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).

(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

1. Name and Address of Reporting Person* VAN CAMP PETER				2. Issuer Name and Ticker or Trading Symbol EQUINIX INC [EQIX]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X_Director 10% Owner					
301 VEL	OCITY W	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Yea 11/15/2005							X Officer (gi		Oth Executive Of	ner (specify belo ficer	w)
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				
(Cit	y)	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned									ned		
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year)					(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:	Beneficial		
				(Month/Day/Y		Code	V	Amount	(A) or (D)	Price	(Instr. 3 and 4)				Ownership (Instr. 4)
Common	Stock		11/15/2005			M		6,600	A	\$ 3.25	10,962			D	
Common	Stock		11/15/2005			S		6,600 (1)	D	\$ 35.6736	4,362			D	
Common	Stock		11/15/2005			M		5,000	A	\$ 17.697	9,362			D	
Common	Stock		11/15/2005			S		5,000 (1)	D	\$ 35.678	4,362			D	
Reminder:	Report on a s	separate line for eac	h class of securities	beneficially ow	vned dii	rectly o	Pers	sons wh tained ir	this f	orm are n	e collection ot required alid OMB co	to respon	d unless th		1474 (9-02)
			Table II -	Derivative Sec (e.g., puts, call							Owned				
1. Title of Derivative Security (Instr. 3)	Conversion	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year	Transaction Code (Instr. 8)	5. Num of Derivat Securiti Acquire (A) or	tive (I	xpiratio	Exercisab on Date Day/Year		7. Title of Unde Securiti (Instr. 3	es		9. Number of Derivative Securities Beneficially Owned Following	Ownersh Form of	ownersh (Instr. 4)

Security (Instr. 3)	Conversion	3. Transaction Date (Month/Day/Year)	Execution Date, if	Code	tion)	of Deri Sect Acq (A) Disp of (I	ivative urities uired or cosed D) tr. 3, 4,	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		Derivative Security (Instr. 5)	Derivative Securities Beneficially Owned Following	Ownership Form of Derivative Security: Direct (D) or Indirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares					
Stock Option (Right to Buy)	\$ 3.25	11/15/2005		M			6,600	(2)	03/06/2013	Common Stock	6,600	\$ 0	24,200	D		1
Stock Option (Right to Buy)	\$ 17.697	11/15/2005		M			5,000	<u>(3)</u>	09/25/2013	Common Stock	5,000	\$ 0	330,000	D		Ì

Reporting Owners

December 19 and November 19	Relationships								
Reporting Owner Name / Address	Director	10% Owner	Officer	Other					
VAN CAMP PETER 301 VELOCITY WAY FOSTER CITY, CA 94404	X		Chief Executive Officer						

Signatures

Monica Volta, Attorney-in-Fact	11/15/2005
**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 10b5-1 Trading Plan.
- (2) Option vests and becomes exercisable in 36 equal monthly installments from 1/1/2003.
- (3) Option vests and becomes exercisable in 36 equal monthly installments from 9/25/2003.

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.