## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b).

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 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*  POWERS JOHN FRANCIS  (Last) (First) (Middle)  BOSTON PROPERTIES, INC.  599 LEXINGTON AVENUE  (Street)  NEW YORK NY 10022						2. Issuer Name and Ticker or Trading Symbol BOSTON PROPERTIES INC [ BXP ]  3. Date of Earliest Transaction (Month/Day/Year) 01/31/2020  4. If Amendment, Date of Original Filed (Month/Day/Year)								(Chec X 6. Ind Line)	S. Relationship of Reporting Person(s) to Issuer (Check all applicable)     Director 10% Owner     X Officer (give title Other (specify below)     Executive Vice President      6. Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person					
(City)	(S	tate) (	Zip)																	
		Tab	le I - Non	-Deriv	ative	Sec	curitie	s Ac	quired,	Dis	posed o	of, or Be	nefi	cially	Owned	i .				
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)						Execution Date,			Code		str. 5) (A) or B				Reporte Transac	es Forrially (D) of (I)		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (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)	ative Conversion Date Execution Date, rity or Exercise (Month/Day/Year) if any		Date,	4. Transaction Code (Instr. 8)		n of		6. Date Exercisable Expiration Date (Month/Day/Year)			Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		urity C	. Price of Perivative Security Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisab		xpiration ate	Title	Amo or Num of Shar	nber						
LTIP Units <sup>(1)</sup>	(1)	01/31/2020			A		8,161		(1)(2)		(1)	Common Stock, par value \$0.01	8,1	.61	\$0.25	35,756	5	D		

# **Explanation of Responses:**

1. 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 ("LTIP Units") 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.

2. The 8,161 LTIP Units were fully vested upon issuance as a result of the Reporting Person's attainment of age 65.

## Remarks:

/s/ Kelli A. DiLuglio, as 02/03/2020 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.