FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| OMB APPROVAL | | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|
| 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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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 ar | BRI | 2. Issuer Name and Ticker or Trading Symbol BRIGHT HORIZONS FAMILY SOLUTIONS INC. [BFAM] | | | | | | | | | | all app | | ng Pe | 10% C | wner | | | | | |
|--|--|--|------|---|---|---|---------------------|--|--|--------|--|----------------|-------|----------|----------------------|--|--|---|--|---|--|
| (Last) (First) (Middle) C/O BRIGHT HORIZONS FAMILY SOLUTIONS | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/15/2017 | | | | | | | | | | | Officer (give title below) EVP & | | & CA | Other (specify below) | | |
| INC 200 TAL | COTT AV | ENUE SOUTH | | | 4. If A | meno | dment, D | Date o | of Origina | l File | d (Month/D | ay/Y | /ear) | | Indiv ne) | | lual or Joint/Group Filing (Check Applica Form filed by One Reporting Person | | | | |
| (Street) WATERTOWN MA 02472 | | | | | | | | | | | | | | | Λ | Form filed by More than One Reporting Person | | | | | |
| (City) | (S | tate) (Z | Zip) | | | | | | | | | | | | | | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/ | | | | | | Execution Date, | | | 3. Transaction Code (Instr. 8) 4. Securities Acquired (Disposed Of (D) (Instr. 3 and 5) | | | | | ed (A) o | 3, 4 See Be Ow | | curities neficially ned | | wnership n: Direct or rect (I) tr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | Amount | | (A) or (D) | Price | | Repor Trans | | (5 | 4) | (111341. 4) | | | | | |
| Common Stock 05/15/20 | | | | | | | | | S ⁽¹⁾ | | 3,697 | | D \$7 | | .01 | 1 19,824 | | | D | | |
| | 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) | rivative Conversion Date Execution C curity or Exercise (Month/Day/Year) if any | | | 4. Transaction Code (Instr. 8) | | 5. Num of Derivat Securit Acquir (A) or Dispos of (D) (Instr. and 5) | tive ties red | 6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Exercisable Date | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr 3 and 4) Amou or Numb of Title Shares | | nstr. | it er | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | | 0. Ownership Form: Direct (D) Or Indirect I) (Instr. | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |

Explanation of Responses:

1. These trades were made pursuant to a Rule 10b5-1 trading plan.

Remarks:

/s/ John Casagrande, as attorney in fact for Mandy Berman

05/15/2017

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** 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.