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Form 4										
June 11, 2018 FORM 4									PPROVAL	
Washington, D.C. 20549								N OMB Number:	3235-0287	
Check this box if no longer subject to Section 16. Form 4 or	STATEN	IENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES							January 31, 2005 average urs per . 0.5	
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, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940 30(h) of the Investment Company Act of 1940										
(Print or Type Respons	es)									
1. Name and Address KRIENS SCOTT	2. Issuer Name and Ticker or Trading Symbol EQUINIX INC [EQIX]				5. Relationship of Reporting Person(s) to Issuer					
(Last) (Fi						(Check all applicable)				
ONE LAGOON DRIVE, 4TH FLOOR			(Month/Day/Year) 06/07/2018				X_ Director 10% Owner Officer (give title Other (specify below) below)			
(Street)			4. If Amendment, Date Original Filed(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 				
REDWOOD CITY	7, CA 9406	55					Person	More than One K	eporting	
(City) (St	ate)	(Zip)	Tab	le I - Non-l	Derivative	Securities A	cquired, Disposed	of, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed Execution D any (Month/Day)		Date, if TransactionAcquired (A) or Code Disposed of (D)		(A) or of (D) 4 and 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
				Code V	Amount	or (D) Price	(Instr. 3 and 4)			
Reminder: Report on a	separate line	for each cla	ass of sec	urities bene	ficially own	ned directly	or indirectly.			
					inforn requir	nation cont ed to resp ys a curre	spond to the colle tained in this form ond unless the fo ntly valid OMB co	n are not rm	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. Price
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactionof		Expiration Date	Underlying Securities	Derivat
Security	or Exercise		any	Code	Derivative	(Month/Day/Year)	(Instr. 3 and 4)	Securit

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8)	Securit Acquir (A) or Dispos of (D) (Instr. and 5)	red sed 3, 4,					(Instr. :
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Restricted Stock Units	\$ 0	06/07/2018		А	629		(1)	(2)	Common Stock	629	\$ C

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
KRIENS SCOTT ONE LAGOON DRIVE 4TH FLOOR REDWOOD CITY, CA 94065	Х						
Signatures							
Samantha 06/ Lagocki	11/2018						

**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).

The Restricted Stock Units shall vest on the earlier of (i) the one-year anniversary of the grant date or (ii) if the reporting person does not stand for re-election as a director of the Company, the date of the regular meeting of the Company's stockholders held in the calendar year

- (1) subsequent to the grant date; provided that, in either case, the reporting person remains in continuous Service through such vesting date. Pursuant to a Deferral Election, vested shares will be delivered to the reporting person thirty days after the reporting person's separation from Service or earlier in the event the Company is subject to a change in control event or in the event of the reporting person's death.
- (2) Restricted stock unit award expires upon reporting person's termination of services

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.