### FORM 4

☐ 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.

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# 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. Name and Address of Reporting Person *					2. Issuer Name <b>and</b> Ticker or Trading Symbol								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
Holt Michael					Morningstar, Inc. [ MORN ]								Director	nicuote)	10%	Owner	
(Last) (First) (Middle)				3. 1	3. Date of Earliest Transaction (MM/DD/YYYY)								_X_ Officer (give title below) Other (specify below)				
22 WEST WASHINGTON STREET					11/15/2025								Chief Financial Officer				
	(Str	reet)		4. ]	[f Aı	mendmen	it, Date C	Origin	al Fi	led (	(MM/DI	O/YYYY)	6. Individual c	or Joint/G	roup Filing	Check Appl	icable Line)
CHICAGO, IL 60602													X_Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City) (State) (Zip)												Total free by More than one reporting Ferson					
			Table I -	Non-Der	ivat	tive Secu	rities Ac	quire	ed, D	ispo	osed of	f, or Be	neficially Owne	d			
1. Title of Security (Instr. 3)			Trans. Date	Exe		3. Trans. Co (Instr. 8)	4. Securities Acquired or Disposed of (D) (Instr. 3, 4 and 5)			` ´	5. Amount of Securities Be Following Reported Transs (Instr. 3 and 4)			Ownership of Indi Form: Benefit Direct (D) Owner	Beneficial Ownership		
							Code	V	Amou		(A) or (D)	Price				or Indirect (I) (Instr. 4)	(Instr. 4)
Common Stock 11/15/202				1/15/2025	-				5,665	D							
Common Stock 11/15/202				1/15/2025			F			73	D	\$211.95			5,592	D	
	Ta	ble II - Der	ivative S	ecurities	Ben	eficially	Owned (	( <b>e.g.</b> , ]	puts	, cal	lls, wa	rrants,	options, conver	tible secu	ırities)		
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Trans. Date	3A. Deeme Execution Date, if any	ed 4. Trans. Code y (Instr. 8)	5. Number Derivative Acquired ( Disposed of (Instr. 3, 4)		Securities Exp (A) or of (D)		ate Exercisable and iration Date					of 9. Number of derivative Securities Beneficially Owned Following		11. Nature of Indirect Beneficial Ownership (Instr. 4)	
	Security			Code	v	(A)	(D)	Date Exerci			iration	Title	Amount or Number of Shares		Reported Transaction(s) (Instr. 4)	or Indirect	
Market Stock Units	<u>(1)</u>	11/15/2025		М			163	(1	<u>l)</u>	11/1:	5/2025	Commo Stock	n 163	(1)	0	D	
Market Stock Units	<u>(2)</u>	11/15/2025		A		1,946		(2	2)	11/1	4/2028	Commo Stock	n 1,946	\$0	1,946	D	

#### **Explanation of Responses:**

- (1) Represents common stock earned from the vesting of a market stock unit grant on November 15, 2022.
- (2) The market stock units earned will be based on the company's cumulative total shareholder return for the three year performance period ending November 14, 2028.

#### **Reporting Owners**

reporting o where									
Reporting Owner Name / Address	Relationships								
Reporting Owner Name / Address	Director	10% Owner	Officer	Other					
Holt Michael									
22 WEST WASHINGTON STREET			Chief Financial Officer						
CHICAGO, IL 60602									

#### **Signatures**

/s/Kathleen Peacock, by power of attorney

11/18/2025

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.