

SALLEE MARGUERITE  
 Form 3  
 January 24, 2013

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

OMB APPROVAL

OMB Number: 3235-0104  
 Expires: January 31, 2005  
 Estimated average burden hours per response... 0.5

**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,  
 Section 17(a) of the Public Utility Holding Company Act of 1935 or Section  
 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

<p>1. Name and Address of Reporting Person *</p> <p>Â SALLEE MARGUERITE</p> <p>(Last) (First) (Middle)</p> <p>C/OBRIGHT HORIZONS              FAMILY SOLUTIONS              INC.,Â 200 TALCOTT              AVENUE SOUTH</p> <p>(Street)</p> <p>WATERTOWN,Â MAÂ 02472</p> <p>(City) (State) (Zip)</p>	<p>2. Date of Event Requiring Statement</p> <p>(Month/Day/Year)</p> <p>01/24/2013</p>	<p>3. Issuer Name and Ticker or Trading Symbol</p> <p>BRIGHT HORIZONS FAMILY SOLUTIONS INC.              [BFAM]</p> <p>4. Relationship of Reporting Person(s) to Issuer</p> <p>(Check all applicable)</p> <p><input checked="" type="checkbox"/> Director <input type="checkbox"/> 10% Owner  <input type="checkbox"/> Officer <input type="checkbox"/> Other              (give title below) (specify below)</p>	<p>5. If Amendment, Date Original Filed(Month/Day/Year)</p> <p>6. Individual or Joint/Group Filing(Check Applicable Line)</p> <p><input checked="" type="checkbox"/> Form filed by One Reporting Person  <input type="checkbox"/> Form filed by More than One Reporting Person</p>
---	---	---	--

**Table I - Non-Derivative Securities Beneficially Owned**

<p>1. Title of Security              (Instr. 4)</p>	<p>2. Amount of Securities Beneficially Owned              (Instr. 4)</p>	<p>3. Ownership Form:              Direct (D)              or Indirect (I)              (Instr. 5)</p>	<p>4. Nature of Indirect Beneficial Ownership              (Instr. 5)</p>
---	---	--	---

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. SEC 1473 (7-02)

**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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

<p>1. Title of Derivative Security              (Instr. 4)</p>	<p>2. Date Exercisable and Expiration Date              (Month/Day/Year)</p>	<p>3. Title and Amount of Securities Underlying Derivative Security              (Instr. 4)</p>	<p>4. Conversion or Exercise Price of Derivative</p>	<p>5. Ownership Form of Derivative Security:</p>	<p>6. Nature of Indirect Beneficial Ownership              (Instr. 5)</p>
--	--	---	--	--	---

Edgar Filing: SALLEE MARGUERITE - Form 3

	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Security	Direct (D) or Indirect (I) (Instr. 5)	
Option to Purchase Common Stock	Â (1)	09/02/2018	Common Stock	4,575	\$ 14.54	D	Â
Option to Purchase Common Stock	Â (1)	09/02/2018	Common Stock	593	\$ 12	D	Â

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
SALLEE MARGUERITE C/OBRIGHT HORIZONS FAMILY SOLUTIONS INC. 200 TALCOTT AVENUE SOUTH WATERTOWN,Â MAÂ 02472	Â X	Â	Â	Â

## Signatures

/s/ John Casagrande, attorney-in-fact for Marguerite Kondracke 01/24/2013

Signature of Reporting Person

Date

## Explanation of Responses:

- \* If the form is filed by more than one reporting person, *see* Instruction 5(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) The option to purchase 4,575 shares of common stock is vested as to 3,660 shares and the option to purchase 593 shares of common stock is vested as to 474 shares. The remaining portion of each option award is eligible to vest and become exercisable on May 28, 2013.

Â

### Remarks:

ExhibitÂ List

Â Â Â Â Â Â Â Â ExhibitÂ 24Â -Â PowerÂ ofÂ Attorney

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.