FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | | |
|--------------------------|-----|--|--|--|--|--|--|--|--|
| OMB Number: 3235-02 | | | | | | | | | |
| 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>LAFOND CHRISTOPHER</u> | | | | | 2. Issuer Name and Ticker or Trading Symbol GARTNER INC [IT] | | | | | | | (Che | elationship o ck all applica Director | able) | g Perso | 10% Ov | | |
|--|---|--|---|----------|--|---|---|-----------------------|--|---------------|---|--|---|---|--|----------------|---|---|
| | st) (First) (Middle) TOP GALLANT ROAD D. BOX 10212 | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 02/22/2014 | | | | | | | 7 | below) | (give title CFO & EV | | below) | респу |
| (Street) | Street) STAMFORD CT 06904-2212 | | | 4. | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | Line) | Individual or Joint/Group Filing (Check Applicable ne) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| (City) | (S | tate) | (Zip) ble I - No | n-Der | ivativ | re Se | -Curi | ities Acc | wired | Dis | nosed of | or Ren | eficially | , Owned | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | nsaction | ction 2A. Deemed Execution Date, | | 3. 4. Securiti Transaction Code (Instr. | | es Acquired (A) or Of (D) (Instr. 3, 4 and | | 5. Amoun Securities Beneficia Owned Fo | s lly ollowing | Form: | Direct Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership | | | |
| | | | | | | | Code | v | Amount | (A) or (D) | Price | Reported Transacti (Instr. 3 a | ction(s) | | | (Instr. 4) | | |
| Common Stock 02/22/2 | | | | 22/201 | 2014 | | M | | 10,446 ⁽² | 2) A | \$0 | 60,221 | | D | | | | |
| Common Stock 02/22/2 | | | | 22/201 | 2014 | | F | | 5,082(3) | D | \$66.54 | 55,139 | | | D | | | |
| | | | Table II - | | | | | | | | osed of, convertib | | | 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) | | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | te | 7. Title and of Securiti Underlying Derivative (Instr. 3 and | ies g Security | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficia Owned Following Reported | e s Illy | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4 | Beneficial Ownership t (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercisable | | Expiration Date | Title | Amount or Number of Shares | | Transacti (Instr. 4) | on(s) | | |
| Restricted Stock Units | \$0 | 02/22/2014 | | | M | | | 10,446 ⁽²⁾ | (1) | | (1) | Common Stock | 10,446 | \$0 | 10,44 | 5 | D | |

Explanation of Responses:

- 1. These performance-based RSUs were awarded on February 22, 2011 and vest in four substantially equal annual installments, commencing on 2/22/2012.
- 2. Represents shares acquired upon release of RSUs.
- 3. Represents shares withheld from a released RSUs for the payment of applicable income and payroll withholding taxes due on release.

/s/ Clare Kretzman for Christopher Lafond 02/24/2014

** 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.