# FORM 4

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

OMB APPROVAL
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).

#### 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 Ty	pe Response	s)																
Name and Address of Reporting Person * Baack Sara						2. Issuer Name and Ticker or Trading Symbol EQUINIX INC [EQIX]							5	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
(Last) (First) (Middle) C/O EQUINIX, INC, ONE LAGOON DRIVE					3. Date of Earliest Transaction (Month/Day/Year) 08/03/2020								X Officer (give title below) Other (specify below)  Chief Product Officer					
(Street)					4. If	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				
		, CA 94065	5										_			- Cale Reporting		
(City	)	(State)		(Zip)			Tal	ole I -	Non-l	Derivativ	e Secur	ities 1	Acquir	red, Disp	osed of, or l	Beneficially	Owned	
1.Title of Security (Instr. 3)			Date	2. Transaction Date (Month/Day/Year)			if (	Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)				5. Amount of Securities Beneficially Owned Following Reported Transaction(s)			Ownership or Form:	Beneficial
					(Month/Day/Year)		ar)	Code	, ,	/ Amou	(A) or (D)		Price	(Instr. 3	3 and 4)		\ /	Ownership (Instr. 4)
Common	Stock		08/03	3/2020				S <sup>(1)</sup>		250	D	\$ 77	76.64	10,179			D	
				Table II -					th	e form	display	s a c Bene	curren eficially	tly valid	OMB con	spond unle trol numbe		
Security	2. Conversion or Exercise Price of Derivative Security		Year) Execution	3A. Deemed Execution Da		Code	5. Number of		r ive ies ed ed ed s,	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Tit Amor Unde Secur	Amount	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ownersh Form of Derivati Security Direct (I or Indire	(Instr. 4)	
						Code	V	(A) (		ate xercisabl		ration	Title	or Number of Shares				

### **Reporting Owners**

	Relationships								
Reporting Owner Name / Address	Director	10% Owner	Officer	Other					
Baack Sara C/O EQUINIX, INC ONE LAGOON DRIVE REDWOOD CITY, CA 94065			Chief Product Officer						

# **Signatures**

Samantha Lagocki, POA	08/04/2020
**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 were sold pursuant to a 10b5-1 Trading Plan

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.