FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

OMB APF	'ROVAL							
OMB Number:	3235-0287							
Estimated average burden								
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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* FRANKENFIELD MICHAEL D					F/	2. Issuer Name and Ticker or Trading Symbol FACTSET RESEARCH SYSTEMS INC [FDS]								5. Relationship of Reporting Person(s) to Issue (Check all applicable) Director 10% Owner X Officer (give title Other (spe				wner	
(Last) 601 ME	,	(First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 09/29/2010								below) Executive Vice President			эреспу	
(Street)	Street) NORWALK CT			4.	4. If Amendment, Date of Original Filed (Month/Day/Year)								e) <mark>X</mark> Form f	dual or Joint/Group Filing (Check Application Form filed by One Reporting Person					
(City)	(State) (Zip)												Form filed by More than One Reporting Person						
		Tak	ole I - No	n-Deri	vativ	e Se	curit	ties Ac	quired	, Di	sposed c	f, or Be	neficiall	y Owned	l				
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		ar) E	2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disposed (ties Acquired (A) or l Of (D) (Instr. 3, 4 and 5		Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership				
							Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)			
FactSet C	Common Sto	ock		09/29	29/2010				M		7,504	A	\$17.5	7 62	,875		D		
FactSet Common Stock			09/29	9/2010				M		8,938	A	\$14.9	7 71	1,813		D			
FactSet Common Stock			09/29)/29/2010				S		22,442	D	\$82	49	49,371		D			
FactSet Common Stock 0			09/29	9/2010				G		500	D	\$81.94	(1) 48	48,871		D			
			Table II -								osed of			Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Executior if any (Month/Da	ed n Date,	4. Transa	4. Transaction Code (Instr.		5. Number of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and of Security Underlying Derivative (Instr. 3 and	d Amount ies g Security	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	Ownersh Form: Direct (D or Indirect (I) (Instr.		Beneficial Ownership ct (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa	ıble	Expiration Date	Title	Amount or Number of Shares						
Non- Qualified Stock Option (right to buy)	\$17.57	09/29/2010			М			7,504	10/23/20	002	10/23/2011	FactSet Common Stock	7,504	(2)	349,04	4 2	2 D		
Non- Qualified Stock Option (right to buy)	\$14.97	09/29/2010			М			8,938	10/07/20	003	10/07/2012	FactSet Common Stock	8,938	(2)	340,10)4	D		
Non- Qualified Stock Option (right to	\$65.67	09/29/2010			J			29,777	(3)		(3)	FactSet Common Stock	29,777	\$65.67	310,32	27	D		

Explanation of Responses:

- $1. \ Based \ on \ the \ average \ of \ the \ high \ and \ low \ price \ of \ FactSet \ common \ stock \ on \ September \ 29, \ 2010.$
- 2. Column 8 has been intentionally left blank because the transaction was an exercise of a derivative security.
- 3. This performance-based employee stock option grant was forfeited as the issuer did not achieve certain financial performance criteria during the two-year performance period ending August 31, 2010.

Michael D. Frankenfield

10/01/2010

** 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.