FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

		•	

OMB APPRO	VAL
OMB Number:	3235-0287
Estimated average burde	en
hours per response:	0.5
	OMB Number: Estimated average burde

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

1. Name and Address of Reporting Person* Fidelity National Financial, Inc. (Last) (First) (Middle) 601 RIVERSIDE AVENUE					3. D 07/3	Issuer Name and Ticker or Trading Symbol NTN BUZZTIME INC [NTN] Date of Earliest Transaction (Month/Day/Year) 07/30/2009 4. If Amendment, Date of Original Filed (Month/Day/Year)								(C	S. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner Officer (give title Other (specify below) below) 6. Individual or Joint/Group Filing (Check Applicable)					
(Street) JACKSO (City)	NVILLE F		32204 Zip)										Lii	Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
		Tabl	e I - Nor	n-Deriv	ative	Sec	curitie	s Acc	uired,	Dis	posed o	f, or	Bene	ficia	ally C	Owne	ed			
Date				Day/Year) Ex		Executio f any	A. Deemed xecution Date, any Month/Day/Year)				ities Acquired (A) d Of (D) (Instr. 3, 4			and Securi Benefi		rities F ficially (ed Following (wnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	v	Amount	(A) or D)	Price	Tran		nsaction(s) str. 3 and 4)			(
Common Stock 07/3				07/30	/30/2009				S		4,400)	D	\$0.3	35	6,330,211			I (1)	Please see footnote 1.
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)	ate Ionth/Day/Year) Execution Date, if any (Month/Day/Year) (Month/Day/Year)		Transaction Code (Instr.		of Deriv Secu Acqu (A) o Dispo of (D (Insti	of E		. Date Exercisable and xpiration Date Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)			8. Prio Deriva Secur (Instr.	ative rity	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Ownership Form: Direct (D) or Indirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	or Num of Sha	ber	er					

Explanation of Responses:

1. 613,400 shares owned by Fidelity National Financial, Inc.; 1,222,030 shares owned by Security Union Title Insurance Company; 1,222,702 shares owned by Chicago Title Insurance Company; 1,170,679 shares owned by Alamo Title Insurance Company; 1,237,000 shares owned by Ticor Title Insurance Company; 864,400 shares owned by Fidelity National Title Insurance Company. Security Union Title Insurance Company, Chicago Title Insurance Company, Alamo Title Insurance Company, Ticor Title Insurance Company, and Fidelity National Title Insurance Company are direct or indirect wholly-owned subsidiaries of Fidelity National Financial, Inc.

Remarks:

<u>Fidelity National Financial,</u> <u>Inc. by Goodloe Partee, Senior</u> <u>07/31/2009</u> <u>Vice President - Legal.</u>

** 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.