FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPE	ROVAL								
	OMB Number:	3235-0287								
	Estimated average burden									

0.5

hours per response:

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* JOHNSTON PETER D (Last) (First) (Middle) C/O BOSTON PROPERTIES, INC. 2200 PENNSYLVANIA AVENUE, NW							NER of Earlie	PRO RSHII est Trar	PE] P[]	tion (Mo	S L'		(Ch	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify below) below) Senior Vice President of GP 6. Individual or Joint/Group Filing (Check Applicable								
(Street) WASHINGTON DC 20037																ine) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(3)		(Zip) Ie I - Non	n-Deriv	ative	Se	curiti	ies Ad	can	ired. I	Disr	nosed (of. or F	ene	ficial	ly Owned	1					
1. Title of Security (Instr. 3) 2. Trans									3. Transaction Code (Instr.		4. Securities Acquired (A			(A) or	5. Amou Securitie Benefici	unt of 6. 0 es For (D) Following (I)		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
								Code	v	Amount	(A (D	or	Price	Transac (Instr. 3	tion(s)			(11341.4)				
Common	OP Units		1/201	/2012				C ⁽¹⁾		7,06	3	A	\$0 ⁽²⁾	20,047			D					
Common	OP Units			02/21	1/201	2				C ⁽¹⁾		7,06	3	D	\$0 ⁽²⁾	12	,984		D			
		Т	able II - I (sed 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 D if any (Month/Day/	Date, Transact Code (In:					Exp	Date Exe piration pnth/Day	Date	Amount of		of es ing ve Se		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership tt (Instr. 4)		
					Code	v	(A)	(D)	Dat Exe	te ercisable		opiration	Title	or Nu of	umber							
LTIP Units ⁽²⁾	(2)	02/21/2012			C ⁽¹⁾			7,063		(2)		(2)	Commo	n 7	,063	\$0.25	19,244	4	D			

Explanation of Responses:

- 1. 7,063 of the Reporting Person's units of limited partnership interest in the Issuer were converted into common units of limited partnership interest (Common OP Units) in the Issuer by the Reporting Person and the Common OP Units were immediately redeemed for an equal number of shares of Common Stock of Boston Properties, Inc., the Issuer's sole general partner, in accordance with the Issuer's Partnership
- 2. Issued pursuant to Boston Properties, Inc.'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 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 common stock of Boston Properties, Inc. except that Boston Properties, Inc. may, at its election as directed by the Issuer, acquire each Common OP Unit so presented for redemption for one share of common stock of Boston Properties, Inc.

Remarks:

/s/ Kelli A. DiLuglio, Attorney-in-Fact 02/21/2012

** 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.