FORM 4

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

Washington, D.C. 20549	
------------------------	--

OMB API	PROVAL
OMB Number:	3235-0287
Estimated averag	e burden

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).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is

intended to satisfy the affirmative

STATEMENT OF CHANGES IN BENEFICIAL OWNERSH	ΙP
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* Nolan Michael Joseph						2. Issuer Name and Ticker or Trading Symbol Fidelity National Financial, Inc. [FNF]								Relationship of Reporting Person(s) to Issuer (Check all applicable)     Director					
(Last) (First) (Middle) 601 RIVERSIDE AVENUE						3. Date of Earliest Transaction (Month/Day/Year) 11/08/2024									Officer (give title Other (specify below)  Chief Executive Officer				
(Street) JACKSONVILLE FL 32204 (City) (State) (Zip)					4. If <i>i</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)  Form filed by One Reporting Person Form filed by More than One Reporting Person					
		Table	I - No	on-Deriva	tive S	Secu	rities	Acc	quired	l, Dis	sposed of	, or B	enefic	ially Ow	ned				
1. Title of Security (Instr. 3)  2. Transactic Date (Month/Day/					Year) Execution Date,			3. Transaction Code (Instr. 8)  4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)						Form (D) or	r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) or (D)	Price	Trans	action(s) 3 and 4)			(Instr. 4)	
Common Stock 11/08/20					024	24			F		13,814	D	\$60	.23 429,	429,322.0394(1)		D		
Common Stock											11	11,085.324		I .	Michael J. Nolan Trust				
		Tal	ble II								osed of, convertib				ed				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	ion Date Execute (Month/Day/Year) Execute (Month/Day/Year) (Monty/e				ransaction ode (Instr.		vative urities uired or osed 0) r. 3, 4 5)	Expira	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		8. Price of Derivative Security (Instr. 5)		ly (	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficia Ownersh (Instr. 4)	
			Code	v	(A)	(D)	Date Exerci	sahla	Expiration Date		Amount or Number of Shares								

## **Explanation of Responses:**

1. Amount adjusted to reflect shares acquired under the registrant's Employee Stock Purchase Plan.

/s/ Colleen E. Haley, as attorney-in-fact

11/12/2024

\*\* Signature of Reporting Person

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

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.

<sup>\*</sup> If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).