D) Following (I) (m: Direct or Indirect Instr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount (A) or (D)		r Price	т		nsaction(s) tr. 3 and 4)		(Instr. 4)
	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 Da if any (Month/Day/\(^1)	ate, Transa Code (l		tion istr.	of E		Expiration D	. Date Exercisable and Expiration Date Month/Day/Year)		d 7. Title and Amount of Securities Underlying Derivative Se (Instr. 3 and 4		Deri	rice of ivative urity tr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					ode \	v	(A)		Date Expiration Exercisable Date Title			Amount or Number of Shares							
LTIP Units ⁽¹⁾	(1)	02/02/2024		I	A		4,474		(1)(2)		(1)	Common OP Units	4,474	\$0	0.25	28,460		D	

Explanation of Responses:

1. Represents units of limited partnership in the Issuer issued as long term incentive compensation 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 redeemed, 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 redemption for one share of BXP's common stock. LTIP Units have no expiration date.

2. The 4,474 LTIP Units vest in four equal annual installments beginning on January 15, 2025.

Remarks:

/s/ Kelli A. DiLuglio, as Attorney-in-Fact

02/06/2024

** Signature of Reporting Person

Date

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.