FORM 4

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

OMB APPRO	VAL
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

(Print or Ty	pe Responses	"												
1. Name and Address of Reporting Person* HUMANN L PHILLIP			2. Issuer Name and Ticker or Trading Symbol EQUIFAX INC [EFX]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last) (First) (Middle) 1550 PEACHTREE STREET, N.W.				3. Date of Earliest Transaction (Month/Day/Year) 09/30/2005					-	Officer (g	give title below)	Oth	er (specify belov	v)
(Street) ATLANTA, GA 30309			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 Acqu					ties Acquir	uired, Disposed of, or Beneficially Owned				
1.Title of S (Instr. 3)	ecurity		Date (Month/Day/Year)	2A. Deeme Execution I any (Month/Day	Date, if	3. Tran Code (Instr.	8) (A (In	Securities A) or Dispose str. 3, 4 and (A) a mount (D)	d of (D) B 5) R (I	Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		F C O	Ownership o orm: Birect (D) Cr Indirect (I	Beneficial Ownership
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1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Yea	3A. Deemed Execution Date, i	4. Transact	5. Num of Der Sec Acc (A) Dis of (Ins	mber ivative urities urited or posed	containe form dis	sed in this f splays a cu sed of, or Bouvertible sec recisable ion Date	orm are no corm are no corm are no cornected with the cornected are corn	oot require alid OMB o Owned and Amount ying	d to respo control nur 8. Price of	nd unless th	10. Ownership Form of Derivative Security: Direct (D) or Indirect	11. Natur of Indirec Beneficia Ownershi (Instr. 4)
1. Title of Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, i	4. Transact	5. Num of Der Sec Acc (A) Dis of (Ins	mber ivative urities quired or posed D) tr. 3, nd 5)	contained form dissuired, Dispooptions, con 6. Date Exe and Expirat	ed in this figures a curse of the second of	eneficially curities) 7. Title an of Underly Securities	oot require alid OMB o Owned and Amount ying	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s	10. Ownership Form of Derivative Security: Direct (D) or Indirect	11. Natur of Indirec Beneficia Ownersh (Instr. 4)

Reporting Owners

	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
HUMANN L PHILLIP 1550 PEACHTREE STREET, N.W. ATLANTA, GA 30309	X				

Signatures

By: Kathryn J. Harris as Attorney-in-Fact for	10/03/2005
**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) The phantom stock converts into common stock on a one-for-one basis.
- (2) The units are to be settled 100% in cash beginning on a date elected by the participant that is at least one year after the end of the Plan Year for which the initial deferral is made, or upon the reporting person's ceasing to serve as a director.
- (3) The Fair Market Value of each share of common stock at the time of grant is \$34.94.

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.