FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington,	D.C.	20549
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neck this box if no longer subject to
ection 16. Form 4 or Form 5
oligations may continue. See
etruction 1/h)

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number: 3235-0287								
Estimated average burden								
hours per respon	nse: 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

1. Name and Address of Reporting Person* Stroman John J					2. Issuer Name and Ticker or Trading Symbol BOSTON PROPERTIES LTD PARTNERSHIP [N/A]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify						
(Last) (First) (Middle) 2200 PENNSYLVANIA AVENUE NW						3. Date of Earliest Transaction (Month/Day/Year) 02/07/2023								Executive Vice President of GP						
SUITE 200W 4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable										
(Street) WASHIN	NGTON D	C :	20037				,		3 1			,,		Line)	Form fi	led by One	Repo	orting Person	n	
(City)	(S	tate)	(Zip)			Person														
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
Date				2. Transa Date (Month/D			2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Dispose Code (Instr. 5)		ities Acquired (A) od Of (D) (Instr. 3, 4		and Securitie Benefici		s ally ollowing	Form:	: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	,	Amount	(A) o	r Pric	Price Transa (Instr. 3		tion(s)			,mau. 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 D if any (Month/Day/	Date, T	I. Fransaction Code (Instr. 3)				6. Date Exercisa Expiration Date (Month/Day/Year			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		S (1	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
Code V (A) (D)						Date Exercisable	Ex Da	piration ite	Title	Amous or Number of Shares	er									
LTIP Units	(1)	02/07/2023			A		6,122		(1)(2)		(1)	Common OP Units	6,12	2	\$0.25	34,033		D		

Explanation of Responses:

1. Represents units of limited partnership interest 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 6,122 LTIP Units vest 100% on January 15, 2027.

Remarks:

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

02/08/2023

** 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.