# FORM 4

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

OMB APPROVAL
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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)																	
1. Name and Address of Reporting Person * TAYLOR KEITH D					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							
(Last) (First) (Middle) ONE LAGOON DRIVE					3. Date of Earliest Transaction (Month/Day/Year) 11/16/2020							X Officer (give title below) Other (specify below)  Chief Financial Officer							
(Street)				4. If								b. Individual or Joint/Group Filing(Check Applicable Line)  X_Form filed by One Reporting Person Form filed by More than One Reporting Person							
	OD CITY	*	55														- Cale Reporting		
(City	)	(State)		(Zip)			T	able I	- No	n-D	erivative	Secui	rities A	Acquir	ed, Dispo	osed of, or I	Beneficially	Owned	
(Instr. 3)			Date (Month/Day/Year) a		Execut	A. Deemed Execution Date, if ny Month/Day/Year)		Code		n	(Instr. 3, 4 and 5)			d (A)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			Ownership Form: I Direct (D)	Beneficial Ownership
								Cod	le	V	Amount	(A) or (D)	Pr	rice				(I) (Instr. 4)	(IIIstr. 4)
Common Stock			11/16/	/2020				S <sup>(1</sup>	)		100	D	\$ 73	9.00	30,567			D	
Common Stock			11/16/	/2020				S <sup>(1</sup>	J		200	D	\$ 74	5.98	30,367			D	
Common Stock		11/16/	6/2020				S(1	)		100	D	\$ 74	9.30	30,267	30,267		D		
Common Stock		11/16/	/2020				S <sup>(1</sup>	)		300	D	\$ 75 (2)	1.75	29,967			D		
Common Stock		11/16/	/2020	020		S <sup>(1)</sup>		)		300	D	\$ 753.	7433 29,667		,		D		
Reminder:	Report on a s	separate line	for each	class of sec	urities l	oeneficia	lly c	wned	direc	Pe	rsons w	ho re in thi	s forn	n are	not requ	ction of inf iired to res OMB cont	spond unle	ss	C 1474 (9-02
				Table II -							Disposed ns, conve				Owned				
1. Title of Derivative Security (Instr. 3)  2. Conversion or Exercise Price of Derivative Security  3. Transact Date (Month/Dath)		Execution Da ay/Year) any		l Pate, if	4. 5.		ber vative rities ired r osed	6. Date Ex and Expira (Month/Da		Exercisable iration Date		7. Title and Amount of Underlying Securities (Instr. 3 and 4)  Amoun		Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Owner Form of Deriva Securit Direct or Indi	f Benefi Owner y: (Instr.		
						Code	V	(A)	(D)		ate kercisable		ration		or Number of Shares				

#### **Reporting Owners**

	Relationships								
Reporting Owner Name / Address	Director	10% Owner	Officer	Other					
TAYLOR KEITH D ONE LAGOON DRIVE REDWOOD CITY, CA 94065			Chief Financial Officer						

### **Signatures**

Samantha Lagocki, POA	11/17/2020
**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
  - The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$751.49 to \$752.08 inclusive. The
- (2) reporting person undertakes to provide to Equinix, Inc, any security holder of Equinix Inc, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in footnotes 3 to this Form 4.
- (3) The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$753.48 to \$754.03 inclusive.

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.