FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL									
	OMB Number:	3235-0287								
	Estimated average burden									
- 1	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* GUTIERREZ JOSE M						2. Issuer Name and Ticker or Trading Symbol GARTNER INC [IT]								Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last)	(Fir	st) (I	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 04/01/2024									r (give title		Other (below)		
56 TOP GALLANT ROAD					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)														X Form filed by One Reporting Person					
` ′	STAMFORD CT 06902													Form filed by More than One Reporting Person					
(City) (State) (Zip)					Ru	Rule 10b5-1(c) Transaction Indication													
	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.													ed to					
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transa Date (Month/D					Execution Date,			, Transaction Disposed Code (Instr. 5)		rities Acqui ed Of (D) (In		d Securit Benefic Owned	5. Amount of Securities Beneficially Owned Following		n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership			
								Cod	e V	Amount	(A) (D)	Price	Reporte Transa (Instr. 3	ction(s)			(Instr. 4)		
Common Stock 04/01/					/2024		J (1)		26	A \$0) :	256		D				
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Security (Instr. 3)	erivative Conversion Date Execurity or Exercise (Month/Day/Year) if an		3A. Deem Execution if any (Month/Da	Date,	4. Transactio Code (Inst 8)				6. Date Exercisa Expiration Date (Month/Day/Year		te	7. Title and Amount of Securities Underlying Derivative Securi (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercis		Expiration Date	Title	Amount or Number of Shares						
Common Stock Equivalents (CSE)	\$0	04/01/2024			A		26		(2)		(2)	Common Stock	26	\$477.44	252		D		
Common Stock Equivalents (CSE)	\$0	04/01/2024			J ⁽¹⁾			26	(2)		(2)	Common Stock	26	\$0	226		D		

Explanation of Responses:

- 1. This reporting person has elected to receive an immediate distribution of the CSE shares.
- 2. These are Common Stock Equivalents ("CSEs") received as compensation for service as an outside director of Gartner, Inc. They were granted under the Gartner, Inc. Long-Term Incentive Plan ("LTIP"). The CSEs convert into Gartner common stock on the date the outside director's continuous status as a director terminates, or as otherwise provided in the LTIP.

/s/ Kevin Tang for Jose M Gutierrez

04/03/2024

** 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 Number.