FORM 4

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

Washington, D.C. 20549

<b>STATEMENT</b>	OF CHANGES	S IN BENEFICI	AL OWNERSHIP

	OMB APPRO	DVAL
	OMB Number:	3235-0287
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l	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*  ZUCKERMAN MORTIMER B					2. Issuer Name <b>and</b> Ticker or Trading Symbol BOSTON PROPERTIES INC [ BXP ]									Relationship of Reporting Person(s) to Issuer (Check all applicable)						
					BOOTOT, TROTERING [BAT ]									Directo	r		10% Ow	ner		
(Last)	(Fi	,	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 02/03/2015									Officer below)	(give title		Other (s below)	pecify	
599 LEXINGTON AVENUE				4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. In	6. Individual or Joint/Group Filing (Check Applicable						
(Street) NEW Y	ORK N	Y	10022											Line						
(City)	(St	ate)	(Zip)																	
		Tab	le I - Non	ı-Deriv	/ativ	e Se	curities	s Ac	quired,	Dis	posed o	f, or B	ene	ficiall	y Owned					
1. Title of Security (Instr. 3)  2. Transa Date (Month/D				Execution Date,		3. 4. Securities Acquired (A Transaction Code (Instr. 3, 5) 5)					es ally Following	Form (D) o	6. Ownership Form: Direct D) or Indirect I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership						
									Code	v	Amount	(A)	or	Price	Reported Transact (Instr. 3 a	ion(s)			(Instr. 4)	
Common Stock, par value \$0.01 11/10/				0/201	4			G	V	120,10	120,109 D		\$0	740,8	740,844.7(1)		D			
		7	Γable II - I (								osed of, onverti				Owned					
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/Yea	Date,	Code (Instr				6. Date Exercisal Expiration Date (Month/Day/Year)		of Securities		curity	8. Price of Derivative Security (Instr. 5)		Owner Form Director Ind (I) (In	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	or Ni of	umber						
LTIP Units <sup>(2)</sup>	(2)	02/03/2015			A		15,513		(2)(3)		(2)	Commo Stock	n 1	5,513	\$0.25	592,16	3	D		

## **Explanation of Responses:**

- 1. Includes an aggregate of 214.9242 shares which the Reporting Person acquired in January 2014 and July 2014 pursuant to the Boston Properties, Inc. 1999 Non-Qualified Employee Stock Purchase Plan.
- 2. Represents units of limited partnership interest in Boston Properties Limited Partnership (BPLP), of which the Issuer is the general partner, issued as long term incentive compensation pursuant to the Issuer's equity based incentive programs. 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 15,513 LTIP Units were fully vested upon issuance but are non-transferable until January 1, 2016.

## Remarks:

Kelli A. DiLuglio, as Attorney-

\*\* 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.