## FORM 4

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

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

1 Nama ar										1					
1. Name and Address of Reporting Person* Adams J Dann			_	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) 05/04/2015						X Officer (give title below) Other (specify below) Pres-Wkfrc Sol				
(Street) ATLANTA, GA 30309				4. If Aı	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						rired, Disposed of, or Beneficially Owned				
1.Title of S (Instr. 3)	(Instr. 3) Date		2. Transaction Date (Month/Day/Year)	Execution any			saction	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			Reported Transaction(s)			Ownership Form:	Beneficial
				(Month/	Day/Year	Code	V	(A) (Instr. 3 and 4 or Amount (D) Price		ina 4)		Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)		
Common	Stock		05/04/2015			S		500	D	\$ 100.05	62,128			D	
Common Stock										382			I	By 401(k)	
Reminder:	Report on a s	separate line	for each class of secu	rities ben	neficially o	wned di									
Reminder:	Report on a s	separate line	Table II -	Derivati	ive Securi	ties Acq	Per cor the	rsons what ntained in form dis	no resp n this f splays	orm are a curre eneficial	not requ	ction of inf lired to res OMB cont	pond unle	ss	1474 (9-02)
1. Title of	•	3. Transaction	Table II - on 3A. Deemed Execution D	Derivati (e.g., put 4. ate, if Tr	ive Securi ts, calls, w	ties Acq arrants,	Per corthe dired, I and (M	rsons what ntained in form dis	oresponthis find the splays of, or Butible second cisable on Date	eneficial curities) 7. To Amo	not requ	OMB cont 8. Price of	pond unle	of 10. Owners Form of Derivati Security Direct ( or Indire	11. Natur of Indire Benefici Ownersh (Instr. 4)

#### **Reporting Owners**

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Adams J Dann 1550 PEACHTREE STREET, N.W. ATLANTA, GA 30309			Pres-Wkfrc Sol			

### **Signatures**

Kathryn J. Harris as Attorney-in-Fact	05/05/2015
**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.