Edgar Filing: Schwartz Eric - Form 4

Schwartz Eri	ic										
Form 4											
January 06, 2	2009										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									OMB APPROVAL		
Washington, D.C. 20549						OMMISSION	Number:	3235-0287			
Check th if no long subject to Section 1 Form 4 o Form 5 obligatio may cont See Instri	F CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Section 16(a) of the Securities Exchange Act of 1934, Public Utility Holding Company Act of 1935 or Sectior of the Investment Company Act of 1940						Expires: January 31, 2005 Estimated average burden hours per response 0.5				
1(b).											
(Print or Type I	Responses)										
Calana at Enda			2. Issuer Symbol	uer Name and Ticker or Trading ol				5. Relationship of Reporting Person(s) to Issuer			
			EQUIN	INIX INC [EQIX]				(Check all applicable)			
(Last)	(First) (Middle)	3. Date of	f Earliest Tr	ansaction					, 	
				1/02/2009				Director 10% Owner X_ Officer (give title Other (specify below) President, Equinix Europe			
			4. If Ame	endment, Date Original				6. Individual or Joint/Group Filing(Check			
			fonth/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting				
FOSTER C	ITY, CA 94404							Form filed by M Person	ore than One Rej	porting	
(City)	(State)	(Zip)	Tabl	le I - Non-D) erivative	Secui	rities Acqu	iired, Disposed of	, or Beneficiall	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Date, if	3. Transactio Code (Instr. 8) Code V	(Instr. 3,	spose	d of (D) 5) Price	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	01/05/2009			S <u>(1)</u>	3,625	D	\$ 59.039	30,706 <u>(3)</u>	D		

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

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.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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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)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Under Secur	le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
			Code V	(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 301 VELOCITY WAY FOSTER CITY, CA 94404			President, Equinix Europe				
Signatures							
Darrin B. Short, Attorney-in-Fact	0	1/06/2009					

**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.

The average price of \$59.039 consists of the following blocks of shares: 100 shares sold at \$57.58, 100 at \$57.59, 100 at \$57.60, 200 at \$57.74, 100 at \$58.06, 100 at \$58.18, 100 at \$58.21, 100 at \$58.27, 100 at \$58.36, 200 at \$58.48, 100 at \$58.49, 100 at \$58.70, 100 at

- (2) \$58.71, 100 at \$58.99, 100 at \$59.16, 100 at \$59.19, 100 at \$59.36, 100 at \$59.39, 200 at \$59.52, 100 at \$59.56, 100 at \$59.59, 100 at \$59.76, 100 at \$59.79, 285 at \$59.82, 100 at \$59.83, 115 at \$59.84, 125 at \$59.85, 100 at \$59.97, 100 at \$60.05, 100 at \$60.07 and 100 at \$60.11.
- (3) Includes 359 shares acquired under the Equinix, Inc. Employee Stock Purchase Plan on August 14, 2008.

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.