FORM 5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL

OMB APPROVAL							
OMB Number:	3235-0362						
Estimated average I	burden						

Instructi	ion 1(b). Holdings Repo	rted.	OWNERSHIP									 .	_		stimated average burden ours per response:		
Form 4	Transactions R	eported.	File	ed pursuant to or Sectior					ities Excha ompany Ac								
1. Name and Address of Reporting Person* <u>Nicolelli Maurizio</u>				2. Issuer Name and Ticker or Trading Symbol FACTSET RESEARCH SYSTEMS INC FDS]					<u>NC</u> [5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					Owner		
(Last) (First) (Middle) 601 MERRITT 7				3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 08/31/2015							X	X Officer (give title below) Other (specify below) Chief Financial Officer					
(Street)	4. If Amen	4. If Amendment, Date of Original Filed (Month/Day/Year)					Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person										
(City)	(Sta	ate) (2	Zip)										reis	OII			
		Tabl	e I - Non-Deriv	ative Sec	uritie	s Ac	quire	ed, Di	sposed	of, or	Benefic	cially	Owne	ed			
Date		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.		4. Securities Acquired (A) or Dispos (D) (Instr. 3, 4 and 5)			ed Of	5. Amou Securitie Benefici	es ially	Forn	ership n: Direct	7. Nature of Indirect Beneficial Ownership		
				(Month/Day/1	rear)	8)		Amoun		(A) or (D)			Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)		Indir	ect (I)	(Instr. 4)
FactSet Co	ommon Sto	ck	11/28/2014			J ⁽¹	J ⁽¹⁾ 26		26	A	\$108.	68	3,	708	D		
FactSet C	ommon Sto	ck	02/27/2015			J (1)		55	A	\$116.	5.95 3,763 D					
FactSet Co	ommon Sto	ck	05/29/2015			J ⁽¹)		43	A	\$132.	3,806 D					
FactSet Co	ommon Sto	ck	08/31/2015			J ⁽¹)	4	49	A	\$134.	4.23 3,855				D	
		Та	ble II - Derivat (e.g., p	ive Secur uts, calls,									wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Nu of Deriv Secul Acqu (A) or Dispo of (D) (Instr and 5	Expir: (Mont ities red sed 3, 4		Date Exercisable and chiration Date lonth/Day/Year) ate Expiration longer long			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amou or Numb of Title Share:		erivative der Security Security Security Ow Fol Rep	derivati Securiti Benefic Owned Followi Reporte	curities eneficially vned llowing ported ansaction(s)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)

Explanation of Responses:

1. Shares acquired through the FactSet Research Systems Inc. Employee Stock Purchase Plan.

/s/ Maurizio Nicolelli

10/05/2015

** 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.