FORM 4

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

OMB APPR	OVAL
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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

1 37 1															
(Print or Type Responses) 1. Name and Address of Reporting Person * KOEN PHILIP J			2. Issuer Name and Ticker or Trading Symbol EQUINIX INC [EQIX]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
(Last) (First) (Middle) 301 VELOCITY WAY, 5TH FLOOR				3. Date of Earliest Transaction (Month/Day/Year) 10/26/2004						X	X Officer (give title below) Other (specify below) President / COO				
(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 CITY, CA 94404															
(City)		(State)	(Zip)			Table I	- Non-Der	ivative	Securitie	s Acquired	, Disposed o	f, or Benef	icially Owned		
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	any	emed on Date, if Day/Year)	(Instr. 8)		4. Securities Acquir (A) or Disposed of ((Instr. 3, 4 and 5)		f (D) Ow Tra				6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership	
						Code	v A	.mount	(A) or (D)	Price			(or Indirect (Instr. 4)	
Common			10/26/2004			М	1	00	A	§ 3.25 15,	871		I)	
Common			10/26/2004			S	1	00 (1)		§ 15,	771		I)	
Reminder: R				<u> </u>	owned da	ectly of I	Person in this	form a	are not re	quired to	respond u		on contained form display		1474 (9-02)
Reminder: R				· Derivati	ive Securi	ties Acqu	Person in this t a curre	form a ntly va osed of	are not re alid OMB f, or Benef	equired to control n	respond u umber.				1474 (9-02)
1. Title of Derivative Security (Instr. 3)	2. Conversion	3. Transaction	Table II - 3A. Deemed Execution Date, if	Derivati (e.g., pu 4. Transaci Code	ive Securits, calls, w	tites Acquarrants, oper (Mative itities irred or sseed of the control of the cont	Person in this t a curre	form a ntly va osed of nvertil sable a te	are not re alid OMB f, or Benef ble securi	equired to control n ficially Owr	respond u umber. ned and Amount lying	8. Price of		To 10. Owners! Form of Derivati Security Direct (lor Indirect)	11. Naturof Indires Benefic Owners: (Instr. 4
1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	3. Transaction Date	Table II - 3A. Deemed Execution Date, if any	Derivati (e.g., pu 4. Transaci Code	ive Securits, calls, was calls, was calls, was calls, was calls. So the security of the securi	tites Acquarrants, ber Ex. (Mative ities ired or seed.) 3, 15)	Person in this to a curre tired, Disposor Date Exercipiration Date Onth/Day/Y	form a ntly va osed of nvertil sable a te Year)	are not realid OMB	control n ficially Own ties) 7. Title an of Under	respond u umber. ned and Amount lying	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s	To Owners! Form of Derivati Security Direct (I or Indirect) (I)	11. Naturof Indires Benefic Owners: (Instr. 4

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
KOEN PHILIP J 301 VELOCITY WAY, 5TH FLOOR FOSTER CITY, CA 94404			President / COO			

Signatures

Philip Koen	10/26/2004
**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 trading plan.
- (2) This option vests monthly at 1/36 of the total options granted for a period of 36 months.

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.