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UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)												
1. Name and Address of F GALVIN BRANDI	2. Issuer Name and Ticker or Trading Symbol EQUINIX INC [EQIX]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
301 VELOCITY WA	(First) AY, 5TH FLOO		3. Date of Earliest Transaction (Month/Day/Year) 06/01/2004						X_Officer (give title below)Other (specify below) General Counsel			
(Street) FOSTER CITY, CA 94404			4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned									
1. Title of Security 2. Transaction (Instr. 3) Date (Month/Day/Yea)			Execution Date, if any	(Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	Ownership Form: of Indire Benefici	Beneficial	
			(Month/Day/Year)	Code	v	Amount	(A) or (D)	Price	(Instr. 3 and 4)	Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
Common		06/01/2004		М		1,500	А	\$ 3.25	4,031	D		
Common		06/01/2004		S		1,500 (1)	D	\$ 31.1048	2,531	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(e.g., puts, calls, warrants, options, convertible securities)															
1. Title of	2.	3. Transaction	3A. Deemed	4.		5. N	umber	6. Date Exercisab	le and	7. Title and Amount		8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transact	tion	of I		Expiration Date		of Underlying		Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code		Der	ivative	(Month/Day/Year	r)	Securities		Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8))	Secu	urities			(Instr. 3 and 4)		(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative					Acq	uired						Owned	Security:	(Instr. 4)
	Security					(A)							0	Direct (D)	
							posed						1	or Indirect	
						of (l							Transaction(s)		
							tr. 3, 4,						(Instr. 4)	(Instr. 4)	
						and	5)								
											Amount				
								Date	Expiration		or				
								Exercisable	Date		Number				
								Literensuore	Duit		of				
				Code	V	(A)	(D)				Shares				
Employee															
Stock															
	\$ 3.25	06/01/2004		М			1 500	03/06/2003(2)	02/06/2012	Common	1 500	\$ 0	43,500	D	
Option	\$ 3.23	00/01/2004		IVI			1,300	03/06/2003	03/00/2013	Common	1,300	\$0	45,500	D	
(Right to															
buy)															

Reporting Owners

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
GALVIN BRANDI 301 VELOCITY WAY, 5TH FLOOR FOSTER CITY, CA 94404			General Counsel				

Signatures

Brandi Galvin	06/02/2004
**Signature of Reporting Person	Date

Explanation of Responses:

* 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).
- (1) Shares sold pursuant to a 10b5 trading plan.
- (2) This option vests monthly at 1/36 of the total options granted for a period of 36 months.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.