FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

1	OIVID APPROVAL										
	OMB Number:	3235-0287									
	Estimated average burd	en									

0.5

hours per response:

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

1. Name and Address of Reporting Person*  QUIRK RAYMOND R				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  Officer (give title Other (specify								
(Last) 601 RIV	(F ERSIDE AV	irst) /ENUE	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 10/29/2015								X	X Office (give title Officer Specify below)  Chief Executive Officer					
(Street) JACKSONVILLE FL 32204					4.	4. If Amendment, Date of 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										ı				
(City)	(S	tate)	(Zip)												Person	,			9	
		Та	ble I - No	n-Dei	rivativ	ve Se	ecuritie	s Ac	quired,	Dis	posed c	of, or B	enefici	ially	Owned					
Date			Date	2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 a			and 5) Securities Beneficial Following		y Owned Reported	6. Ownership Form: Direct (D) or Indirec (I) (Instr. 4)	Direct Indirect Itr. 4)	7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount	(A) (D)	or Pric	Transaction(s) (Instr. 3 and 4)		(Instr. 4)	Instr. 4)				
FNF Group Common Stock				10/2	29/201	.5			A		75,000	00 <sup>(1)</sup> A		6 <mark>0</mark>	388,310.4008(2)			D		
FNF Group Common Stock														1,035,630			I :	Quirk 2002 Trust		
FNF Group Common Stock														47,1	.93		I	Raymond Quirk 2004 Frust		
FNF Group 401(k)														481.21		D				
			Table II -								osed of				wned				*	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution I if any (Month/Day	Date, Transa Code			Derivative		6. Date Exercis Expiration Dat (Month/Day/Ye		е	of Secu Underly Derivati	7. Title and Amou of Securities Underlying Derivative Securit (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securitie Beneficia Owned Following Reported	e Owne s Form Direct or Ind g (I) (Ins	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	Amou or Numb of Sha	er		Transaction( (Instr. 4)	ion(s)			
FNF Group Stock Option (right to	\$34.84	10/29/2015			A		220,000		(3)		10/29/2022	FNF Group Commo Stock	220,0	000	\$0	220,0	00	D		

## **Explanation of Responses:**

- 1. Grant of restricted common stock vesting in three equal annual installments beginning on October 29, 2016, subject to the achievement of performance criteria specified in the reporting person's award agreement.
- $2.\ Amount\ adjusted\ to\ reflect\ shares\ acquired\ under\ the\ registrant's\ Employee\ Stock\ Purchase\ Plan.$
- 3. The options vest in three equal annual installments beginning October 29, 2016.

/s/ Michael L. Gravelle, as attorney-in-fact 10/30/2015

\*\* 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.