Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

l	OMB APPR	ROVAL							
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l	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* <u>LISSY DAVID H</u>						2. Issuer Name and Ticker or Trading Symbol BRIGHT HORIZONS FAMILY SOLUTIONS INC. [BFAM]								S. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last) (First) (Middle)																	Other (sp below)	pecify	
(Last) (First) (Middle) C/O BRIGHT HORIZONS FAMILY SOLUTIONS INC						3. Date of Earliest Transaction (Month/Day/Year) 05/03/2018								Exec. Chairman of the Board					
200 TALCOTT AVENUE SOUTH						A If Amendment Pole of Original 57 July 11 5 St.								Individual or	loint/Croun	Filing (C	Shool: Ann	licable	
(Church)					- 4.	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) WATERTOWN MA 02472														X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S	itate)	(Zip)											. 0.00.					
		Tak	ole I - No	n-Deriv	vativ	e Se	curit	ies Ac	quired,	Dis	posed c	f, or Be	neficia	lly Owned	l				
1. Title of Security (Instr. 3) 2. Transa Date (Month/D						Execution Date,		, Transaction Disposed Code (Instr. 5)		ities Acquired (A) or d Of (D) (Instr. 3, 4 an		Benefici Owned I	es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Direct Condinect E	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) or (D)	Price	Reporte Transac (Instr. 3	tion(s)		(Instr. 4)	
Common Stock 05/03							/2018				25,00	0 A	\$22	2 352	352,693				
Common Stock 05/03/						2018			M		43,29	43,290 A \$		54 395	395,983				
Common Stock 05/03/					3/201	2018			М		5,618	3 A	\$12	2 401	401,601)		
Common Stock 05/03.						2018			F ⁽¹⁾		40,01	6 D	\$96.	72 361	1,585	D			
		-	Table II -								osed of,			/ Owned					
1. Title of	2.	3. Transaction	3A. Deeme		4.	- Cum	·	umber	6. Date Ex			7. Title an		8. Price of	9. Number	r of 10).	11. Nature	
Security (Instr. 3)	Conversion or Exercise Price of Derivative Security	Date (Month/Day/Year)	Execution if any (Month/Day	Date,	Transactio Code (Instr 8)		n of		Expiration Da (Month/Day/Y			of Securit Underlyin Derivative (Instr. 3 a	g Security	Derivative Security (Instr. 5)	derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Folly Di	wnership orm: irect (D) · Indirect · (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	Amount or Number of Shares						
Option to Purchase Common Stock	\$22	05/03/2018			M			25,000	(2)		01/25/2020	Common Stock	25,000	\$0.00	0.00		D		
Option to Purchase Common Stock	\$14.54	05/03/2018			М			43,290	(2)		05/02/2022	Common Stock	43,290	\$0.00	0.00		D		
Option to Purchase Common Stock	\$12	05/03/2018			M			5,618	(2)		05/02/2022	Common Stock	5,618	\$0.00	0.00		D		

Explanation of Responses:

- 1. Shares withheld to pay the exercise price of the options and the payment of taxes.
- 2. The time and performance criteria have been met with respect to this award and the option is fully vested.

Remarks:

/s/ John Casagrande, as attorney in fact for David Lissy

05/04/2018

** 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.