SEC For	rm 4																				
	FORM	4 (	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549														OMB APPROVAL				
Section 16. Form 4 or Form 5 obligations may continue. See					ed purs	AT OF CHANGES IN BENEFICIAL OWNER d pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940										IP OMB Number: 3235-0287 Estimated average burden hours per response: 0.5					
1. Name and Address of Reporting Person* BOLAND ELIZABETH J (Last) (First) (Middle)					- <u>B</u> <u>S</u>	2. Issuer Name and Ticker or Trading Symbol     BRIGHT HORIZONS FAMILY     SOLUTIONS INC. [ BFAM ]     3. Date of Earliest Transaction (Month/Dav/Year)									5. Relationship of Reporting Perso (Check all applicable) Director X Officer (give title below)			10% C Other below)	wner (specify		
C/O BRI INC	C/O BRIGHT HORIZONS FAMILY SOLUT INC 2 WELLS AVENUE					4. If Amendment, Date of Original Filed (Month/Day/Year)       6. Individual or Line)         X       Form f										Thief Financial Officer Joint/Group Filing (Check Applicable filed by One Reporting Person filed by More than One Reporting					
NEWTON     MA     02459       (City)     (State)     (Zip)							Rule 10b5-1(c) Transaction Indication  Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.														
		Tab	le I - Noi	n-Deriv	vative	e Se	curitie	s Ad	cquired,	Dis	posed o	of, oi	r Ber	neficial	ly Owned	1					
1. Title of Security (Instr. 3) 2. Transa Date (Month/E					2A. Deemed Execution Date, if any (Month/Day/Year		Code (	Transaction Code (Instr.				d (A) or r. 3, 4 and	Securiti Benefici Owned	5. Amount of Securities Beneficially Owned Following		wnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership				
									Code	v	Amount	nt (A) or (D) P		Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Common Stock 03/04/					4/2024	2024			Α		4,750	6 A \$0		\$0.00	<sup>(1)</sup> 94	94,739		D			
		I	able II -						quired, C s, optior						v Owned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year	3A. Deeme Execution if any (Month/Da	Date,	Code (Instr				6. Date Ex Expiratior (Month/Da	)	and 7. Title and Amount of Securities Underlying Derivative 5 (Instr. 3 and		Security	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	s Ily	10. Ownershij Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership t (Instr. 4)			
					Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title		Amount or Number of Shares							
Option to Purchase	0115.65	02/04/2024					5.256				02/04/2024	Com	nmon	5 256	¢0.00	5.054					

Explanation of Responses:

\$115.65

1. Represents a grant of restricted stock units (RSU) that vest 100% on the third (3rd) anniversary of the grant date. Each RSU represents a right to receive one share of Registrant common stock upon vesting.

5,356

(2)

03/04/2034

Stock

2. This option is eligible to vest in three installments with 33% vesting on March 4, 2025 and March 4, 2026 and 34% on March 4, 2027.

Remarks:

Common Stock

/s/ John Casagrande, as attorney in fact for Elizabeth 03/06/2024 Boland

\$0.00

5,356

D

\*\* Signature of Reporting Person Date

5,356

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).

03/04/2024

\*\* 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.