**TABLE I - NON-DERIVATIVE SECURITIES ACQUIRED, DISPOSED OF, OR BENEFICIALLY OWNED**

<table>
<thead>
<tr>
<th>Title of Security</th>
<th>Trans. Date</th>
<th>Code</th>
<th>Amount</th>
<th>Price</th>
</tr>
</thead>
<tbody>
<tr>
<td>Common Stock</td>
<td>11/15/2015</td>
<td>F</td>
<td>203</td>
<td>$78.28</td>
</tr>
</tbody>
</table>

**TABLE II - DERIVATIVE SECURITIES BENEFICIALLY OWNED (e.g., puts, calls, warrants, options, convertible securities)**

<table>
<thead>
<tr>
<th>Title of Derivate Security</th>
<th>Conversion or Exercise Date</th>
<th>Number of Derivative Securities Acquired (A) or Disposed of (D)</th>
<th>Date Exercisable</th>
<th>Title of Shares</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>(Instr. 3, 4 and 5)</td>
<td>(Instr. 3 and 4)</td>
<td>Amount or Number of Shares</td>
</tr>
<tr>
<td></td>
<td></td>
<td>(Instr. 3 and 4)</td>
<td>(Instr. 4)</td>
<td>Ownership Form: Direct (D) or Indirect (I)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>(Instr. 4)</td>
<td>(Instr. 4)</td>
<td>Ownership Form: Direct (D) or Indirect (I)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>(Instr. 4)</td>
<td>(Instr. 4)</td>
<td>Ownership Form: Direct (D) or Indirect (I)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>(Instr. 4)</td>
<td>(Instr. 4)</td>
<td>Ownership Form: Direct (D) or Indirect (I)</td>
</tr>
</tbody>
</table>

**EXPLANATION OF RESPONSES:**

**REPORTING OWNERS:**

<table>
<thead>
<tr>
<th>Reporting Owner Name / Address</th>
<th>Relationships</th>
</tr>
</thead>
<tbody>
<tr>
<td>Goff Gregory R</td>
<td>Director</td>
</tr>
<tr>
<td>C/O MORNINGSTAR, INC.</td>
<td>10% Owner</td>
</tr>
<tr>
<td>22 WEST WASHINGTON STREET</td>
<td>Officer</td>
</tr>
<tr>
<td>CHICAGO, IL 60602</td>
<td>Other</td>
</tr>
<tr>
<td></td>
<td>Chief Technology Officer</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Signatures</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>/s/ Heidi Miller, by power of attorney</td>
<td>11/16/2015</td>
</tr>
</tbody>
</table>

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).


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.