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

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response...

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

(Print or Ty	pe Response	s)																	
1. Name and Address of Reporting Person* Webb David						2. Issuer Name and Ticker or Trading Symbol EQUIFAX INC [EFX]						5	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner						
(Last) (First) (Middle) 1550 PEACHTREE STREET, N.W.					3. Date of Earliest Transaction (Month/Day/Year) 02/28/2017						X Officer (give title below) Other (specify below) CIO								
(Street) ATLANTA, GA 30309				4. If	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 Person							
(City) (State) (Zip)					Table I - Non-Derivative Securities Acqui						cquir	ired, Disposed of, or Beneficially Owned							
1.Title of Security (Instr. 3)		Date (Month/Day/Year) a		Execut any	2A. Deemed Execution Date, if any Month/Day/Year		Code		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)		l Following	` /	rship of B	Beneficial Ownership			
								Code	V	Amount	(A) or (D)	Pr	ice				or Indirect (I) (Instr. 4)		nstr. 4)
Common Stock 02		02/28/	/2017				S		7,148	D	\$ 131.	.0551 18,19				D			
				Table II					ired	, Disposed	of, or	r Benef	ficially			trol numbe	er.		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transact Date (Month/Da		3A. Deemed Execution Da	d Date, if	4.		5.		ions, convertible secur 6. Date Exercisable and Expiration Date (Month/Day/Year)		ele ate r)	7. Title and Amount of Underlying Securities (Instr. 3 and 4)		Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	y De Se Di or n(s) (I)	wnership orm of erivative curity: rect (D) Indirect	Beneficia Ownershi (Instr. 4)
						Code	V	(A) (I	E	Oate Exercisable		ration	Title	Amount or Number of Shares					
Repor	ting O	wners																	

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Webb David 1550 PEACHTREE STREET, N.W. ATLANTA, GA 30309			CIO				

# **Signatures**

/s/Lisa Stockard as Attorney-in-Fact	03/02/2017
**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.