### Edgar Filing: LISSY DAVID H - Form 4

LISSY DA Form 4												
March 15, 2										OMP		
FOR	VI 4 <sub>UNITED</sub>	STATES	SECU	RITI	ES .	AND EX	CHA	NGE C	OMMISSION		APPROVAL	
						n, D.C. 20				Number:	3235-0287	
if no lo	this box			NOEC	1			Expires:	,January 31 2005			
subject Section Form 4 Form 5 obligati	Section	<b>SE</b> (16(a)	CU of t	Act of 1934,	Estimated average burden hours per response 0.8							
may co <i>See</i> Inst 1(b).	nunue.			•		it Compar	-	•	1935 or Section	11		
(Print or Type	e Responses)											
1. Name and LISSY DA	Address of Reporting VID H	g Person <u>*</u>	Symbol BRIGI	HT HO	ORI	nd Ticker of ZONS FA	AMII		5. Relationship of Issuer (Chec	Reporting Pe k all applicat		
(Last)	(First) (						-		Director 10% Owner			
	HT HORIZONS I NS INC, 200 TAI SOUTH		(Month/ 03/14/	-	ear)				below)	titleO below) airman of the		
WATEDT	(Street) OWN, MA 02472		4. If An Filed(M			Date Origina ar)	al		6. Individual or Jo Applicable Line) _X_ Form filed by 0 Form filed by N	One Reporting	Person	
(City)	(State)	(Zip)			_		~		Person			
	· · ·	-			lon-			-	iired, Disposed of		•	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Date, if	3. Transa Code (Instr.	8)	onor Dispos (Instr. 3, 4	ed 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	03/14/2019			S		37,673	D	\$ 124.68 (1)	325,995	D		
Common Stock	03/15/2019			G	V	12,096 (2)	D	\$ 0	313,899	D		
Common Stock	03/15/2019			G	V	4,032 (2)	А	\$ 0	4,032	Ι	By Irrevocable Trust	
Common	03/15/2019			G	v	4,032	А	<b>\$</b> 0	4,032	I	By	

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Stock				(2)					Irrevocable Trust
Common Stock	03/15/2019	G	V	4,032 (2)	А	\$0	4,032	Ι	By Irrevocable Trust

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 Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,		ate	7. Title Amoun Underly Securiti (Instr. 3	t of ying ies	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	4, and 5)	Date Exercisable	Expiration Date	Title M	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
I State and the second	Director	10% Owner	Officer	Other			
LISSY DAVID H C/O BRIGHT HORIZONS FAMILY SOLUTIONS INC 200 TALCOTT AVENUE SOUTH WATERTOWN, MA 02472			Exec. Chairman of the Board				
Signatures							
/s/ John Casagrande, as attorney in fact for David Lissy	03/1	5/2019					
**Signature of Reporting Person	Ε	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).

This transaction was executed in multiple trades at prices ranging from \$124.43 to \$125.37. The price reported above reflects the
 (1) 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.

(2) This transaction involved a gift of securities by the reporting person to his children's irrevocable trusts. The 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.