FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
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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* RITCHEY RAYMOND A				[]	2. Issuer Name and Ticker or Trading Symbol BOSTON PROPERTIES LTD PARTNERSHIP [N/A]								Relationship neck all applic Directo	cable)	g Pers	on(s) to Iss 10% Ov Other (s	vner	
(Last) (First) (Middle) C/O BOSTON PROPERTIES, INC. 2200 PENNSYLVANIA AVE, NW					3. Date of Earliest Transaction (Month/Day/Year) 02/03/2023								X Officer (give title of their (specify below) Senior EVP of GP					
(Street) WASHINGTON DC 20037 (City) (State) (Zip) 4. If Amendment, Date of Original Filed (No. 1) (N							(Month/Da	ay/Year)		Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person								
1. Title of Security (Instr. 3) 2. Transar Date					·			quired, Disposed of, or Benefic 3.				ed (A) or	5. Amou	nt of	Form	m: Direct	7. Nature of Indirect Beneficial	
(wont)			Wonthibay	(Month/Day/		ay/Year	r) 8) `	V	Amount	(A) o	Price	Owned F Reported Transact	Owned Following Reported Transaction(s) (Instr. 3 and 4)		str. 4)	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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Da if any (Month/Day/Y	Cod	saction e (Instr	ı of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)		
				Cod	e V	(A)	(D)	Date Exercisabl		Expiration Date	Title	Amount or Number of Shares						
LTIP Units ⁽¹⁾	(1)	02/03/2023		A		29,213		(1)(2)		(1)	Common OP Units	29,213	\$0.25	199,30	7	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 29,213 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 Attorney-in-Fact

02/07/2023

** 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.