

OMB APPROVAL	
OMB Number:	3235-0287
Estimated average burden hours per response:	0.5

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).

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. Name and Address of Reporting Person* <u>Baack Sara</u> (Last) (First) (Middle) C/O EQUINIX, INC ONE LAGOON DRIVE (Street) REDWOOD CA 94065 CITY (State) (Zip) (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>EQUINIX INC [EQIX]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner <input checked="" type="checkbox"/> Officer (give title below) Other (specify below) Chief Product Officer
	3. Date of Earliest Transaction (Month/Day/Year) 02/18/2021	
4. If Amendment, Date of Original Filed (Month/Day/Year)		

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

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			
Common Stock	02/19/2021		M		1,402	A	\$0	14,056	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	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 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)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	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
Restricted Stock Units	\$0	02/18/2021		A		2,531		(1)	(2)	Common Stock	2,531	\$0	2,531	D	
Restricted Stock Unit	\$0	02/19/2021		A		2,803		(3)	(2)	Common Stock	2,803	\$0	2,803	D	
Restricted Stock Unit	\$0	02/19/2021		M			1,402	(3)	(2)	Common Stock	1,402	\$0	1,401	D	

Explanation of Responses:

- Vesting is dependent upon continuous active service as an employee, consultant or director of the Company or a subsidiary of the Company (Service) throughout the vesting period. The Restricted Stock Units shall vest as follows: 33.33% of the RSUs vested on January 15, 2022 and an additional 33.33% of the RSUs will each vest on January 15, 2023 and January 15, 2024.
- Restricted stock unit award expires upon reporting person's termination of service.
- On February 26, 2020, the reporting person was granted performance restricted stock units, the vesting of which was subject to both continued service and the attainment of certain AFFO, Revenue and EBITDA targets for 2020. The Compensation Committee certified the degree to which the targets were achieved, therefore 50% of the award vested on February 19, 2021, 25% will vest on February 15, 2022 and the remaining 25% will vest on February 15, 2023, subject solely to continued service.

/s/ Samantha Lagocki, POA 02/22/2021

** Signature of Reporting Person 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.