Instruction 1(b)

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| STATEMENT                               | <b>OF CHANGES</b> | IN BENEFICIAL | OWNERSHIP                               |
|---|-------------------|---------------|---|
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| l | OMB APPRO                | DVAL      |  |  |  |  |  |
|---|--------------------------|-----------|--|--|--|--|--|
|   | OMB Number:              | 3235-0287 |  |  |  |  |  |
| l | Estimated average burden |           |  |  |  |  |  |
| ı | hours per response:      | 0.5       |  |  |  |  |  |

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* <u>DYKSTRA KAREN E</u> |      |  |   |                 | 2. Issuer Name <b>and</b> Ticker or Trading Symbol GARTNER INC [ IT ]                     |            |   |  |                    |  | (Ch                                    | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner |  |   |  |                                       |  |
|---|------|--|---|-----------------|---|------------|---|--|--------------------|--|--|---|--|---|--|---------------------------------------|--|
| (Last) 56 TOP C   | (Fir | ,  | Middle)                                     |                 | 3. Date of Earliest Transaction (Month/Day/Year) 10/01/2019                               |            |   |  |                    |  |  | Officer<br>below)   | (give title  |   | Other (s<br>below)   | pecify                                |  |
| P. O. BOX 10212   |      |  |   | 4. If           | 4. If Amendment, Date of Original Filed (Month/Day/Year)                                  |            |   |  |                    |  |  | 6. Individual or Joint/Group Filing (Check Applicable   |  |   |  |                                       |  |
| (Street) STAMFORD CT 06904-2212                                 |      |  | _   |                 |   |            |   |  |                    | Line)  X Form filed by One Reporting Person  Form filed by More than One Reporting  Person       |  |   |  |   |  |                                       |  |
| (City)  | (Sta | ate) (Z                                    | Zip)  |                 |   |            |   |  |                    |  |  |   |  |   |  |                                       |  |
|   |      | Tabl                                       | e I - Non-Deri                              | vative          | Sec   | uritie     | s Ac  | quired, Di   | sposed (           | of, or Be  | neficial                               | ly Owned  | t .  |   |  |                                       |  |
| 1. Title of Security (Instr. 3)  2. Transa Date (Month/D        |      |  |   | Execution Date, |   | Code (Inst | Transaction Disposed Of (D) (Instr. 3, 4    |  |                    | Benefici   | es Fo<br>ally (D<br>Following (I)      | Form  | : Direct   0<br>Indirect   1<br>str. 4)  | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership |  |                                       |  |
|   |      |  |   |                 |   | Code V     | Amount                                      | (A) or<br>(D)  | Price              | Transac<br>(Instr. 3   | tion(s)                                |   |  | (Instr. 4)  |  |                                       |  |
|   |      | Ta   | able II - Deriv                             |                 |   |            |   | uired, Dis<br>s, options,                                      |                    |  |  | Owned   | ,  |   |  |                                       |  |
| Derivative Conversion Date                                      |      | 3. Transaction<br>Date<br>(Month/Day/Year) | Date Execution Date, Month/Day/Year) if any |                 | 4. Transaction Code (Instr. 8) Securitie Acquirer (A) or Dispose of (D) (Instr. 3, and 5) |            | vative<br>rities<br>nired<br>r<br>osed<br>) | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |                    | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative Security<br>(Instr. 3 and 4) |  | 8. Price of<br>Derivative<br>Security<br>(Instr. 5)   | 9. Number<br>derivative<br>Securities<br>Beneficiall<br>Owned<br>Following<br>Reported<br>Transactio<br>(Instr. 4) | ly  | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | Beneficial<br>Ownership<br>(Instr. 4) |  |
|   |      |  |   | Code            | v   | (A)        | (D)   | Date<br>Exercisable  | Expiration<br>Date | Title  | Amount<br>or<br>Number<br>of<br>Shares |   |  |   |  |                                       |  |
| Common<br>Stock<br>Equivalents<br>(CSE)                         | \$0  | 10/01/2019                                 |   | A               |   | 67         |   | (1)  | (1)                | Common<br>Stock  | 67                                     | \$140.86  | 9,443  |   | D  |                                       |  |

## **Explanation of Responses:**

1. These are Common Stock Equivalents ("CSE") received as compensation for service as an outside director of Gartner, Inc. They were granted under the Company's 2014 Long-Term Incentive Plan ("2014 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 2014 LTIP.

/s/ Kevin Tang for Karen

10/03/2019

**Dykstra** 

\*\* 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.