FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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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(h)

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number: 3235-0287

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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						BRIGHT HORIZONS FAMILY									(Check all applicable)						
BOLAND ELIZABETH J						BRIGHT HORIZONS FAMILY SOLUTIONS INC. [BFAM]								Directo	,		10% Ow	ner			
					- 30) I IC)1 \ 3 11\	<u></u> [E	FAIN	vı j			X Officer below)	(give title		Other (s below)	pecify			
(Last) (First) (Middle) C/O BRIGHT HORIZONS FAMILY SOLUTIONS INC						Date 0		iest Trans	action (N	∕lonth	/Day/Year)		C	Chief Financial Officer							
200 TALCOTT AVENUE SOUTH					4. 1	If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable							
(Street)					-	3,, 100,								Line) X Form filed by One Reporting Person							
WATERTOWN MA 02472														Form filed by More than One Reporting Person							
(City)	(S	tate)	(Zip)																		
		Tak	le I - No	n-Der	ivativ	e Se	curit	ties Ac	quired	, Dis	sposed o	f, or Be	neficial	ly Owned							
Date			2. Trans Date (Month/		ar) E	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4			Benefici Owned	es ally Following	Form	: Direct C Indirect E str. 4)	7. Nature of Indirect Beneficial Ownership				
									Code	v	Amount	(A) or (D)	Price	Reporte Transac (Instr. 3	tion(s)			Instr. 4)			
Common Stock			10/1	7/2017				M ⁽¹⁾		2,260	A	\$12	152	2,977		D					
Common Stock 1			10/1	7/2017	/2017					17,421	A	\$14.5	4 170),398		D					
Common Stock 10/			10/1	7/2017	2017		S ⁽¹⁾		19,681	D	\$85.16	(2) 150	0,717		D						
		-	Table II -								osed of, converti			Owned							
1. Title of Derivative Security (Instr. 3) 2. Conversio or Exercise Price of Derivative Security		3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	Date,		Transaction Code (Instr.		ı of		Exerci on Da Day/Ye		7. Title and Amou of Securities Underlying Derivative Securi (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Own S Fo Dir Or (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amount or Number of Shares								
Option to Purchase Common Stock	\$14.54	10/17/2017			M ⁽¹⁾			17,421	(3)		05/02/2022	Common Stock	17,421	\$0.00	0.00		D				
Option to Purchase Common	\$12	10/17/2017			M ⁽¹⁾			2,260	(3)		05/02/2022	Common Stock	2,260	\$0.00	0.00		D				

Explanation of Responses:

- 1. These trades were made pursuant to a Rule 10b5-1 trading plan.
- 2. This transaction was executed in multiple trades at prices ranging from \$85.07 to \$85.40. The price reported above reflects the weighted average price. The reporting person hereby undertakes to provide upon request to the SEC staff, the issuer or a security holder of the issuer full information regarding the number of shares and prices at which the transaction was effected.
- 3. The time and performance criteria have been met with respect to this award.

Remarks:

/s/ John Casagrande, as attorney in fact for Elizabeth

10/18/2017

Boland

** 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.