FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
OMB Number:	3235-028									
Estimated average h	nurden									

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

hours per response: 0.5

					or S	Section	on 30(h)	of the	e Inve	estment	Con	npany Act	of 194	40								
Name and Address of Reporting Person*  PAGLIUCA STEPHEN G						2. Issuer Name <b>and</b> Ticker or Trading Symbol GARTNER INC [ IT ]										5. Relationship of Reporting Person(s) to Issu (Check all applicable)						
THOEFIC CH OTELTIER C														-	X Dir	ecto	or		10% O	wner		
(Last) (First) (Middle) 56 TOP GALLANT RD					3. Date of Earliest Transaction (Month/Day/Year) 01/04/2016												ficer low)	(give title		Other ( below)	specify	
P.O. BOX 10212				4 If	4. If Amendment, Date of Original Filed (Month/Day/Year)											6. Individual or Joint/Group Filing (Check Applicable						
					- "	AIIIC	namen	, Date	01 0	ziigiiiai i	iicu	(WOTHIND)	uy/ ICC	<i>λ</i> ι)	Line		01 0	omu Oroup	, , ,,,,,	(Check A	рисаыс	
(Street)																X Fo	rm fi	iled by One	e Repo	orting Perso	on	
STAMFORD CT 06904-2212				12 												Form filed by More than One Reporting Person						
(City)	(S	itate) (	Zip)																			
		Tabl	e I - Nor	n-Deriv	ative	Se	curitie	es Ac	cqui	ired, C	isp	osed c	of, or	Ben	eficial	ly Owi	ned					
1. Title of Security (Instr. 3)  2. Transa Date (Month/D					ar)   I	2A. Deemed Execution Date, if any (Month/Day/Yea		9, │	Code (Instr.					Seci Ben Own	5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
										Code	v	Amount		(A) or (D)	Price	Tran	sact	tion(s) and 4)			(111501.4)	
Common Stock 01/04					4/2016	5				<b>J</b> <sup>(2)</sup>		170		A		50,532		532		D		
		Т	able II -									sed of onverti				Owne	ed					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Executior if any (Month/Da	Date,		ransaction code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Date Exe piration I onth/Day	Date		7. Title and Amount of Securities Underlying Derivative Sect (Instr. 3 and 4)					9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e s illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Dat Exe	te ercisable		xpiration ate	Title		Amount or Number of Shares							
Common				П				Ι -	Ι -		1						٦					

## **Explanation of Responses:**

\$<mark>0</mark>

\$<mark>0</mark>

Stock

(CSE) Common Stock

(CSE)

Equivalents

Equivalents

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 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.

170

(1)

(1)

(1)

(1)

2. This reporting person has elected to receive an immediate distribution of the CSE shares.

01/04/2016

01/04/2016

/s/ Clare Kretzman for Stephen G. Pagliuca

170

170

Stock

Common

Stock

\$<mark>0</mark>

\$<mark>0</mark>

01/05/2016

1,838

1,668

D

D

\*\* 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).

**J**(2)

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.