FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
-------------	------	-------

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPROVAL 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). 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>KUTNICK DALE</u>					2. Issuer Name and Ticker or Trading Symbol GARTNER INC [IT]							able) r	g Person(s) to Iss	wner		
	GALLANT	irst)		3. Date of Earliest Transaction (Month/Day/Year) 02/15/2011							fficer (give title Other (selow) below) SVP, Executive Programs					
P.O. BO	X 10212			4. If Ar	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable				
(Street) STAMF(06904-2212 (Zip)						Line	Form filed by One Reporting Person Form filed by More than One Reporting Person						
(- 9)		•		Derivative S	ecurities Acq	uired	Dis	posed of	, or Ben	eficially	v Owned					
1. Title of Security (Instr. 3)		2. D	. Transaction ate Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3.		4. Securitie Disposed C	s Acquired	(A) or	5. Amou	s ally ollowing	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	Transact (Instr. 3 a	ion(s)		(111511.4)		
Common	Stock			02/15/2011		М		5,823(2)	A	\$0	166	,152	D			
Common Stock 02/15/				02/15/2011		F		2,417(3)	D	\$37.22	2 163	,735	D			
Common Stock 02/15/						M		8,007(2)	A	\$0	171	,742	D			
Common Stock 02/15/						F		3,323(3)	D	\$32.77	7 168	,419	D			
					curities Acqu lls, warrants,						Owned					
1. Title of Derivative Security (Instr. 3)	erivative Conversion Date Execution Date, Transacti ecurity or Exercise (Month/Day/Year) if any Code (Ins			te, Transactio Code (Inst	n Derivative	6. Date Exercisable and Expiration Date Amount of (Month/Day/Year) Securities Underlying				8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia	Ownership Form:	Beneficial			

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. Transa Code (8)		Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	Reported	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)		
Restricted Stock Units	\$0	02/15/2011		М			5,823 ⁽²⁾	(1)	(1)	Common Stock	5,823	\$0	5,823	D	
Restricted Stock Units	\$0	02/15/2011		М			8,007 ⁽²⁾	(4)	(4)	Common Stock	8,007	\$0	0	D	

Explanation of Responses:

- 1. These performance-based RSUs vest in four substantially equal annual installments, beginning on 2/15/2009.
- 2. Represent shares acquired upon the release of RSUs.
- 3. Represents shares withheld from the released RSUs for the payment of applicable income and payroll withholding taxes due on release.
- 4. These performance-based RSUs have fully vested and released.

/s/ Jane Lucas for Dale Kutnick 02/16/2011

** 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.