FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Washington,	D.C.	20549	
wasiiiigton,	D.C.	20343	

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
hours por rospons	o: 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

Name and Address of Reporting Person* CESAN RAUL E						2. Issuer Name and Ticker or Trading Symbol GARTNER INC [IT]									(Ch	ieck all		of Reporting F icable) or		rson(s) to Is 10% Ov	
(Last)	`	,	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 06/01/2023										office elow	r (give title)		Other (s below)	specify	
56 TOP GALLANT ROAD					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable						
P.O. BO	X 10212													- 1	Line) X Form filed by One Reporting Person						
(Street)		г.	2004.25	14.5											Form filed by More than One Reporting Person						
STAMFO	ORD C	[)6904-22	212	Rul	Rule 10b5-1(c) Transaction Indication															
(City)	(Si	tate) (Zip)			Check this box to indicate that a transaction was made pursuant to a satisfy the affirmative defense conditions of Rule 10b5-1(c). See Inst															
		Table	e I - Nor	n-Deriv	ative S	Sec	uritie	es Ac	quired	Di	spo	osed	of, or	Ben	eficia	lly O	vne	:d			
1. Title of Security (Instr. 3)			2. Transa Date (Month/I		2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr.			4. Securities Acquired (ADisposed Of (D) (Instr. 3, 5)				, 4 and Securit Benefic Owned		ies For cially (D) Following (I) (n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	V	<i>,</i>	Amoun	ıt (A) or D)	Price	Reporte Transac (Instr. 3		tion(s)			(iiisti. 4)	
Common Stock				06/02	2/2023				М			893	3	A	\$0) 63		3,185		D	
Common Stock																	8,	000			Family Trust #1
Common Stock															4,400				Family Trust #2		
	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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/D	n Date,	Oate, Code (Instr. 8) Transaction of Derivative Securitie Acquired (A) or Disposed of (D)			Number of (Month/Day/Year) Expiration Date (Month/Day/Year) Securities Acquired (A) or Disposed of (D) (Instr. 3, 4				7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)			e of tive ty 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Ownersl Form: y Direct (Dor Indirect) (I) (Instr.	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code			Date Exercisal	ole	Exp Date	oiration e	or Num of		lumber							
Restricted Stock Units	\$0	06/01/2023			A		705		(1)			(1)	Comm Stock		705	\$0		705		D	
Restricted Stock Units	\$0	06/02/2023			M	М		893	(2)			(2)	Comm Stock		893	\$0		0		D	

Explanation of Responses:

- 1. One hundred percent (100%) of the RSUs shall vest on June 1, 2024, subject to Grantee's continued service as a director through such date.
- 2. This award vested in its entirety on June 2, 2023.

/s/ Kevin Tang for Raul E.

06/05/2023

Cesan

** 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.