

EQUINIX INC  
Form 4  
December 03, 2009

**FORM 4**

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

OMB APPROVAL

OMB Number: 3235-0287  
Expires: January 31, 2005  
Estimated average burden hours per response... 0.5

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

(Print or Type Responses)

1. Name and Address of Reporting Person \*  
CROSSLINK CAPITAL INC

(Last) (First) (Middle)  
TWO EMBARCADERO  
CENTER, SUITE 2200  
  
(Street)

SAN FRANCISCO, CA 94111

(City) (State) (Zip)

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

3. Date of Earliest Transaction  
(Month/Day/Year)  
12/01/2009

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

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

Director  10% Owner  
 Officer (give title below)  Other (specify below)  
Affiliate of Director

6. Individual or Joint/Group Filing(Check Applicable Line)  
 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	12/01/2009		S	80,727 D	\$ 99.0075 599,138	I	See Notes <u>(1)</u> <u>(2)</u>
Common Stock	12/03/2009		S	29,963 D	\$ 101.8926 569,175	I	See Notes <u>(1)</u> <u>(2)</u>

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.**

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 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)	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Owned Following Reporting Transaction (Instr. 6)
				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
CROSSLINK CAPITAL INC TWO EMBARCADERO CENTER SUITE 2200 SAN FRANCISCO, CA 94111	X			Affiliate of Director
TEN MILE MANAGEMENT, LLC TWO EMBARCADERO CENTER SUITE 2200 SAN FRANCISCO, CA 94111	X			Affiliate of Director
Crossover Fund IV Management, L.L.C. TWO EMBARCADERO CENTER SUITE 2200 SAN FRANCISCO, CA 94111	X			Affiliate of Director
Crossover Fund V Management, L.L.C. TWO EMBARCADERO CENTER SUITE 2200 SAN FRANCISCO, CA 94111	X			Affiliate of Director
Delta Growth Management, LLC TWO EMBARCADERO CENTER SUITE 2200 SAN FRANCISCO, CA 94111	X			Affiliate of Director

## Signatures

Crosslink Capital, Inc. by Michael J. Stark, President	12/03/2009
**Signature of Reporting Person	Date
Ten Mile Management, LLC, by Michael J. Stark, Manager	12/03/2009

Edgar Filing: EQUINIX INC - Form 4

<u>Signature of Reporting Person</u>	Date
Crossover Fund IV Management, LLC, by Michael J. Stark, Senior Fund Manager	12/03/2009
<u>Signature of Reporting Person</u>	Date
Crossover Fund V Management, L.L.C., by Michael J. Stark, Senior Fund Manager	12/03/2009
<u>Signature of Reporting Person</u>	Date
Delta Growth Management, LLC, by Michael J. Stark, Manager	12/03/2009
<u>Signature of Reporting Person</u>	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) The reporting persons (the "Reporting Persons") are Crosslink Capital, Inc. ("Crosslink"), Crossover Fund IV Management, LLC ("Fund IV Management"), Crossover Fund V Management, L.L.C ("Fund V Management"), Ten Mile Management, LLC ("Ten Mile"), Delta Growth Management, LLC ("Delta Growth") and Michael J. Stark. Crosslink is an investment adviser to investment funds of which Fund IV Management, Fund V Management, Ten Mile or Delta Growth is the general partner or manager (the "Funds"). Mr. Stark is the control person of the other Reporting Persons. Gary Hromadko, an affiliate of certain Reporting Persons, is a member of the Issuer's board of directors and serves as the representative of the Reporting Persons.

(2) The Reporting Persons are filing this Form 4 jointly, but not as a group, and each of them expressly disclaims membership in a group, within the meaning of Rule 13d-5(b) under the Securities Exchange Act of 1934, as amended. These securities are held directly by the Funds for the benefit of their investors. These securities are indirectly beneficially owned by Crosslink as the investment adviser to the Funds, and by Fund IV Management, Fund V Management, Ten Mile or Delta Growth as the general partner or manager of the Funds. The Reporting Persons disclaim beneficial ownership of such securities except to the extent of their pecuniary interest therein.

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.