FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
-------------	------	-------

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL							
OMB Number: 3235-0287							
Estimated average burden							
hours per response.							

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

				Code	v			Date Exerci	sable	Expirat Date		or Nu of	nount mber ares						
1. Title of Derivative Security (Instr. 3)	f 2. Conversion or Exercise Price of Derivative Security		/arra 5. Nur	ants, options, convertible securions, convert					rities)		9. Number of		10. Ownershij Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)					
Common	ı Stock												<u> </u>	25,0		I	David H Lissy 2020 Grantor Retained Annuity Trust		
Common	ı Stock													7,3	888	I	L G R A	avid H issy 2019 rantor etained nnuity rust	
Common	Stock													4,0)32	I	Iı	y revocable rust	
Common	Stock													4,0	32	I	Iı	y revocable rust	
Common	Stock													4,0	32	I	1	y revocable rust	
Common	Stock		11/13/2020				S		25,0	000	D	\$166.	3649 ⁽¹	1	,	Б			
1. Title of	Security (Inst	ir. 3)	2. Transaction Date (Month/Day/Year)	Exec if any	eemed ution Da / th/Day/Y	ite, /ear)	3. Transa Code (8)			sed Of (ed (A) or str. 3, 4 an	4 and 5) Securities Beneficially Owned Following Reported		s ally g i ion(s)	6. Owner Form: I (D) or Indirect (Instr. 4	Direct In B (I) O	Nature of direct eneficial wnership nstr. 4)	
			I - Non-Deriva	_				uired					eficia	-					
WATERTOWN MA 02472 (City) (State) (Zip)														Form filed by More than One Reporting Person					
(Street)			anchamon, bac or original riled (Month/bay/real)									6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person							
(Last) (First) (Middle) C/O BRIGHT HORIZONS FAMILY SOLUTIONS INC 200 TALCOTT AVENUE			11/1	Date of Earliest Transaction (Month/Day/Year) 11/13/2020 Hand Transaction (Month/Day/Year) 4. If Amendment, Date of Original Filed (Month/Day/Year)															
			SOLUTIONS INC. [BFAM]											er (give title Ot			her (specify		
1. Name and Address of Reporting Person* <u>LISSY DAVID H</u>			2. Issuer Name and Ticker or Trading Symbol BRIGHT HORIZONS FAMILY										5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner						

Explanation of Responses:

1. This transaction was executed in multiple trades at prices ranging from \$166.00 to \$166.97. 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 David <u>Lissy</u>

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.