FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APP | ROVAL |
|-------------|---------|
| OMB Number: | 3235-02 |

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| Check this box if no longer subject to |
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| Section 16. Form 4 or Form 5 |
| obligations may continue. See |
| Instruction 1(h) |

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| Name and Address of Reporting Person* WONG ERNEST | | | | 2. Issuer Name and Ticker or Trading Symbol FACTSET RESEARCH SYSTEMS INC [FDS] | | | | | | | | [| 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title belative) | | | | | | |
|---|---|--|--------------------------|--|---|---|---|-----|--|-----|--------------------|--|--|------|---|--|---|--|---|
| (Last) (First) (Middle) FACTSET RESEARCH SYSTEMS INC. ONE GREENWICH PLAZA | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 01/22/2004 | | | | | | | | | 71 | below) | hief Fina | ncial | below) Officer | |
| (Street) GREENWICH CT 06830 | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting | | | | | | |
| (City) | (S | itate) | (Zip) | | | | | | | | | | | | Person | | | | |
| | | Tal | ble I - Non-I | | | _ | | | | Dis | _ | | | | Owned | | | | |
| | | | 0 | 2. Transaction Date (Month/Day/Year) | | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Code (Instr. | | | | | | 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) or (D) | | ice | Transacti (Instr. 3 a | tion(s) and 4) | | | |
| FactSet C | Common Sto | | | | | | | | | | | | | | | 918 | | D | |
| | | | Table II - De (e | | | | | | quired, D s, option | | | | | | Owned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | Execution Date, T if any | | 4. Transaction Code (Instr. 8) | | of E | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and An of Securities Underlying Derivative Sec (Instr. 3 and 4) | | | 8. Price of Derivative Security (Instr. 5) | 9. Numbe derivative Securitie: Beneficia Owned Following Reported Transacti (Instr. 4) | e s ally | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership tt (Instr. 4) |
| | | | | Cod | de ' | v | (A) | (D) | Date Exercisabl | | Expiration Date | Title | Amo or Num of Sha | nber | | | | | |
| FactSet Stock Options | \$5.67 | | | | | | | | 06/27/1997 | (1) | 06/27/2006 | Common Stock | 28, | 390 | | 28,39 | 0 | D | |
| FactSet Stock Options | \$10 | | | | | | | | 02/09/1999 | (1) | 02/09/2008 | Common Stock | 22, | 500 | | 50,89 | 0 | D | |
| FactSet Stock Options | \$19.41 | | | | | | | | 03/29/2000 | (1) | 03/29/2009 | Common Stock | 20, | 000 | | 70,89 | 0 | D | |
| FactSet Stock Options | \$33.13 | | | | | | | | 03/13/2001 | (1) | 03/13/2010 | Common Stock | 20, | 000 | | 90,89 | 0 | D | |
| FactSet Stock Options | \$34.25 | | | | | | | | 11/13/2001 | (1) | 11/13/2010 | Common Stock | 20, | 000 | | 110,89 | 90 | D | |
| FactSet Stock Options | \$26.35 | | | | | | | | 10/23/2002 | (1) | 10/23/2011 | Common Stock | 15, | 000 | | 125,89 | 90 | D | |
| FactSet Stock Options | \$22.45 | | | | | | | | 10/07/2003 | (1) | 10/07/2012 | Common Stock | 7,5 | 500 | | 133,39 | 90 | D | |
| FactSet Stock | \$36.73 | 01/22/2004 | | A | | | 10,000 | | 01/22/2005 | (1) | 01/22/2014 | Common Stock | 10, | 000 | \$0 | 143,39 | 90 | D | |

Explanation of Responses:

1. 20 percent of the option grant is exercisable one year from grant date.

Ernest S. Wong

01/22/2004

** Signature of Reporting Person

Date

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

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.

^{*} 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).