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EQUINIX I Form 4	NC											
August 09, 2										OMB AP	PROVAL	
FORM	UNITED	STATES				AND EX 1, D.C. 2			OMMISSION	OMB Number:	3235-0287	
Check the check			0						Expires:	January 31,		
subject t Section Form 4	to SIAIE N 16.	STATEMENT OF CHANGES IN BENEFICIAL OWNE SECURITIES							ERSHIP OF	Estimated ar burden hour response	ours per	
Form 5 obligatio may cor <i>See</i> Inst 1(b).	ons Section 17((a) of the l	Public U	Jtility I	Hol	lding Co	mpai	•	Act of 1934, 1935 or Section)			
(Print or Type	Responses)											
1. Name and Address of Reporting Person <u>*</u> Schwartz Eric									5. Relationship of Reporting Person(s) to Issuer			
(Last)	(Last) (First) (Middle) 3. Date o				of Earliest Transaction				(Check all applicable) <u></u>			
ONE LAGOON DRIVE			(Month/Day/Year) 08/08/2016									
				f Amendment, Date Original ed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting			
REDWOO	D CITY, CA 940	65							Person	ne than one Rep	Jorting	
(City)	(State)	(Zip)	Tat	ole I - N	on-]	Derivativ	e Secu	ırities Acqu	ired, Disposed of,	or Beneficiall	y Owned	
1.Title of Security (Instr. 3)		tion Date 2A. Deemed ay/Year) Execution Date, if any (Month/Day/Year)			(A) or				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	08/08/2016			Code S <u>(1)</u>	V	Amount 2,261	(D) D	Price \$ 362.2339 (2)		D		
Common Stock	08/08/2016			S <u>(1)</u>		1,151	D	(2) \$ 363.162 (3)	1 3,582	D		
Common Stock	08/08/2016			S <u>(1)</u>		246	D	\$ 364.0169 (4)	9 3,336	D		

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

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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)	4. Transactic Code (Instr. 8)	of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,		ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
			Code V	4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address			Relationships				
	Director	10% Owner	Officer	Other			
Schwartz Eric ONE LAGOON DRIVE REDWOOD CITY, CA 94065			President, Equinix Europe				
Signatures							

Samantha 08/09/2016 Lagocki, POA

**Signature of Reporting Person

Explanation of Responses:

* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).

Date

- ** 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 were sold pursuant to a 10b5-1 Trading Plan

The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$361.61 to \$362.50, inclusive. The reporting person undertakes to provide to Equinix, Inc, any security holder of Equinix Inc, or the staff

- (2) of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in footnotes 3 and 4 to this Form 4.
- (3) The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$362.71 to \$363.62 inclusive.
- (4) The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$363.78 to \$364.46 inclusive.

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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.