## Edgar Filing: Morningstar, Inc. - Form 4

Morningstar, Inc.										
Form 4	-									
October 28, 2016									PROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB Number:	3235-0287		
Check this box	¢							Expires:	January 31,	
if no longer subject to Section 16. Form 4 or	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES						Expires: 2005 Estimated average burden hours per response 0.5			
Form 5 obligations	Filed pursuant					U		·		
may continue. See Instruction		(h) of the I	•	•	-	•		l		
1(b).										
(Print or Type Respo	onses)									
1. Name and Address of Reporting Person *2. IssKaplan Steven NSymbol			uer Name <b>and</b> Ticker or Trading ol				5. Relationship of Reporting Person(s) to Issuer			
Morningstar, Inc. [MOI					N] (Check			k all applicable)		
(Last)	(First) (Middle)		3. Date of Earliest Transaction					an approacto)		
C/O MORNINGSTAR, INC., 22 (Month/I WEST WASHINGTON STREET							_X_ Director Officer (give t below)	title Other (specify below)		
			endment, Date Original			6. Individual or Joint/Group Filing(Check				
			onth/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person			
CHICAGO, IL 6	Form filed by M					lore than One Reporting				
	(State) (Zip)				~		Person			
						-	iired, Disposed of,		-	
1.Title of Security2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, if any (Month/Day/Year)			3. 4. Securities Acquired (A Transaction Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)			) 5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
			Code V	Amount	(A) or (D)	Price \$	Transaction(s) (Instr. 3 and 4)	(Instr. 4)		
Common 10/2 Stock	27/2016		S	2,000 (1)	D	\$ 70.6386 (2)	51,793	D		

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

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.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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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. Transactic Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,			7. Titl Amou Under Secur (Instr.	int of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	4, and 5)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address		Relationsh	nips				
	Director	10% Owner	Officer	Other			
Kaplan Steven N C/O MORNINGSTAR, INC. 22 WEST WASHINGTON STREET CHICAGO, IL 60602	х						
Signatures							
/s/ Heidi Miller, by power of attorney	10/2	8/2016					
**Signature of Reporting Person	Ι	Date					
Explanation of Responses:							

- \* 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).
- (1) The sales reported on this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on 4/28/16.

The transaction was executed in multiple trades at prices ranging from \$70.41 to \$71.16. The price reported above reflects the weighted
 (2) average sale price. The reporting person hereby undertakes to provide upon request to the SEC staff, Morningstar or a shareholder of Morningstar full information regarding the number of shares and prices at which the transaction was effected.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.