FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL							
OMB Number:							
Estimated average burden							
hours per response:	0.5						

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

Name and Address of Reporting Person* Fidelity National Financial, Inc.		3. Issuer Name and Ticker or Trading Symbol O CHARLEYS INC [CHUX]								
(Last) (First) (Middle) 601 RIVERSIDE AVENUE			Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner			5. If Amendment, Date of Original Filed (Month/Day/Year)				
(Street) JACKSONVILLE FL 32204 (City) (State) (Zip)			Officer (give title below)	Other (spe below)	cify	Applicable Line) X Form filed b	t/Group Filing (Check y One Reporting Person y More than One erson			
Table I - Non-Derivative Securities Beneficially Owned										
1. Title of Security (Instr. 4)		Amount of Securities eneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		4. Nature of Indirect Beneficial Ownership (Instr. 5)					
Common Stock, no par value		2,079,542	D							
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)										
1. Title of Derivative Security (Instr. 4)	2. Date Exercisa Expiration Date (Month/Day/Yea	•	3. Title and Amount of Securit Underlying Derivative Securit	ty (Instr. 4) Conve		rcise Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)			
		xpiration ate	Title	Amount or Number of Shares	Price of Derivati Security	ive or Indirect				

Explanation of Responses:

Remarks:

FIDELITY NATIONAL
FINANCIAL, INC. By: /s/
Michael L. Gravelle Executive
Vice President, General
Counsel and Corporate
Secretary

** 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 5 (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.