FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10. Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OMB Number: Estimated average burden 0.5 hours per response:

1. Name and Address of Repo Abdel Raouf	orting Person [*]	2. Issuer Name and Ticker or Trading Symbol <u>EQUINIX INC</u> [EQIX]		ionship of Reporting Person(s all applicable) Director) to Issuer 10% Owner
(Last) (First	(Middle)		x	Officer (give title below)	Other (specify below)
		3. Date of Earliest Transaction (Month/Day/Year)		EVP, Global Oper	ations
C/O EQUINIX. INCE.		06/02/2025			
ONE LAGOON DRIVE					
(Street)		4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indivi	dual or Joint/Group Filing (Che	eck Applicable Line)
REDWOOD CITY CA	94065		X	Form filed by One Reporting	g Person
				Form filed by More than On	e Reporting Person
(City) (Stat	e) (Zip)				

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Transaction Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership
		Code V		Amount	(A) or (D)	Price	(Instr. 3 and 4)		(Instr. 4)
Common Stock	06/02/2025	М		365	Α	\$ <u>0</u>	6,939	D	
Common Stock	06/02/2025	F		160 ⁽¹⁾	D	\$890.49	6,779	D	

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transac Code (Ir 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	Securities Beneficially Owned Following Reported	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)		
Restricted Stock Unit	\$ <mark>0</mark>	06/02/2025		М			365	(2)	(3)	Common Stock	365	\$ <mark>0</mark>	1,821	D	

Explanation of Responses:

1. Shares withheld by Equinix to satisfy tax withholding requirements on vesting of restricted stock units.

2. 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 Restricted Stock Units shall vest as follows: 16.67% of the RSUs vesting on June 1, 2025 and an additional 16.67% of the RSUs vesting every 6 months thereafter until fully vested.

3. Restricted stock unit award expires upon reporting person's termination of service.

/s/ Samantha Lagocki, POA

** Signature of Reporting Person

06/03/2025 Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

* 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.

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