FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Washington, D.C. 20049

| OMB APPROVAL | | | | | | | | |
|--------------|---------|--|--|--|--|--|--|--|
| OMB Number: | 3235-02 | | | | | | | |

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

| | | | | | 01 . | Jectioi | 1 30(11) | OI LITE | iiivesuii | ent Ct | ompany Act | JI 1340 | | | | | | |
|---|----------|-------|----------|------------|------------------------------|---|-----------------|---|--|--|------------|--|---|---|---|---|---|--|
| 1. Name and Address of Reporting Person* PATRICOF ALAN J | | | | | | 2. Issuer Name and Ticker or Trading Symbol BOSTON PROPERTIES INC [BXP] | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
| PAIRICUF ALAN J | | | | | | | | | | | | X | Dire | ctor | 10% (| Owner | | |
| | ARTNERS, | INC. | (Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/02/2006 | | | | | | | | Offic below | er (give title w) | Other below | (specify) | |
| 445 PARK AVENUE | | | | | 4. 11 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable | | | | |
| (Street) NEW YORK NY 10022 | | | | | | | | | | | | Line) | | , | Reporting Person e than One Reporting | | | |
| | | | | | - | | | | | | | | | | Pers | | e man One Kep | Jorung |
| (City) | (S | tate) | (Zip) | | | | | | | | | | | | | | | |
| | | Tab | le I - N | on-Deriv | /ative | Sec | uritie | s Ac | quired | d, Di | sposed o | f, or B | enef | icially | Own | ed | | |
| Date | | | | /Day/Year) | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 a | | | Secur Benef | icially d Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | | | Code | v | Amount | (A) or (D) | Pric | e | Trans | action(s) 3 and 4) | | (11150.4) |
| Common Stock, par value \$.01 05/02/20 | | | | 2006 | 006 | | S | | 100 | D | | \$87 | | 5,261 | D | | | |
| Common Stock, par value \$.01 05/02/20 | | | | 2006 | 006 | | S | | 500 | D | 1 | \$86.3 | | 4,761 | D | | | |
| Common Stock, par value \$.01 05/02/20 | | | | 2006 | 006 | | S | | 4,400 | D | \$ | \$86.25 | | 0,361 | D | | | |
| Common Stock, par value \$.01 05/02/20 | | | | | 2006 | 006 | | | S | | 10,361 | D | \$8 | \$86.1361 | | 0 | D | |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security 2. Conversion or Exercise Price of Derivative Security 3. Transaction Date (Month/Day/Year) if any (Month/D | | | | | n Date, Transaci Code (In | | | | 6. Date Exerc Expiration Da (Month/Day/Y | | ate | 7. Title and Amount of Securities Underlying Derivative Security (Ins and 4) | | Der Sec (Ins | Price of rrivative curity estr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(: (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | Code | v | (A) | (D) | Date Exercis | sable | Expiration Date | or Numb | | er | | | | | | |

Explanation of Responses:

Remarks:

/s/ Kelli A. DiLuglio, as

05/04/2006

Attorney-in-Fact

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

 $^{^{\}star}$ 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).