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Form 4 April 15, 20													
										OMB A	PPROVAL		
FORM	4 UNITED	STATES				ND EX D.C. 2		ANGE C	OMMISSION	OMB Number:	3235-0287		
Check th if no long	ner			U						Expires:	January 31,		
subject to Section 1 Form 4 o	or SIAIEN	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES									2005 average urs per . 0.5		
Form 5 obligatio may cont <i>See</i> Instru 1(b).	tinue. Section 17(a) of the l	Public U	tility H	lolo	ling Co	mpan	•	e Act of 1934, 1935 or Section 0	n			
(Print or Type I	Responses)												
1. Name and Address of Reporting Person * 2. Issu Burke Mary Lou Symbol				ssuer Name and Ticker or Trading bol					5. Relationship of Reporting Person(s) to Issuer				
	BRIGHT HORIZONS FAMILY SOLUTIONS INC. [BFAM]						(Check all applicable)						
				of Earliest Transaction Day/Year)					Director10% Owner0fficer (give title0ther (specify				
	HT HORIZONS F NS INC, 200 TAL SOUTH		04/15/2	2019					below) COO North	below) America Cen	ter Ops		
				nendment, Date Original					6. Individual or Joint/Group Filing(Check				
WATERTO	OWN, MA 02472		Filed(Mo	nth/Day/Y	í ear)			Applicable Line) _X_ Form filed by C Form filed by M Person				
(City)	(State)	(Zip)	Tab	le I - No	n-D) erivative	e Secu	rities Acq	uired, Disposed of	, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Date, if	3. Transac Code (Instr. 8 Code	etio 3)	4. Securi n(A) or Di (Instr. 3, Amount	ispose	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock	04/15/2019			S <u>(1)</u>		852	D	\$ 127.84	29,200	D			
Common Stock									1,300	I	UTMA Custodian for daughter (2)		
Common Stock									1,300	I	UTMA Custodian for daughter (2)		

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Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Titl	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onNumber	Expiration D	ate	Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ities	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Owne
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									. .		
									Amount		
						Date	Expiration	751 1	or		
							Date		Number		
					(\mathbf{A}) (\mathbf{D})				of		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
		10% Owner	Officer	Other			
Burke Mary Lou C/O BRIGHT HORIZONS FAMILY SOLUTIONS INC 200 TALCOTT AVENUE SOUTH WATERTOWN, MA 02472			COO North America Center Ops				
Signatures							
/s/ John Casagrande, as attorney in fact for Mary Lou Burke		04/15/201	9				
**Signature of Reporting Person		Date					
Explanation of Responses:							

- * 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).
- (1) These trades were made pursuant to a Rule 10b5-1 trading plan.
- (2) Shares held indirectly under the Uniform Transfer to Minors Act and reporting person disclaims any beneficial ownership of these shares except for any pecuniary interest therein.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.