## FORM 4

(Print or Type Responses)

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

OMB APPROVAL

OMB Number: 3235-0287

Estimated average burden hours per response... 0.5

5. Relationship of Reporting Person(s) to Issuer

Check this box 11 no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

1. Name and Address of Reporting Person\*

#### 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

2. Issuer Name and Ticker or Trading Symbol

TAYLOR KEITH D				EQUINIX INC [EQIX]							(Check all applicable) Director 10% Owner					
(Last) (First) (Middle) 301 VELOCITY WAY				3. Date of Earliest Transaction (Month/Day/Year) 12/10/2007						X	X Officer (give title below) Other (specify below)  Chief Financial Officer					
(Street) FOSTER CITY, CA 94404				4. If Amendment, Date Original Filed(Month/Day/Year)							6. Individual or Joint/Group FilingCheck Applicable Line) _X_Form filed by One Reporting Person _Form filed by More than One Reporting Person					
(Cit	(City) (State) (Zip)				Table I - Non-Derivative Securities Acqui							red, Disposed of, or Beneficially Owned				
(Instr. 3) Date			2A. Deemed Execution Date, if any (Month/Day/Year)		f Code (Instr.	(	(A) or Disposed of (D) (Instr. 3, 4 and 5)			Owned Following Reported Transaction(s)			Form:	7. Nature of Indirect Beneficial		
					Co	de V	Amount (A) or (D)		Price	(Instr. 3 and 4)			Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)		
Common	Stock		12/10/2007			N	1	1,000	A	\$ 30.02 53	3,167			D		
Common	Stock		12/10/2007			SC	2)	1,000	1)	\$ 107.48 52	2,167			D		
							conta		this fo	rm are not	required	to respond	d unless the		1474 (9-02)	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if	4. Transac Code	s, calls, 1 5. 1 5. 1 6. 1 7 8	Number rivative curities quired or posed D) str. 3, 4,	conta form	ined in to displays posed of, convertible tercisable Date	this for a curr or Ben	rm are not rently valid reficially Ov	required d OMB co wned d Amount ying	to respond ntrol numb 8. Price of	d unless the	of 10. Owners Form o Derivat Security Direct ( or Indir	ship of Indirect Beneficia ive Ownershi (Instr. 4)	
Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, if	4. Transac Code	s, calls, 1 5. 1 5. 1 6. 1 7 8	Number rivative surities quired or posed D) str. 3, 4, 5)	quired, Dis s, options, o 6. Date Ex Expiration	ined in the displays posed of, convertible to the displays the display of the dis	this for s a curr , or Ben ble secu	rm are not rently valid reficially Overities)  7. Title and of Underly Securities	required d OMB co wned d Amount ying	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(	of 10. Owners Form o Derivat Security Direct ( or Indir	ship of Indirect Beneficia ive Ownershi (Instr. 4)	

Other

### **Signatures**

TAYLOR KEITH D

301 VELOCITY WAY FOSTER CITY, CA 94404

Reporting Owner Name /

Address

Darrin B. Short, Attorney-in-Fact	12/12/2007
**Signature of Reporting Person	Date

Relationships

Chief Financial Officer

Officer

10%

Owner

Director

## **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) Option vests in 48 equal monthly installments from January 1, 2004.
- (2) Shares sold pursuant to a 10b5-1 Trading Plan.

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.