EQUINIX INC Form 4 October 08, 2015

FORM 4

OMB APPROVAL

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

OMB Number: 3235-0287

Check this box if no longer subject to Section 16.

Expires: January 31, 2005

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Estimated average burden hours per response... 0.5

Form 4 or Form 5 obligations may continue. See Instruction

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

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person <u>LYONS IRVING F III</u>

2. Issuer Name **and** Ticker or Trading

5. Relationship of Reporting Person(s) to Issuer

Symbol

EQUINIX INC [EQIX]

(Check all applicable)

(Last)

Security

(Instr. 3)

(First) (Middle)

3. Date of Earliest Transaction

X_ Director _____ 10% Owner ____ Officer (give title _____ Other (specify

ONE LAGOON DRIVE (Month/Day/Year)
10/06/2015

6. Individual or Joint/Group Filing(Check

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

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

below)

REDWOOD CITY, CA 94065

(City) (State) (Zip)

1.Title of 2. Transaction Date 2A. Deemed

(Street)

2. Transaction Date 2A. Deemed 3. 4. Securities (Month/Day/Year) Execution Date, if TransactionAcquired (A) or any Code Disposed of (D)

(Instr. 8)

5. Amount of Securities Form: Direct Indirect
Beneficially (D) or Indirect Beneficial
Owned (I) Ownership
Following (Instr. 4) (Instr. 4)

(A) Reported Transaction(s) or (Instr. 3 and 4)

Code V Amount (D) Price

(Instr. 3, 4 and 5)

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

(Month/Day/Year)

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 control number.

SEC 1474

(9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number	6. Date Exercisable and	7. Title and Amount of	8. Pri
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onof	Expiration Date	Underlying Securities	Deriv
Security	or Exercise		any	Code	Derivative	(Month/Day/Year)	(Instr. 3 and 4)	Secur
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Securities			(Instr

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	Derivative Security				Acqui (A) or Dispo of (D) (Instr. and 5)	sed 3, 4,					
			Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
tock Options	\$ 81.23	10/06/2015	A <u>(1)</u>		274 (1)		(2)	02/15/2017	Common Stock	274 (1)	\$
tock Options	\$ 81.23	10/06/2015	A <u>(1)</u>		313 (1)		(2)	02/15/2017	Common Stock	313 (1)	\$
tock Options	\$ 88.56	10/06/2015	A <u>(1)</u>		98 (1)		(2)	06/12/2018	Common Stock	98 (1)	\$
tock Options	\$ 88.56	10/06/2015	A(1)		98 (1)		(2)	06/12/2018	Common Stock	98 (1)	\$

Reporting Owners

Reporting Owner Name / Address	Relationships						
• 0	Director	10% Owner	Officer	Other			
LYONS IRVING F III ONE LAGOON DRIVE REDWOOD CITY, CA 94065	X						

Signatures

Billie Olson, Attorney-in-Fact 10/08/2015

**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).
- This report reflects adjustments effective on October 6, 2015 approved by the Board of Directors of the issuer (the "Board") made in connection with a special distribution declared by the Board on September 28, 2015.
- (2) This stock option is fully vested.

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.

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