FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB Number: STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 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* BOLAND ELIZABETH J							2. Issuer Name and Ticker or Trading Symbol BRIGHT HORIZONS FAMILY SOLUTIONS INC. [BFAM]								5. Relationship of Reporting Person(s) to Is (Check all applicable) Director 10% O Officer (give title Other (vner		
(Last) (First) (Middle) C/O BRIGHT HORIZONS FAMILY SOLUTIONS						3. Date of Earliest Transaction (Month/Day/Year) 08/07/2024								below) below) Chief Financial Officer						
INC 2 WELLS AVENUE						4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person						
(Street)					-	Form filed by More than One Reporting Person														
NEWTON MA 02459					Rı	Rule 10b5-1(c) Transaction Indication														
(City) (State) (Zip)						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 - No	n-Deriv	vative	Sec	urit	ies Ac	quired	, Dis	posed o	of, or Be	neficia	ly Owne	d					
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da						r) E)	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			Benefic	es ially Following	Form (D) or	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)	Price	Transac (Instr. 3	tion(s)	ion(s)		(Instr. 4)		
Common Stock 08/07						/2024					2,786	A	\$96.4	97,525			D			
Common Stock 08/07/					//2024	/2024			F ⁽¹⁾		2,303	D	\$131.	01 95	,222		D			
Common Stock 08/07/2					//2024	/2024			M		2,714	A	\$77.9	9 97	97,936		D			
Common Stock 08/07/2					//2024	2024			F ⁽¹⁾		1,982	D \$131		95,954		D				
		Т	able II -								osed of converti			Owned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/D	n Date,	4. Transactio Code (Instr 8)		n of I		6. Date Exercis. Expiration Date (Month/Day/Yea		В	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Ownersi Form: Direct (I or Indire (I) (Instr.	Ownership	Beneficial Ownership ct (Instr. 4)		
					Code	v	(A)		Date Exercisal		Expiration Date	Title	Amount or Number of Shares							
Option to Purchase Common Stock	\$96.46	08/07/2024			M			2,786	(2)	•	02/23/2025	Common Stock	2,786	\$0.00	0.00		D			
Option to Purchase Common Stock	\$77.99	08/07/2024			M			2,714	(3)		02/24/2033	Common Stock	2,714	\$0.00	5,512		D			

Explanation of Responses:

- 1. Shares withheld to pay the exercise price of the options and the payment of taxes.
- 2. This option is fully vested
- 3. This option is eligible to vest in three installments with 33% vesting on February 24, 2024 and February 24, 2025 and 34% on February 24, 2026.

Remarks:

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

** Signature of Reporting Person

08/09/2024

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.