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

Check this box if no longer subject to Section 16. Form 4 or Form 5

Instruc	tions may conti ction 1(b).	nue. See		File	ed nurs	uanti	to Sect	tion 16(a	a) of the S	ecurit	ies Exchan	ige Act of	1934			hours	per response	1:	0.5
				1 110							mpany Act								
Name and Address of Reporting Person* MCGONIGLE JAMES J			<u>FA</u>	2. Issuer Name and Ticker or Trading Symbol FACTSET RESEARCH SYSTEMS INC FDS]								(Check all applicabl		10% C		0% Ov	wner		
(Last) (First) (Middle) 601 MERRITT 7					3. Date of Earliest Transaction (Month/Day/Year) 01/08/2018									below)	(give title		ther (s elow)	specify	
(Street) NORWA	LK C	Γ	06851		4. 11	f Ame	endmer	nt, Date	of Origina	l File	d (Month/Da	ay/Year)		6. Indi Line)	Form f	iled by One iled by Mor	Filing (Che Reporting e than One	Perso	on .
(City)	(S	tate)	(Zip)												1 01301	'			
		Tab	le I - No	n-Deriv	ative	Se	curiti	ies Ac	quired	Dis	posed c	of, or B	enefi	cially	Owned	i			
Da			2. Transaction Date (Month/Day/Year)		r) E	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquir Disposed Of (D) (Ins				5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) (D)	r Pri	ce	Transact (Instr. 3	tion(s)			(111501.4)
FactSet C	Common Sto	ock		01/08/	/2018				М		2,419	A	\$9	95.05	22,	,754	D		
FactSet Common Stock 01/08/				/2018	2018		S		1,186	D	\$1	93.92	21,	,568	D				
		Т									osed of,				wned				
1. Title of Derivative Security (Instr. 3)	Title of 2. 3. Transaction Date Execution Date, or Exercise (Month/Day/Year) if any		ed 4. Date, Transactio		ction	5. Number (6. Date Exercisable ar Expiration Date (Month/Day/Year)		able and	7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		8. D S	. Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficial Owned	Ownershi Form: Direct (D) or Indirect (I) (Instr. 4		Beneficial Ownership t (Instr. 4)	
	, cooding						(A) (Disp of (E (Inst	oosed D) tr. 3, 4								Following Reported Transactio (Instr. 4)	1		
	,			-	Code	v	(A) (Disp of (E (Inst	oosed D) tr. 3, 4	Date Exercisal		Expiration Date			ount ober		Reported Transaction	1		
Non- Qualified Stock Option (right to buy)	\$95.05	01/08/2018		_	Code	v	(A) of Disp of (E (Inst and	oosed D) tr. 3, 4 5)		ole I		(Instr. 3	Amo or Num of Shar	ount ober res	(1)	Reported Transaction	on(s)	0	
Qualified Stock Option (right to buy)	\$95.05	Reporting Person*				v	(A) of Disp of (E (Inst and	(D)	Exercisal	ole I	Date	Title FactSet Common	Amo or Num of Shar	ount ober res	(1)	Reported Transactio (Instr. 4)	on(s)	D)	
Qualified Stock Option (right to buy)	\$95.05 and Address of DNIGLE J	Reporting Person*	(Mide			v	(A) of Disp of (E (Inst and	(D)	Exercisal	ole I	Date	Title FactSet Common	Amo or Num of Shar	ount ober res	(1)	Reported Transactio (Instr. 4)	on(s))	

(Last) 601 MERRITT 7	(First)	(Middle)
(Street) NORWALK	CT	06851
(City)	(State)	(Zip)
1. Name and Address of BILLEADEAU		
(Last) 601 MERRITT 7	(First)	(Middle)
(Street) NORWALK	CT	06851

Explanation of Responses:

1. Column 8 has been intentionally left blank because the transaction was an exercise of a derivative security.

** 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.