

FACTSET RESEARCH SYSTEMS INC

Reported by SHAN HELEN L.

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 10/08/25 for the Period Ending 10/06/25

Address 45 GLOVER AVENUE

NORWALK, CT, 06850

Telephone 2038101000

CIK 0001013237

Symbol FDS

SIC Code 7370 - Services-Computer Programming, Data Processing, Etc.

Industry Professional Information Services

Sector Industrials

Fiscal Year 08/31



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

☐ Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

OMB APPROVAL

OMB Number: 3235-0287 Estimated average burden hours per response... 0.5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

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 37 1 4 1	1 CD	. D	*	2	Iccue	r Name	e and Ticl	zer o	r Tradii	ng Symb	201	5 Relationshi	n of Reno	rting Person	(e) to Icci	ıer
1. Name and Address of Reporting Person –					2. Issuer Name and Ticker or Trading Symbol							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
Shan Helen	L.				ACT FDS		RESEA	RC	CH SY	STEN	AS INC	`	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	10%	Owner	
(Last) (First) (Middle)				3.	3. Date of Earliest Transaction (MM/DD/YYYY)							X_ Officer (give title below) Other (specify below) EVP, Chief Financial Officer				
C/O FACTS	ET RESE	EARCH	SYSTI	EMS			10	/6/2	025							
INC., 45 GL																
,	(Stree	et)		4.	If An	nendme	ent, Date (Origi	inal File	ed (MM/I	DD/YYYY)	6. Individual	or Joint/G	roup Filing	(Check Appl	icable Line)
NORWALK, CT 06850												X_Form filed by One Reporting Person Form filed by More than One Reporting Person				
(C	ity) (Sta	te) (Zi	p)									Form fried by	More man	one Reporting F	CISOII	
			Table I	- Non-De	rivati	ive Sec	urities A	cqui	red, Di	sposed o	of, or Be	neficially Owne	d			
1. Title of Security (Instr. 3)			Frans. Date	2A. D Execu Date, i	tion	3. Trans. Co (Instr. 8)	ode				5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			6. 7. Nature Ownership of Indirect Form: Beneficial Direct (D) Ownership		
							Code	V	Amount	(A) or (D)	Price				or Indirect (I) (Instr. 4)	(Instr. 4)
Common Stock			1	0/6/2025			P		370	A	\$275.48 (<u>1</u>)			9,284	D	
	Tab	le II - Dei	rivative S	Securities	Bene	eficiall	y Owned	(e.g.	, puts,	calls, w	arrants,	options, conver	tible secu	urities)		
1. Title of Derivate Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security 3. Trans. Date Execution Date, if any			(Instr. 8		Acquire Dispose	mber of ative Securities red (A) or sed of (D) 3, 4 and 5)		Date Exe d Expirati		Securitie	nd Amount of s Underlying re Security and 4)	8. Price of Derivative Security (Instr. 5)	Securities Beneficially Owned Following	Ownership Form of Derivative	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	V	(A)	(D)	Da Ex	ite ercisable	Expiratio Date		nount or Number of ares		Transaction(s) (Instr. 4)		

Explanation of Responses:

(1) This transaction was executed in multiple trades with purchase prices ranging from \$275.32 to \$275.52. The price reported above reflects the weighted average purchase price. The reporting person hereby undertakes to provide upon request to the SEC staff, the issuer or a security holder of the issuer full information regarding the number of shares and prices at which the transaction was effected.

Reporting Owners

Reporting Owner Name / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Shan Helen L. C/O FACTSET RESEARCH SYSTEMS INC. 45 GLOVER AVENUE NORWALK, CT 06850			EVP, Chief Financial Officer	•			

Signatures

/s/ WINNIFRED LEWIS, Attorney in Fact for Helen L. Shan

10/8/2025

**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 control number.