FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

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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* BACOW LAWRENCE S | | | | | 2. Issuer Name and Ticker or Trading Symbol BOSTON PROPERTIES INC [BXP] | | | | | | | | (Ch | Relationship of eck all applic | able) r | Perso | 10% Ov | vner |
|--|---|----------------------------|---|--|--|------|----------|-----------------|--|----------------|---------------------------|--|---|--------------------------------|--|---|--|---------------------------------------|
| | | | 3. Date of Earliest Transaction (Month/Day/Year) 12/31/2005 | | | | | | | | | Officer below) | (give title | | Other (s below) | specify | | |
| 161 PACKARD AVENUE | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | |
| (Street) MEDFORD MA 02155 | | | | | | | | | | | - 1 | X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | |
| (City) | (St | ate) | (Zip) | | | | | | | | | | | | | | | |
| | | Tab | le I - Non | -Deriva | ative | e Se | curities | s Ac | quired, D | ispos | ed o | f, or Be | neficial | ly Owned | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | Execution Date, | | | Date, | Code (Instr. 5) | | | ed (A) or tr. 3, 4 and | Beneficia | es Formally (D) (Following (I) (I | | Direct Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | Code | | | | Am | nount | (A) or (D) | Price | Transact (Instr. 3 | tion(s) | | | (111311. 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 | Date (Month/Day/Year) i | 3A. Deemed Execution Date, if any (Month/Day/Year) | | 4. Transaction Code (Instr. 8) | | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amour of Securities Underlying Derivative Security (Instr. 3 and 4) | | Derivative Security | 9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4) | y | Ownership Form: Direct (D) or Indirect (I) (Instr. 4 | Beneficial Ownership (Instr. 4) |
| | | | | c | ode | v | (A) | (D) | Date Exercisable | Expira Date | ation | Title | Amount or Number of Shares | | | | | |
| Phantom Stock Units | (1) | 12/31/2005 | | | A | | 276.54 | | (2) | (2) | 2) | Common Stock | 276.54 | \$0 | 3,666.86 | 5 | D | |

Explanation of Responses:

- 1. The Phantom Stock Units convert to Common Stock on a 1-for-1 basis.
- 2. The Phantom Stock Units are awarded under the Boston Properties, Inc. 1997 Stock Option and Incentive Plan to non-employee directors who elected to receive Phantom Stock Units in lieu of director compensation fees. The Phantom Stock Units are to be settled in shares of Common Stock upon the Reporting Person's retirement from the Boston Properties Board of Directors.

Remarks:

/s/ Kelli A. DiLuglio, as 01/03/2006 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.