## FORM 4

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

OMB APPROVAL
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

		s)													
1. Name and Address of Reporting Person * SPRINGMAN PAUL J			2. Issuer Name and Ticker or Trading Symbol EQUIFAX INC [EFX]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director10% Owner						
(Last) (First) (Middle) 1550 PEACHTREE STREET, N.W.			3. Date of Earliest Transaction (Month/Day/Year) 04/29/2014					X Officer (give title below) Other (specify below)  Chief Mktg Officer							
(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 PersonForm filed by More than One Reporting Person						
(City	· ·	(State)	(Zip)		Ta	ble I - No	n-Der	ivative S	ecuritie	es Acqu	ired, Dispo	osed of, or I	Beneficially (	Owned	
(Instr. 3)		2. Transaction Date (Month/Day/Year)	any	Execution Date, if		ction	4. Securities Acquire (A) or Disposed of (I (Instr. 3, 4 and 5)		of (D)	(D) Beneficially Owned Follo Reported Transaction(s)		following (s)	Form:	7. Nature of Indirect Beneficial	
				(Month/Day/Year)		Code	V	Amount	(A) or (D)	Price	(Instr. 3 a	nd 4)		\ /	
Commor	Stock		04/29/2014			F		4,389 (1)	D	\$ 69.93	78,310			D	
Common Stock										3,492		I	I	By	
		separate line fo	or each class of secu	rities beneficial	llv ow	ned direc	tly or i	indirectly			5,2				401(k)
		separate line fo		Derivative Sec	curiti	es Acqui	Pers cont the f	ons who	o respo this fo plays a	orm are a curre eneficial	the collect not requ		ormation spond unle trol numbe	ss	1474 (9-02)
Reminder:	Report on a s	3. Transactio	Table II -  n 3A. Deemed Execution Da	Derivative Sec (e.g., puts, calls 4. te, if Transact Code	curities, wa	es Acquirrants, o	Perscont the f	ons who	f, or Beible sec	eneficial eurities) 7. T Ame	the collect not requ	OMB cont	spond unle	of 10. Ownersi Form of Derivati Security Direct (i	11. Natur of Indired Beneficia ove (Instr. 4)

#### **Reporting Owners**

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
SPRINGMAN PAUL J 1550 PEACHTREE STREET, N.W. ATLANTA, GA 30309			Chief Mktg Officer			

## **Signatures**

Kathryn J. Harris as Attorney-in-Fact	04/30/2014
**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 withheld to satisfy tax withholding obligations upon 100% vesting of restricted stock units granted 4/29/2011.

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.