GRABE WILLIAM O Form 4 July 05, 2018

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB APPROVAL OMB

3235-0287 Number: January 31,

Expires:

2005 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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * GRABE WILLIAM O			Symbol	2. Issuer Name and Ticker or Trading Symbol GARTNER INC [IT]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) 56 TOP GA 10212	(First) LLANT RD, I	(Middle) P.O. BOX	3. Date of (Month/Da 07/02/20	•	nsaction			_X_ Director Officer (giv below)	10%	Owner er (specify		
STAMFORI	(Street) D, CT 06904-2	2212		dment, Dat h/Day/Year)	Ü			6. Individual or J Applicable Line) _X_ Form filed by Form filed by Person		erson		
(City)	(State)	(Zip)	Table	I - Non-Do	erivative S	Securi	ties Ac	quired, Disposed o	of, or Beneficial	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction (Month/Day/Yo	ear) Execu any	eemed tion Date, if h/Day/Year)	3. Transaction Code (Instr. 8)	4. Securion Acquired Disposed (Instr. 3,	(A) o l of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock	07/02/2018			J(2)	145	A	\$0	132,908	D			

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

Edgar Filing: GRABE WILLIAM O - Form 4

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	Deriva	ative ities red sed of 3, 4,	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. I Der Sec (Ins
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Common Stock Equivalents (CSE)	\$ 0	07/02/2018		A	145		<u>(1)</u>	<u>(1)</u>	Common Stock	145	\$ 1
Common Stock Equivalents (CSE)	\$ 0	07/02/2018		J(2)		145	<u>(1)</u>	<u>(1)</u>	Common Stock	145	

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
GRABE WILLIAM O 56 TOP GALLANT RD P.O. BOX 10212 STAMFORD, CT 06904-2212	X						

Signatures

/s/ Brian Callahan for William O.
Grabe 07/05/2018

**Signature of Reporting Person

Explanation of Responses:

- * 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).

Date

- These are Common Stock Equivalents (CSE) received as compensation for service as an outside director of Gartner, Inc. They were

 (1) granted under the Company's 2014 Long-Term Incentive Plan (2014 LTIP). The Common Stock Equivalents 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.
- (2) This reporting person has elected to receive an immediate distribution of the CSE shares.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

Reporting Owners 2