Instruction 1(b).

## FORM 5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Machinaton	$D \subset$	205/10
Washington,	D.C.	20549

## ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-0362							
Estimated average burden								
hours nor resnonse:	1.0							

Form 3	Holdings Repo	rted.												Liloui	o per i	сэропэс.	1.0	
_	Transactions F		File	ed pursuant to or Sectior														
Name and Address of Reporting Person*     Jewkes Roger S					2. Issuer Name and Ticker or Trading Symbol Fidelity National Financial, Inc. [FNF]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  V Officer (give title Other (specify								
(Last) 601 RIVE	(Last) (First) (Middle) 601 RIVERSIDE AVENUE					3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2016							X Officer (greeting Officer below)  Chief Operating Officer					
(Street)  JACKSONVILLE FL 32204					4. If Amendment, Date of Original Filed (Month/Day/Year) 02/14/2017							Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting						
(City)	(Sta	ate) (2	Zip)		Person													
		Tabl	e I - Non-Deriv	ative Sec	uriti	es Ac	quir	ed, Di	sposed	of, or	Benefi	ciall	ly Owne	ed				
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Dispose Of (D) (Instr. 3, 4 and 5)				Securities Beneficially		s ally	6. Ownership Form: Direct	ership   Ir : Direct   B	7. Nature of Indirect Beneficial		
							Amoun	t	(A) or (D)	Price		Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)		(D) or Indirect (I) (Instr. 4)		Ownership (Instr. 4)		
FNF Grou	NF Group Common Stock 12/23/2016				G		1,620(1)		D	\$0		384,127.025 <sup>(2)</sup>			I F	ewkes amily rust		
FNF Grou	FNF Group Common Stock													104,073.89(2)		D		
FNFV Gro	oup Commo	on Stock											0 <sup>(2)</sup> D		D			
FNFV Gro	oup Commo	on Stock										111,549.925(2)			I F	ewkes 'amily 'rust		
FNFV Gro	oup Commo	on Stock											135.31			1 1	NFV 01(k)	
FNF Grou	ıp Common	Stock										434.6		4.6		1 1	'NF 401(k) ccount	
		Та	ble II - Derivat (e.g., p	tive Secur uts, calls,									Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security  3. Transaction Date (Month/Day/Year)  3A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Code (Instr. 8) Sec Acc (A) Dis of (		ivative urities urities urities posed or posed D) tr. 3, 4		ate Exercisable and ration Date hth/Day/Year)		Amo Secu Und Deri Secu	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)			9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	e Ownersi s Form: ally Direct (Dor Indirect) g (I) (Instr.		11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					(4)	(D)	Date	cisable	Expiratio	n Title	Amour or Number of							

## Explanation of Responses:

- 1. Form amended to report gift.
- $2. \ Amounts \ adjusted \ to \ accurately \ reflect \ the \ allocation \ of \ reporting \ person's \ shares \ between \ direct \ and \ indirect \ ownership.$

/s/ Michael L. Gravelle, as attorney-in-fact 02/14/2017

\*\* Signature of Reporting Person Date

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

- \* 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.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.