FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number:

Estimated average burden hours per response: 0.5

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* KENNEDY KIERAN M. | | | | | | 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 The process of the control o | | | | vner |
|---|---|--|---|-------------|---|--|--------------|---|---|--------------|------------------|--|---|-----------------------|--|---|---|-------------------|---|
| (Last) (First) (Middle) 601 MERRITT 7 | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 04/09/2013 | | | | | | | | | below) | Senior Vio | ce Pre | below) esident | |
| (Street) NORWALK CT 06851 (City) (State) (Zip) | | | | | - 4. li | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | e) <mark>X</mark> Form t | al or Joint/Group Filing (Check Applicable form filed by One Reporting Person form filed by More than One Reporting Person | | | |
| | | Tab | le I - No | n-Deriv | /ative | e Se | curit | ies A | cquired, | Dis | posed c | of, or E | Bene | ficial | ly Owned | d I | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | | | Day/Year) | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Code (Instr. | | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5) | | | 5. Amou Securiti Benefici Owned | 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) | or I | Drice Trans | | tion(s) and 4) | | | (111501.4) |
| FactSet Common Stock 0- | | | | | 4/09/2013 | | | | М | | 1,332 | 2 . | A | \$65.67 14 | | ,639 | D | | |
| FactSet Common Stock 04/0 | | | | | 9/2013 |)/2013 | | | | | 648 | | A | \$35.8 | 3 15 | ,287 | D | | |
| FactSet Common Stock 04/09/ | | | | | 9/2013 | 2013 | | | | | 2,082 | 2 . | 4 | \$66.4 | 6 17 | ,369 | D | | |
| FactSet Common Stock 04/09/2 | | | | | 9/2013 | ′2013 | | | S | | 4,062 | 2 |) | \$91.2 | 6 13 | 307 D | | D | |
| | | 7 | | | | | | | quired, C 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/Da | ed Date, | 4. Transaction Code (Instr. 8) | | 5. Number of | | 6. Date Exercisa Expiration Date (Month/Day/Yea | | able and | 7. Title Amoun Securit Underly Derivat | 7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | ve derivative Securities | Owners Form: Direct (or Indir | Ownership | Beneficial Ownership ct (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercisab | | xpiration ate | Title | or Nu of | nount mber ares | | | | | |
| Non- Qualified Stock Option (right to buy) | \$65.67 | 04/09/2013 | | | М | | | 1,332 | 08/14/200 | 9 0 | 8/14/2015 | FactSe Commo Stock | | 332 | (1) | 44,582 | 2 | D | |
| Non- Qualified Stock Option (right to buy) | \$35.8 | 04/09/2013 | | | M | | | 648 | 10/24/200 | 9 1 | 0/24/2015 | FactSe Commo Stock | | 548 | (1) | 43,934 | 1 | D | |
| Non- Qualified Stock | | | | | | | | | | | 0 100 100 4 6 | FactSe | t | 000 | (1) | | | | |

Explanation of Responses:

Option (right to buv)

\$66.46

1. Column 8 has been intentionally left blank because the transaction was an exercise of a derivative security.

/s/ Kieran M. Kennedy

2,082

04/10/2013

41.852

D

** Signature of Reporting Person Date

(1)

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

04/09/2013

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.

2 082

10/23/2011

10/23/2016

Common Stock

^{*} 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).