FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

| Vashington, | D.C. | 20549 |  |
|-------------|------|-------|--|
|-------------|------|-------|--|

| STATEMENT OF CHANGES IN BENEFICIAL | . OWNERSHIP |
|------------------------------------|-------------|
|                                    |             |

| OMB APPROVAL             |     |  |  |  |  |  |
|--------------------------|-----|--|--|--|--|--|
| OMB Number: 3235-0287    |     |  |  |  |  |  |
| Estimated average burden |     |  |  |  |  |  |
| hours per response:      | 0.5 |  |  |  |  |  |

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

| 1. Name and Address of Reporting Person*  Stern Rachel Rebecca  (Last) (First) (Middle) |  |            |                               | FA<br>FD<br>3. 0                           | 2. Issuer Name and Ticker or Trading Symbol     FACTSET RESEARCH SYSTEMS INC [ FDS ]  3. Date of Earliest Transaction (Month/Day/Year)  |  |   |  |                               |   |                 | neck all<br>D<br>V C  | tionship of Report<br>all applicable)<br>Director<br>Officer (give title<br>below) |  | 10%<br>Other<br>below                 |   | Owner<br>r (specify<br>v) |      |
|---|--|------------|-------------------------------|--|---|--|---|--|-------------------------------|---|-----------------|---|--|--|---------------------------------------|---|---------------------------|------|
| C/O FACTSET RESEARCH SYSTEMS INC. 45 GLOVER AVENUE (Street)                             |  |            |                               |  | 11/01/2023  4. If Amendment, Date of Original Filed (Month/Day/Year)  |  |   |  |                               |   |                 | EVP, Chief Legal Officer  6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person |  |  |                                       |   |                           |      |
| NORWA   | LK C   | Γ (        | 06850                         |  |   |  |   |  |                               |   |                 |   |  | orm f<br>ersor   |                                       | e thai  | n One Repoi               | ting |
| (City)  | (Si  | rate) (    | Zip)                          | Rı   | Rule 10b5-1(c) Transaction Indication  Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10. |  |   |  |                               |   |                 |   |  |  |                                       |   |                           |      |
|   | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned   |            |                               |  |   |  |   |  |                               |   |                 |   |  |  |                                       |   |                           |      |
| Date  |  |            | ransaction<br>e<br>nth/Day/Ye | Execution Date,                            |   | Code (In:  | Transaction Disposed Of (D) Code (Instr. 5) |  | ities Acquir<br>d Of (D) (Ins | ies Acquired (A) or<br>Of (D) (Instr. 3, 4 and      |                 | amou<br>curitie<br>neficia<br>ned F   | es For<br>ally (D)<br>Following (I) (  |  | n: Direct<br>r Indirect<br>str. 4)    | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |                           |      |
|   |  |            |                               |  |   |  | Code  | v  | Amount                        | (A) o<br>(D)  | Price           | Tra   | nsact  | ction(s)<br>and 4)   |                                       |   | 1150.4)                   |      |
|   | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |            |                               |  |   |  |   |  |                               |   |                 |   |  |  |                                       |   |                           |      |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)                                     | erivative Conversion Date Execution Date, Tecurity or Exercise (Month/Day/Year) if any   |            | Code (                        | ansaction of E<br>ode (Instr. Derivative ( |   | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |   | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative Securi<br>(Instr. 3 and 4) |                               | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) |                 | 9. Number<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction<br>(Instr. 4)        | ly   | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | Beneficial<br>Ownership<br>(Instr. 4) |   |                           |      |
|   |  |            |                               | Code                                       | v   | (A)  | (D)   | Date<br>Exercisable  | Ex<br>Da                      | opiration<br>ate                                    | Title           | Amount<br>or<br>Number<br>of<br>Shares  |  |  |                                       |   |                           |      |
| Employee<br>Stock<br>Option<br>(right to<br>buy)  | \$436.57   | 11/01/2023 |                               | A  |   | 3,168  |   | (1)  | 11                            | /01/2033  | Common<br>Stock | 3,168   | \$(  |  | 3,168                                 |   | D                         |      |

## **Explanation of Responses:**

1. Options vest 20% annually on the anniversary date of the grant and are fully vested after five years.

## Remarks:

/s/ Rachel R. Stern

11/03/2023

\*\* 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.