### FORM 4

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

OMB APPR	OVAL
OMB Number:	3235-0287
Estimated average	burden
hours per response	0.5

5. Relationship of Reporting Person(s) to Issuer

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

1. Name and Address of Reporting Person\*

(Print or Type Responses)

#### 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

2. Issuer Name and Ticker or Trading Symbol

MORANDI BRANDI GALVIN			EQUINIX INC [EQIX]						Director 10% Owner						
(Last) (First) (Middle) C/O EQUINIX, INC., ONE LAGOON DRIVE				3. Date of Earliest Transaction (Month/Day/Year) 09/01/2022							X_Officer (give title below) Other (specify below)  Chief Legal and HR Officer				
(Street) REDWOOD CITY, CA 94065				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 Acqui						red, Disposed of, or Beneficially Owned				
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)			Transac ode nstr. 8)	0	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		ollowing (s)	6. Ownership Form:	7. Nature of Indirect Beneficial	
				(Month/Day/Year	<i>(</i> a1)	Code	V A	Amount	(A) or (D)	Price	(Ilisti. 3 and			Oirect (D) Ownership or Indirect (I) (Instr. 4) (Instr. 4)	
Common S	Stock		09/01/2022			M	1	132	A	\$ 0	17,416		]	D	
Common S	Stock		09/02/2022			S <sup>(1)</sup>	6	50	D	\$ 652.69	17,356		1	D	
Common S	Stock		09/02/2022			S <sup>(1)</sup>	6	5	D	\$ 654.0017	17,350		]	D	
Reminder: Re	eport on a sep	parate line for e	ach class of securit	ies beneficially o	wned	directly	Perso	ons wl ained i	in this	form are n	e collection ot required alid OMB co	d to respo	nd unless th		1474 (9-02
Reminder: Re	eport on a se	parate line for e	ach class of securit	ies beneficially o	owned	directly	Perso	ons wl ained i	in this	form are n	ot required	d to respo	nd unless th		1474 (9-02
1. Title of	2. Conversion	3. Transaction	Table II  3A. Deemed Execution Date any	- Derivative Se (e.g., puts, cal 4. Transactic Code Year) (Instr. 8)	curitions.  5.  Nu  of  De  Sec  Ac  (A)  Dis  of	mber rivative curities quired o or sposed (D)	Persoconta form ired, Disoconta options, 6. Date and Ex	ons whained in displa	in this ays a coof, or I rtible so sable a Date	form are n urrently va Beneficially ecurities)	ot required alid OMB co Owned and Amount lying	8. Price of	nd unless th	f 10. Owners Form of Derivati Security Direct ( or Indire	f Benefic Owner (Instr. 4
Title of     Derivative     Security	2. Conversion or Exercise Price of Derivative	3. Transaction Date	Table II  3A. Deemed Execution Date any	- Derivative Se (e.g., puts, cal 4. tte, if Transaction Code	curitions.  5.  Nu of De Sec Ac (A) Dis of (In	mber rivative curities quired o or sposed	Persoconta form ired, Disoconta options, 6. Date and Ex	ons what in displaces is posed converted Exercises piration	in this ays a coof, or I rtible so sable a Date	Geneficially courities  7. Title at of Underly Securities	ot required alid OMB co Owned and Amount lying	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(	f 10. Owners Form of Derivati Security Direct ( or Indirects)	11. Na of Indi Benefi Owner (Instr
Title of     Derivative     Security	2. Conversion or Exercise Price of Derivative	3. Transaction Date	Table II  3A. Deemed Execution Date any	- Derivative Se (e.g., puts, cal 4. Transactic Code Year) (Instr. 8)	curitions.  5.  Nu of De Sec Ac (A) Dis of (In	mber rivative curities quired ) or sposed (D) str. 3, and 5)	Persoconta form ired, Disoconta options, 6. Date and Ex	ons what is the second of the	in this ays a coof, or I rtible so sable a Date	Geneficially courities  7. Title an of Underl Securities (Instr. 3 a	ot required alid OMB co Owned and Amount lying	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(	f 10. Owners Form of Derivati Security Direct ( or Indirects)	11. Na of Indi Benefi Owner (Instr. D)

Other

Relationships

Chief Legal and HR Officer

Officer

10%

Owner

Director

## Signatures

C/O EQUINIX, INC.

ONE LAGOON DRIVE REDWOOD CITY, CA 94065

Reporting Owner Name / Address

MORANDI BRANDI GALVIN

/s/ Samantha Lagocki, POA	09/06/2022

-*Signature of Reporting Person Date					
	**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 in order to raise funds to pay the required withholding tax pursuant to the vesting of RSUs.
- The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$653.99 to \$654.01, inclusive. The reporting (2) 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 this footnote to this Form 4.
- Vesting is dependent upon continuous active service as an employee or director of the Company or a subsidiary of the Company (Service) throughout the vesting period. The
- (3) Restricted Stock Units shall vest as follows: 16.67% of the RSUs vesting on September 1, 2020 and an additional 16.67% of the RSUs vesting every 6 months thereafter until fully vested
- (4) Restricted stock unit award expires upon reporting person's termination of service.

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.