FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPRO | DVAL | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|
| OMB Number: | 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* SMITH JAMES C | | | | | 2. Issuer Name and Ticker or Trading Symbol GARTNER INC [IT] | | | | | | | Relationship eck all appli X Directo | cable) | g Pers | on(s) to Issu | | |
|--|--|-----------------------------------|-----------------|---|---|--------|------|--|--------------------|--|--|--|--|--------|--|--|--|
| (Last) (First) (Middle) 56 TOP GALLANT ROAD | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 07/01/2004 | | | | | | | Officer below) | (give title | | 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 | | | | | |
| (Street) STAMFORD CT 06904-221 | | 6904-2212 | | | | | | | | | | 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-Deriv | ative | Sec | uritie | s Ac | quired, D | isposed (| of, or Be | neficial | ly Owned | ı . | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da | | | | | Execution Date, | | | 3. Transaction Code (Instr. 8) 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4) 5) | | | ed (A) or str. 3, 4 and | Benefici | es ally Following | Form: | Direct Control of the | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | Code V | | | | Amount | (A) or (D) | Price | Transac (Instr. 3 | tion(s) | | | msu. 4) | | |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | cise (Month/Day/Year) f ive | if any (| 4. Transaction Code (Instr. 8) | | n of | | 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) | 9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4) | ly | 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 | | | | | | |
| Common Stock Equivalents (CSE) | \$0 | 07/01/2004 | | A | | 760 | | (1) | (1) | Common Stock Class A | 760 | \$0 ⁽¹⁾ | 7,405 | | D | | |

Explanation of Responses:

1. These shares 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 (LTIP). The Common Stock Equivalents convert into Gartner Class A 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.

By: /s/ Kevin Feeney For:
James Smith
07/02/2004

Date

** Signature of Reporting Person

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.