FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

	OMB APPR	OVAL						
I	OMB Number:	3235-028						
	Estimated average burden							

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

37 hours per response: 0.5

Instruc	tion 1(b).			File					a) of the Se Investmer				f 193	34		liours	per re-		0.5	
Name and Address of Reporting Person* <u>Nicolelli Maurizio</u>							2. Issuer Name and Ticker or Trading Symbol FACTSET RESEARCH SYSTEMS INC FDS]									ationship of Reportin (all applicable) Director Officer (give title		10% O		
(Last) (First) (Middle) 601 MERRITT 7						Date (t Tran	saction (M	onth/i	Day/Year)		Chief Financial Officer							
(Street) NORWALK CT 06851 (City) (State) (Zip)				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									ndividual or Joint/Group Filing (Check Applicable e) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
		Tab	le I - Nor	n-Deriv	ative	e Se	curitie	s Ac	quired,	Dis	posed o	f, or B	ene	eficial	ly Owned	ł				
1. Title of Security (Instr. 3) 2. Trans Date (Month/						ar)	2A. Deemed Execution Date, if any (Month/Day/Year		Code (Transaction Dispo		rities Acquired (A ed Of (D) (Instr. 3,			Benefici	es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) (D)	or	Price	Transact (Instr. 3	tion(s)			(11150.4)	
		٦	Гable II -						uired, D s, optior						Owned		,			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	Date,	4. Transactio Code (Inst 8)				6. Date Exercisal Expiration Date (Month/Day/Year			7. Title and Amount of Securities Underlying Derivative Securi (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	ly O	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisabl		Expiration Date	Title	0 0	Amount or Number of Shares						
Non- Qualified Stock Option	\$131.31	11/03/2014			A		6,637		11/03/2017	(1)	11/03/2024	FactSe Commo		6,637	(2)	50,26	5	D		

Explanation of Responses:

(right to buy)

- 1. Sixty percent of this option grant is exercisable three years after the grant date, with the remaining forty percent vesting after five years.
- 2. Column 8 has been intentionally left blank.

/s/ Maurizio Nicolelli

11/05/2014

** 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.