FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0287 Estimated average burden 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). |
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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 and Ticker or Trading Symbol GARTNER INC [IT] | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | | |
|--|---|---------|---------|---------------|---|--|--|--|------------------------------------|------|--------------------------------------|---|--|---|---|--|---------------------------|--|--|
| <u>GRABE WILLIAM O</u> | | | | | | | | | | | | | | Direc | tor | | 10% Ov | wner | |
| (Last) | (First) (Middle) | | | | 3. Date of Earliest Transaction (Month/Day/Year) 06/09/2023 | | | | | | | | | Offic belov | er (give title v) | | Other (s below) | specify | |
| 56 TOP GALLANT RD | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable | | | | | | |
| P.O. BOX 10212 | | | | | | | | | | | | | Line) | | | | | | |
| | | | | | | | | | | | | | | X Form filed by One Reporting Person Form filed by More than One Reporting | | | | | |
| (Street) STAMFORD CT 06904-221 | | | 1010 | | | | | | | | | | Person | | | | | | |
| STANIFO | STAMFORD CI 06904-2 | | | 2212 | Rule 10b5-1(c) Transaction Indication | | | | | | | | | | | | | | |
| (City) | (St | ate) (Z | | | 5 10 | 500- | т(с) | mana | sac | | icai | 1011 | | | | | | | |
| (City) (State) (Zip) | | | | | | 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. | | | | | | | | | | | | | |
| | | Table | l - Noi | n-Deriva | tive Se | ecui | rities | Acq | uired, | Dis | osed of | f, or | Bene | ficial | ly Owr | ned | | | |
| 1. Title of Security (Instr. 3) 2. Transact Date (Month/Day | | | | y/Year) Exect | | Deemed cution Date, y nth/Day/Year) | | | | | es Acquired (A) Of (D) (Instr. 3, | | | Securi Benefi Owneo Follow | cially 1 ⁄ing | Form (D) o | n: Direct r ect (I) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | | Code | v | Amount | (A (D |)) or)) P | Price | | ted action(s) 3 and 4) | | | |
| Common Stock 06/09/2 | | | | | 2023 | | | | G ⁽¹⁾ | v | 40,000 | | D | \$ <mark>0</mark> | 6,409 | | | 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) | 2. 3. Transaction Date Security 3A. Deemed Execution Date, if any (Month/Day/Year) Security | | | tion Date, | 4. Transaction Code (Instr. 8) | | 5. Numl of Deriv Secu Acqu (A) of Dispc of (D) (Instri and 5 | rative rities ired r osed) . 3, 4 | 6. Date E Expiratio (Month/D | n Da | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | De Se (In | Price of rivative curity str. 5) | 9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4) | у | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercisa | | Expiration Date | Title | Amou or Numb of Share | er | | | | | |

Explanation of Responses:

1. These shares were gifted by the reporting person to a grantor retained annuity trust with an independent trustee on June 9, 2023 (the "2023 GRAT"). The reporting person does not have or share investment control over the shares held by the 2023 GRAT.

| <u>/s/ Kevin Tang for William O.</u> | 00/10/2022 | | | |
|--------------------------------------|------------|--|--|--|
| Grabe | 06/13/2023 | | | |

** 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.