

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

| OMB APPROVAL | | | | |
|--------------------------|-----------|--|--|--|
| OMB Number: | 3235-0104 | | | |
| Estimated average burden | | | | |
| nours per response | | | | |

INITIAL STATEMENT OF 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) | | | | | | | | | |
|---|---------------------|--|--------|---|---|---|--|--|--|
| Name and Address of Reporting Person * CALDWELL NANCI | Stateme | 2. Date of Event Requiring Statement (Month/Day/Year) 12/15/2015 | | | | | | | |
| EQUINIX, INC, ONE LAGOON DRIV | ,, | | | Issuer | f Reporting Persor | \ / | 5. If Amendment, Date Original Filed(Month/Day/Year) | | |
| (Street) REDWOOD CITY, CA 94065 | | | | _X_ Director | Officer (give title Other (specify | | 6. Individual or Joint/Group FilingCheck 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 Beneficially Owned | | | | | wned | | |
| 1.Title of Security (Instr. 4) | | В | | ally Owned | | 4. Nature of Indire (Instr. 5) | ect Beneficial Ownership | | |
| 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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 4) 2. Date Exercisable and Expiration Date (Month/Day/Year) | | rcisable ion Date | 3. Tit | cle and Amount of rities Underlying Derivative rity | 4. Conversion or Exercise Price of Derivative | 5. Ownership Form of Derivative Security: Direct | 6. Nature of Indirect Beneficial Ownership (Instr. 5) | | |
| | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | Security | (D) or Indirect (I) (Instr. 5) | | | |
| | | | | | | | | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | |
|--|---------------|--------------|---------|-------|--|
| | Director | 10% Owner | Officer | Other | |
| CALDWELL NANCI EQUINIX, INC ONE LAGOON DRIVE REDWOOD CITY, CA 94065 | X | | | | |

Signatures

| Darrin B. Short, Attorney-in-Fact | 12/16/2015 |
|-----------------------------------|------------|
| **Signature of Reporting Person | Date |

Explanation of Responses:

No securities are beneficially owned

- * If the form is filed by more than one reporting person, see Instruction 5(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).

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.

POWER OF ATTORNEY

Know all by these presents, that the undersigned hereby constitutes and appoints each of, Samantha Lagocki, Melanie Mock, Brandi Galvin Morandi, Margaret Paige, Darrin B. Short and Keith Ta

1. execute for and on behalf of the undersigned's capacity as an officer and/or director of Equinix, Inc. (the "Company") Forms 3, 4 or 5 and in accordance with Section 16(a) of the Securities Ex

2. do and perform any and all acts for and on behalf of the undersigned which may be necessary or desirable to complete the execution of any such Forms 3, 4 or 5 and the timely filing of such for

3. take any other action of any type whatsoever in connection with the foregoing which, in the opinion of such attorney-in-fact, may be of benefit to, in the best interest of, or legally required

The undersigned hereby grants to each such attorney-in-fact full power and authority to do and perform all and every act and thing whatsoever requisite, necessary and proper to be done in the ex

This Power of Attorney shall remain in full force and effect until the undersigned is no longer required to file Forms 3, 4 and 5 with respect to the undersigned's holdings of and transactions i

IN WITNESS WHEREOF, the undersigned has caused this Power of Attorney to be executed as of this 11 day of December, 2015.

/s/ Nanci Caldwell

Signature

Nanci Caldwell

Print Name