

EQUINIX INC
Form 4
July 06, 2005

FORM 4

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

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,
Section 17(a) of the Public Utility Holding Company Act of 1935 or Section
30(h) of the Investment Company Act of 1940

OMB APPROVAL

OMB
Number: 3235-0287
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2005
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(Print or Type Responses)

1. Name and Address of Reporting Person *
FERRIS PETER

(Last) (First) (Middle)

301 VELOCITY WAY

(Street)

FOSTER CITY, CA 94404

(City) (State) (Zip)

2. Issuer Name **and** Ticker or Trading
Symbol
EQUINIX INC [EQIX]

3. Date of Earliest Transaction
(Month/Day/Year)
07/01/2005

4. If Amendment, Date Original
Filed(Month/Day/Year)

5. Relationship of Reporting Person(s) to
Issuer

(Check all applicable)

____ Director ____ 10% Owner
__X__ Officer (give title below) ____ Other (specify below)

VP - Worldwide Sales

6. Individual or Joint/Group Filing(Check
Applicable Line)
__X__ Form filed by One Reporting Person
____ Form filed by More than One Reporting
Person

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 Indirect Beneficial Ownership (Instr. 4)
Common Stock	07/01/2005		M	3,625	A \$ 0	19,642	D
Common Stock	07/05/2005		S	1,658 (1)	D \$ 42.5798 (2)	17,984	D

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

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information contained in this form are not
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(9-02)

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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 Underlying Securities (Instr. 3 and 4)
				Code	V (A) (D)	Date Exercisable Expiration Date	Title Amount or Number of Shares
Restricted Stock	\$ 0	07/01/2005		M	3,625	07/01/2005 02/08/2015	Common Stock 3,625

Reporting Owners

Reporting Owner Name / Address	Relationships
	Director 10% Owner Officer Other
FERRIS PETER 301 VELOCITY WAY FOSTER CITY, CA 94404	VP - Worldwide Sales

Signatures

Melanie Mock, Attorney-in-Fact for Peter Ferris
 Date: 07/06/2005

__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.

Block sales; 38 shs @42.14, 29 shs @42.15, 29 shs @42.16, 29 sh @42.17, 29 shs @42.20, 29 shs @42.27, 29shs @42.28, 125 shs @42.30, 77 shs @42.31, 38 shs @42.35, 58 shs @42.37, 19 shs @ 42.39, 38 shs @42.40, 19 shs @ 42.41, 19 shs @42.43, 10 shs @ 42.44, 38 shs @42.45, 29 shs @42.50, 48 shs @42.51, 48 shs @42.54, 29 shs @42.57, 38 shs @42.58, 10 shs @42.61, 77 shs @42.62, 38 shs @42.64, 10 shs @42.65, 19 shs @42.66, 58 shs @42.67, 48 shs @42.68, 10 shs @ 42.69, 10 shs @42.70, 10 shs @42.71, 86 shs @42.72, 10 shs @42.74, 19 shs @42.75, 10 shs @42.77, 19 shs@42.80, 10 shs @42.81, 19 shs @42.86, 76 shs @42.87, 19 shs @42.88, 29 shs @42.91, 48 shs @42.95, 29 shs @42.96, 10 shs @42.97, 10 shs @42.98, 58 shs @42.99, 19 shs @43.04, 10 shs @43.05, 10 shs @ 43.08, 19 shs @43.09, 10 shs @43.12, 10 shs @43.27

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.