FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington,	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
OMB Number:	3235-0287									
Estimated average burden										
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

1. Name and Address of Reporting Person*  PESTER ROBERT E						2. Issuer Name and Ticker or Trading Symbol BOSTON PROPERTIES INC [ BXP ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director  Officer (give title  Other (spe						
(Last) (First) (Middle) C/O BOSTON PROPERTIES, INC. FOUR EMBARCADERO CENTER						3. Date of Earliest Transaction (Month/Day/Year) 02/12/2021									X Officer (give title Other (specify below)  Executive Vice President						
(Street) SAN FRANCI	SCO CA	A (	94111		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year							6. Lir	Individual or Joint/Group Filing (Check Applicable e)  X Form filed by One Reporting Person Form filed by More than One Reporting Person							
(City)	(St		(Zip)	Davis								of av Da	noficie		2	<u> </u>					
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)					action	ction 2A. Deemed Execution Date,			3. Transac	Transaction Disposed Of (D) (Instr. 3, Code (Instr. 5)				nd	5. Amou Securitie Beneficia Owned F	nt of es ally following	Form	: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
							Code	v	Amount	Amount (A) or (D)		- 1	Reported Transaction(s) (Instr. 3 and 4)				Instr. 4)				
		Т	able II - D						uired, Di						wned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date if any (Month/Day/Ye	Date, T	4. Transact Code (In:				6. Date Exercisa Expiration Date (Month/Day/Yea		Amount of		f s g Security	8. Price o Derivative Security (Instr. 5)		9. Number derivative Securities Beneficiall Owned Following Reported Transaction (Instr. 4)	Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Ownership	Beneficial Ownership (Instr. 4)		
Code V						(A)	(D)	Date Exercisable		opiration	Title	Amount or Number of Shares									
LTIP Units <sup>(1)</sup>	(2)	02/12/2021			A		1,936		(2)(3)		(2)	Common Stock, par value \$0.01	1,936	\$	\$0.25	57,508		D			

## **Explanation of Responses:**

- 1. Represents units of limited partnership interest in Boston Properties Limited Partnership ("BPLP"), of which the Issuer is the general partner, earned (i.e., for which the performance-based hurdles have been met) pursuant to the Issuer's 2018 Multi-Year Long-Term Incentive Program (the "Program").
- 2. 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 holder, into a common unit of limited partnership interest in BPLP ("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 the Issuer's Common Stock, except that the Issuer may, at its election, acquire each Common OP Unit so presented for one share of Common Stock. LTIP Units have no expiration date.
- $3.\ The\ 1,936\ LTIP\ Units\ earned\ pursuant\ to\ the\ Program\ vested\ 50\%\ upon\ being\ earned\ and\ 50\%\ will\ vest\ on\ February\ 5,\ 2022.$

## Remarks:

/s/ Kelli A. DiLuglio, as 02/17/2021 Attorney-in-Fact

\*\* 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.