Section 16. Forr obligations may

Instruction 1(b)

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| Check this box if no longer subject to | STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP |
|--|--|
| Section 16. Form 4 or Form 5 | |
| obligations may continue See | |

OMB APPROVAL OMB Number: Estimated average burden

0.5

hours per response:

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* PAGLIUCA STEPHEN G | | | | | 2. Issuer Name and Ticker or Trading Symbol GARTNER INC [IT] | | | | | | | | (Ch | eck all app | icable) or | ig Pers | son(s) to Iss 10% Ov | |
|---|---|--|---|--|--|-----|-----------------|---------|---|---|------------------|-----------------|---|---|--|---|---|---------------------------------------|
| | OP GALLANT RD | | | | | | Earlies | t Trans | action (Mor | nth/E | Day/Year) | | | Officer (give title below) | | Other (s below) | pecify | |
| P.O. BOX 10212 | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | |
| (Street) STAMFO | Street) STAMFORD CT 06904-221 | | 6904-2212 | | | | | | | | | | | Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| (City) | (Sta | ate) (2 | Zip) | | | | | | | | | | | | | | | |
| | | Tabl | e I - Non-D | Deriva | tive | Sec | uritie | s Ac | quired, D | Pisp | osed o | of, or Be | neficial | ly Owne | d | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da | | | | r) E | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Transaction Dis | | Disposed | curities Acquired (A) osed Of (D) (Instr. 3, 4 | | Benefic | ies ially Following | Form (D) o | . Ownership form: Direct D) or Indirect) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | | Code | v | Amount | (A) or (D) | Price | Transa (Instr. 3 | ction(s) | | | iiisii. 4) | |
| | | Ta | able II - De (e. | | | | | | uired, Dis , options | | | | | Owned | | | | |
| 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. Transaction Code (Instr. 8) | | n of l | | 6. Date Exercisal Expiration Date (Month/Day/Year | | Amount of | | f g Security | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4) | e s Illy | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) |
| | | | | c | Code | v | (A) | (D) | Date Exercisable | | xpiration ate | Title | Amount or Number of Shares | | | | | |
| Common Stock Equivalents (CSE) | \$0 | 04/02/2007 | | | A | | 513 | | (1) | | (1) | Common Stock | 513 | \$0 | 35,04 | 7 | D | |

Explanation of Responses:

1. These are Common Stock Equivalents received as compensation for service as an outside director of Gartner, Inc. They were granted under the Company's 2003 Long-Term Incentive Plan (2003 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 2003 LTIP or the 1993 Directors' Stock Option Plan for prior transactions.

> /s/ Kevin Feeney for Stephen 04/03/2007 G. Pagliuca

** 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.