FORM 4

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

OMB APPR	OVAL
OMB Number:	3235-0287
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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 or Section 30(h) of the Investment Company Act of 1940

	pe Response	3)												
Name and Address of Reporting Person * Barros Paulino R			2. Issuer Name and Ticker or Trading Symbol EQUIFAX INC [EFX]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X_Officer (give title below) Other (specify below) Pres-USIS					
(Last) (First) (Middle) 1550 PEACHTREE STREET, N.W.			3. Date of Earliest Transaction (Month/Day/Year) 08/31/2016											
(Street) ATLANTA, GA 30309			4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person						
												(City	')	(State)
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)		Code (Instr. 8)	4. Securities Acqu (A) or Disposed o (Instr. 3, 4 and 5)		of (D) Benefici Reported		unt of Securities cially Owned Following d Transaction(s)		Ownership Form:	Beneficial	
				(Month/Day/Year)	Code	V	Amount	(A) or (D)					Ownership (Instr. 4)	
Commor	n Stock		08/31/2016		S	:	5,205		\$ 132	10.786			D	
	report on a s	separate line for	each class of secur	ities beneficially ov	wned direc	Perso conta	ons wh	o respor	m are	not requ		pond unle	ss	1474 (9-02)
	Report on a s	separate line for	Table II - 1	Derivative Securities, puts, calls, wa	ies Acquir	Perso conta the fo	ons whained in orm dis	o respon this for plays a	m are curre eficial	not requesting ntly valid	uired to res		ss	1474 (9-02)

Reporting Owners

		Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Barros Paulino R 1550 PEACHTREE STREET, N ATLANTA, GA 30309	ī.W.		Pres-USIS			

Signatures

/s/Lisa Stockard as Attorney-in-Fa	act	09/01/2016
**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).

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.