FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	S IN BENEFICIAL	L OWNERSHIP

OMB APPRO	VAL
OMB Number:	3235-0287
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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*				2. Issuer Name and Ticker or Trading Symbol FACTSET RESEARCH SYSTEMS INC [5. Relationship of Reporting Person(s) to Issuer (Check all applicable)																
Snow Frederick Philip						FACTSET RESEARCH SYSTEMS INC [FDS]									•	X Director			10% Ov	vner
(Last) (First) (Middle)					- [[LD2]								X	Officer below)	(give title		Other (s	pecify	
C/O FACTSET RESEARCH SYSTEMS INC. 601 MERRITT 7				3. Date of Earliest Transaction (Month/Day/Year) 03/01/2019										Cl	Chief Executive Office					
			03/																	
OUT WILINGTT /					- 4. 11	f Ame	ndme	nt. Date	of Or	riginal F	ilec	I (Month/D	6. Individual or Joint/Group Filing (Check Applicable							
(Street)						Line)														
NORWALK CT 06851														X		Form filed by One Reporting Person Form filed by More than One Reporting				
					-											Form t Persor		e thar	n One Repo	rting
(City)	(S	tate)	(Zip)																	
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transa Date (Month/D				Execution Da			TI C	Transaction Dispos Code (Instr.			ies Acquire Of (D) (Ins			5. Amou Securitie Benefici Owned I	s Forr		n: Direct r Indirect	7. Nature of Indirect Beneficial Ownership		
						ľ	, , ,		Ė		,	Amount	(A) or (D) Prid		e	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common Stock 03/01/2				/2019	2019		Т	M		1,182 A \$9		4.84	4,870			D				
Common Stock 03/01/2				/2019	2019		9	S ⁽¹⁾		1,182 D \$2		\$2	36.63	3,688			D			
		Ţ	able II -										, or Ben			Owned	<u> </u>		<u> </u>	
				(e.g., p	outs,	call	s, wa	ırrants	s, op	ptions	s, c	onverti	ble seci	uritie	s)					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	n Date,		ransaction Code (Instr.		n of		6. Date Exercisa Expiration Date (Month/Day/Yea		!	Amount of Securities Underlying Derivative	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exe	e rcisable		Expiration Date	Title	Amo or Num of Share	ber					
Employee Stock Option (right to buy)	\$94.84	03/01/2019			М			1,182		(2)	1	1/01/2021	Common Stock	1,18	32	\$0	1,183		D	

Explanation of Responses:

- 1. This transaction was effected pursuant to a Rule 10b5-1 Plan adopted by Mr. Snow on October 1, 2018, with an effective date of January 1, 2019 in order to facilitate his exercise of non-qualified stock options. Accordingly, Mr. Snow had no discretion with regard to the timing of the transaction.
- 2. Options were granted on November 1, 2011 and vest over a 5 year period with 20% exercisable one year after the grant date, with the remainder vesting at a rate of 1.67% per month thereafter.

/s/ F. Philip Snow

03/04/2019

** 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.