FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
OMB Number:	3235-028									
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0.5

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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)

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

								00			Company Act							
1. Name an <u>Kramer</u>	<u>B</u> 1	2. Issuer Name and Ticker or Trading Symbol BRIGHT HORIZONS FAMILY SOLUTIONS INC. [BFAM]								5. Relationship of Reporting Person(s) to Issu (Check all applicable) Director 10% Own				Owner				
() () () () () () () () () ()						SOLOTIONS INC. [BIAM]									Offic belov	er (give title w)	Other below	(specify)
(Last) (First) (Middle) C/O BRIGHT HORIZONS FAMILY SOLUTIONS INC						3. Date of Earliest Transaction (Month/Day/Year) 02/18/2020								CEO & President				
200 TALCOTT AVENUE					4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)				
(Street)														X				
WATERTOWN MA 02472				2	_										Form filed by More than One Reporting Person			
(City)	(S	tate) (Zip)															
		Tabl	eI-	Non-Deriv	/ative	e Seci	uritie	s Ac	quir	ed, C	Disposed o	of, or I	Benefic	ially (Owne	ed		
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye					2A. Deemed Execution Date, if any (Month/Day/Year)		te,	3. Transaction Code (Instr. 8)					Securii Benefi		ficially ed Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								[Code	v	Amount	(A) or (D)	Price		Trans	action(s) . 3 and 4)		(11150.4)
Common Stock 02				02/18/20	20				S ⁽¹⁾		2,432	D	\$172.23	335 ⁽²⁾	74,243		D	
Common Stock 0				02/18/20	20				S ⁽¹⁾		1,068	D	\$172.9	49 ⁽³⁾	73,175		D	
		Та	ble I							•	posed of, , convertil			-	ned			
1. Title of Derivative Security (Instr. 3)	erivative Conversion Date Execution Date, curity or Exercise (Month/Day/Year) if any					ansaction of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)				9. Number of derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
	Co		Code	v	(A)	(D)	Date Exer	cisable	Expiration Date	Title	Amount or Number of Shares							

Explanation of Responses:

- 1. These transactions were made pursuant to a Rule 10b5-1 trading plan previously adopted by this Reporting Person.
- 2. This transaction was executed in multiple trades at prices ranging from \$171.71 to \$172.535. 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. This transaction was executed in multiple trades at prices ranging from \$172.778 to \$173.151. 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.

Remarks:

/s/ John Casagrande, as attorney in fact for Stephen 02/18/2020 Kramer

** 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.