Edgar Filing: EQUIFAX INC - Form 4

| EQUIFAX INC Form 4 | | | | | | | | | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|--------------------|----------------------------------------------------------------------------|----------------------------------------|---------------------------------|------------------------------|---------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|-----------|--|
| May 17, 2006 | | | | | | | | | | | |
| FORM 4 | 1 | | | | | | | | | PPROVAL | |
| | UNITED |) STATES | | ITIES Al hington, | | | NGE (| COMMISSION | OMB Number: | 3235-0287 | |
| Check this bo if no longer subject to Section 16. Form 4 or Form 5 | F CHANGES IN BENEFICIAL OWNERSHIP C SECURITIES | | | | | | Expires: Estimated a burden hou response | rs per | | | |
| Form 5 obligations may continue. See Instruction 1(b). Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940 | | | | | | | | | | | |
| (Print or Type Resp | onses) | | | | | | | | | | |
| 1. Name and Address of Reporting Person <u>*</u> MAST KENT E | | | 2. Issuer Name and Ticker or Trading Symbol EQUIFAX INC [EFX] | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
| (Last) | (First) | (Middle) | 3. Date of Earliest Transaction (Check | | | | k all applicable) | | | | |
| (Mont | | | | onth/Day/Year) /16/2006 | | | | Director 10% Owner XOfficer (give title Other (specify below) below) below) CVP and General Counsel | | | |
| | | | | ndment, Date Original nth/Day/Year) | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | |
| ATLANTA, GA | A 30309 | | | | | | | Form filed by I Person | More than One Re | eporting | |
| (City) | (State) | (Zip) | Table | e I - Non-D | erivative | Securi | ities Acc | quired, Disposed o | f, or Beneficial | ly Owned | |
| | Transaction Da Ionth/Day/Year | r) Executio any | | | on(A) or D (D) (Instr. 3, | ispose 4 and (A) or | d of 5) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | |
| Common 05 Stock 05 | 5/16/2006 | | | Code V S | Amount 3,300 | (D) D | Price \$ 36.8 | 83,147 | D | | |
| Common Stock | | | | | | | | 1,097 | Ι | By 401(k) | |

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 4. Transactic Code (Instr. 8) | 5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | Secur | int of rlying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr |
|-----------------------------------------------------|-----------------------------------------------------------------------|-----------------------------------------|----------------------------------------|-------------------------------------------------------------------------------------------------------------------------|---------------------|--------------------|-------|----------------------------------------|-----------------------------------------------------|-----------------------------------------------------------------------------|
| | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | | |
|-----------------------------------------------------------------|---------------|-----------|-------------------------|-------|--|--|--|--|
| | Director | 10% Owner | Officer | Other | | | | |
| MAST KENT E 1550 PEACHTREE STREET, N.W. ATLANTA, GA 30309 | | | CVP and General Counsel | | | | | |
| Signatures | | | | | | | | |

| /s/ Mast, Kent E. | 05/17/2006 |
|--------------------------------------------|------------|
| <u>**</u> 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.