FORM 4

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

OMB APPROVAL
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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 Type Responses) 1. Name and Address of Reporting Person * HOUGH G. THOMAS			2. Issuer Name and Ticker or Trading Symbol EQUIFAX INC [EFX]					5	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director10% Owner					
(Last) (First) (Middle) 1550 PEACHTREE STREET, N.W.			3. Date of Earliest Transaction (Month/Day/Year) 05/06/2021					-	Office	r (give title belo	ow)(Other (specify be	elow)	
(Street) ATLANTA, GA 30309			4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group FilingCheck Applicable Line) _X_Form filed by One Reporting PersonForm filed by More than One Reporting Person					
(City))	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Own					Owned					
(Instr. 3) Da		Date (Month/Day/Year)		Code (Instr. 8	\ / I		Beneficia Reported		ally Owned Following Transaction(s)		6. Ownership Form:	Beneficial		
				(Month/Day/Year)	Code	V	Amount	(A) or (D)	Price	(mstr. 3 a	or Ind (I)		or Indirect	Ownership (Instr. 4)
Common	Stock (1)		05/06/2021		A		759	A S	0	11,408	<u>(2)</u>		D	
	Report on a s	separate line for	each class of secur	ities beneficially ov	vned direc	Perso	ons who ained in	respone	n are	not requ		spond unle	ss	474 (9-02)
	Report on a s	separate line for	Table II - I	overivative Securities, g., puts, calls, wa	ies Acqui	Perso conta the fo	ons who ained in orm disp	respond this form plays a c	n are urren ficially	not requ tly valid	ired to res		ss	474 (9-02)
Reminder: 1	2.	3. Transaction Date (Month/Day/Y	Table II - I (3A. Deemed Execution Day any	Derivative Securities, puts, calls, was te, if Transaction Code (Instr. 8)	ies Acqui arrants, o	Persoconta the formation of the following the formation of the following	ons who ained in orm disp	o respond this form plays a c f, or Bene ble securi isable in Date	ficially ties) 7. Tit Amou Unde Secur	not required the valid of the and the control of the value of the valu	OMB conf	spond unle	f 10. Ownersh Form of Derivatin Security Direct (I or Indire	11. Nature of Indire Benefic: (Instr. 4

	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
HOUGH G. THOMAS					
1550 PEACHTREE STREET, N.W.	X				
ATLANTA, GA 30309					

Signatures

/s/Lisa Stockard as Attorney-in-Fact	05/10/2021
**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) Annual director equity grant pursuant to the Company's long-term incentive plan. The award of restricted stock units vests 100% on 5/6/2022.
- (2) Includes accrued dividend equivalent units for dividends reinvested in corresponding restricted stock units through the Company's last dividend payment date.

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.