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 Type Re	sponses)		-																
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							
(Last) (First) (Middle) C/O EQUINIX, INC., 301 VELOCITY WAY				3. Date of Earliest Transaction (Month/Day/Year) 07/14/2005								X Officer (give title below) Other (specify below) Chief Executive Officer							
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year)							_X_	6. Individual or Joint/Group Filing(Check Applicable Line) X_ Form filed by One Reporting Person Form filed by More than One Reporting Person							
FOSTER CIT	Y, CA 944	104											roini ined b	y ivioi	e man One Ke	porting reison			
(City)		(State)	(Zip)				Table I	- Non-l	Derivati	ve Secu	ırities A	Acquired	, Dispose	d of,	or Benefic	cially Owned	l		
(Instr. 3)			2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		if	(Instr. 8)		4. Securities Acq or Disposed of (I (Instr. 3, 4 and 5)		f (D) l 5)	(D) Own 5) Trans		Amount of Securities Beneficially vned Following Reported ansaction(s) str. 3 and 4)			Form: Direct (D	of l Bei Ow	7. Nature of Indirect Beneficial Ownership (Instr. 4)
							Code	V	Amou		Pri	ice					(Instr. 4)		
Common Stock 07/14/2005			07/14/2005				M		8,250	A	\$ 0	8,	8,250				D		
Common Stock 07/15/2005			07/15/2005				M		7,500	A	\$ 3.2	25 1:	15,750			D			
Common Stock 07/15/2005			07/15/2005				S		7,500 (1)	D	\$ 43	8.81 8,	8,250			D			
Common Stock 07/18/2005			07/18/2005				S		3,888 (1)	D	\$ 43.2 (3)	2608 4,	362				D		
	•		Table II	- Derivativ	e Seci	uriti	ies Acqu	this	form a ently v	re not alid Ol	require //B cor	ed to re ntrol nu	spond ui mber.			n contained n displays a		C 147	4 (9-02)
		ı		(e.g., puts		_		_				r							11. Natur
Security or Exercise (Month/Day/Year) any			Execution Date	e, if Transaction of Code Derivat			urities quired or posed D) etr. 3, 4,	Expiration Date of (Month/Day/Year) Sci				of Unde Securiti	Underlying Derivative Security (Instr. 5)			9. Number of Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owner Form Deriv Secur Direct or Inc. (s) (I)	Ownership Form of Derivative Security: Direct (D) or Indirect	
				Code	V	(A)	(D)	Date Exercis	sable	Expirat Date	ion	Title	Amo or Num of Share	ber					
Restricted Stock	\$ 0	07/14/2005		М			8,250	07/14	/2005	02/08	/2015	Comm	1 X 7'	50	\$ 0	57,750	Ι)	
Employee Stock Option(Right to Buy)	\$ 3.25	07/15/2005		М			7,500	Ĺ	(2)	03/06	/2013	Comm	/.) (00	\$ 0	50,600	Ι)	

Reporting Owners

D 41 0 N 4	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
VAN CAMP PETER C/O EQUINIX, INC. 301 VELOCITY WAY FOSTER CITY, CA 94404	X		Chief Executive Officer					

Signatures

**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 with respect to 1/36 of the option each month for a period of 36 months.
- Block Sales; 100 shs @44.00, 100 shs @43.90, 100 shs @43.81, 100 shs @43.61, 300 shs @43.42, 200 shs @43.37, 100 shs @43.36, 188 shs @43.35, 300 shs @43.33, 200 shs @43.32, 100 (3) shs @43.30, 100 shs @43.29, 100 shs @43.27, 100 shs @43.25, 100 shs @43.21, 100 shs @43.20, 200 shs @43.15, 100 shs @43.13, 300 shs @43.11, 200 shs @43.10, 100 shs @43.09, 200 shs @43.02, 100 shs @42.97, 200 shs @42.95, 100 shs @42.94, 100 shs @42.75

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.