FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

\/	D 0	20540	
Vashington,	D.C.	20549	

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

Name and Address of Reporting Person* West Tony				2. Issuer Name and Ticker or Trading Symbol BOSTON PROPERTIES LTD PARTNERSHIP [N/A]									Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last) 800 BOY	(Fi	,	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 05/30/2024								Off bel	cer (give title w)	Other (s below)	pecify		
SUITE 1900					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)	N M	Α (02199											For	n filed by On m filed by Mo son		J	
(City)	(St	rate)	(Zip)		Rul	le 10	0b5-	1(c)	Transa	ction	Inc	lication	l					
						Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan t satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.							hat is intende	d to				
		Tab	le I - Non-	-Derivat	tive	Secu	urities	s Ac	quired, D	ispose	ed o	of, or Be	neficia	lly Owi	ed			
Date			2. Transact Date (Month/Day	Execution Date			Code (Instr. 5)				d Secu Bene Own	icially d Following	es Forn ially (D) c Following (I) (II		7. Nature of Indirect Beneficial Ownership			
								Code V	Amo	ount	(A) o	r Price		rted action(s) 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/Y	Date, Transac Code (Ir					6. Date Exercisable an Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)		8. Price Derivati Security (Instr. 5		e s ally	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Co	ode '	v	(A)	(D)	Date Exercisable	Expirat Date	ion	Title	Amount or Number of Shares					
LTIP Units ⁽¹⁾	(1)	05/30/2024		I	A		1,417		(1)(2)	(1)		Common OP Units	1,417	\$0.25	1,41	7	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 have no

2. The 1,417 LTIP Units will vest on the earlier of (i) May 30, 2025 and (ii) the date of BXP's 2025 annual meeting of stockholders.

Remarks:

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

05/31/2024

** 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.