FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washingto

Washington, D.C. 20549	OMB APPROVAL			
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-		

	OMB Number:	3235-0287						
Estimated average burden								
	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* THOMAS OWEN D					2. Issuer Name and Ticker or Trading Symbol BOSTON PROPERTIES INC [BXP]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
(Last) (First) (Middle) BOSTON PROPERTIES, INC. 599 LEXINGTON AVENUE					3. Date of Earliest Transaction (Month/Day/Year) 02/08/2016								X Officer (give title below) Other (specify below) Chief Executive Officer				
(Street) NEW YORK NY 10022 (City) (State) (Zip)				- 4. l	4. If Amendment, Date of Original Filed (Month/Day/Year)								ndividual or Joint/Group Filing (Check Applicable e) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
1. Title of Security (Instr. 3) 2. Transa Date					action	tive Securities Acquired, Disposed of, Cotion 2A. Deemed Execution Date, if any 2A. Deemed Transaction Disposed Of Code (Instr. 5) 4. Securities Disposed Of Code (Instr. 5)					rities Acquir	ed (A) or	A) or 5. Amount of 6. Ownership 7. Na				
(world)D.			Dayrie	(Month/Day/Yea				+	t (A) o	r Price		Following (i) d tion(s)	(Instr. 4)	Ownership (Instr. 4)			
		-							uired, Dis , options	•	,		y Owned				
1. Title of Derivative Security (Instr. 3)	or Exercise (Month/Day/Year) if any			Date,	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		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 of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				,	Code	v	(A)	(D)	Date Exercisable	Expiratio Date	Title	Amount or Number of Shares	1				
LTIP Units ⁽¹⁾	(1)	02/08/2016			A		14,996		(1)(2)	(1)	Common Stock	14,996	\$0.25	69,536	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 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 14,996 LTIP Units vest in four equal annual installments beginning on January 15, 2017.

Remarks:

Kelli A. DiLuglio, as Attorneyin-Fact

02/09/2016

** 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.