# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

# **SCHEDULE 13G**

(Amendment No. 2)

**Under the Securities Exchange Act of 1934\*** 

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# Cannae Holdings, Inc.

(Name of Issuer)

Common Stock, \$0.0001 par value per share (Title of Class of Securities)

13765N107 (CUSIP Number)

December 31, 2022 (Date of Event Which Requires Filing of this Statement)

Check the appropriate box to designate the rule pursuant to which this Schedule is filed:

[] Rule 13d-1(b) [x] Rule 13d-1(c) [] Rule 13d-1(d)

\*The remainder of this cover page shall be filled out for a reporting person's initial filing on this form with respect to the subject class of securities, and for any subsequent amendment containing information which would alter the disclosures provided in a prior cover page.

The information required in the remainder of this cover page shall not be deemed to be "filed" for the purpose of Section 18 of the Securities Exchange Act of 1934 ("Act") or otherwise subject to the liabilities of that section of the Act but shall be subject to all other provisions of the Act (however, see the Notes).

CUSIP No.	13765N107	
COBIL 110.	13/03/110/	

	NAME OF R	NAME OF REPORTING PERSON			
1	Fidelity Nat	Fidelity National Financial, Inc.			
	CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP* (a) x				
2	(b)				
3	SEC USE ON	NLY			
	CITIZENSHI	IP OR PL	ACE OF ORGANIZATION		
4	Delaware				
	Belaware		SOLE VOTING POWER		
		5	0		
	MBER OF HARES		SHARED VOTING POWER		
	FICIALLY NED BY	6	0		
REP PI	EACH ORTING ERSON WITH:	7	SOLE DISPOSITIVE POWER 0		
			SHARED DISPOSITIVE POWER		
		8	O		
	AGGREGAT	E AMOU	JNT BENEFICIALLY OWNED BY EACH REPORTING PERSON		
9					
	CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES*				
10	N/A				
	PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9				
11	0.0%				
	TYPE OF RE	EPORTIN	G PERSON*		
12	СО				

CUSIP No.	13765N107	

	NAME OF REPORTING PERSON			
1	Commonwealth Land Title Insurance Company			
	CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP* (a) x			
2	(b)			
3	SEC USE ONLY			
	CITIZENSH	IP OR I	PLACE OF ORGANIZATION	
4	Florida			
			SOLE VOTING POWER	
		5	0 (See Item 4)	
	MBER OF HARES		SHARED VOTING POWER	
BENE	EFICIALLY NED BY	6	0 (See Item 4)	
REI Pl	EACH REPORTING PERSON WITH:		SOLE DISPOSITIVE POWER 0 (See Item 4)	
	W1111.	7	SHARED DISPOSITIVE POWER	
		8	0 (See Item 4)	
	AGGREGAT	ГЕ АМО	OUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON	
9	0 (See Item 4)			
	CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES*			
10	N/A			
	PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9			
11	0.0% (See Item 4)			
12	TYPE OF REPORTING PERSON* CO			

CUSIP No.	13765N107	

	NAME OF REPORTING PERSON			
1	Fidelity National Title Insurance Company			
	CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP* (a) x			
2	(b)			
3	SEC USE ONLY			
	CITIZENSH	IIP OR I	PLACE OF ORGANIZATION	
4	Florida			
	NUMBER OF SHARES		SOLE VOTING POWER  0 (See Item 4)	
S			SHARED VOTING POWER	
OW	EFICIALLY 'NED BY	6	0 (See Item 4)	
REI Pi	EACH REPORTING PERSON WITH:		SOLE DISPOSITIVE POWER 0 (See Item 4)	
			SHARED DISPOSITIVE POWER	
		8	0 (See Item 4)	
	AGGREGA	ГЕ АМО	DUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON	
9	0 (See Item 4)			
	CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES*			
10	N/A			
	PERCENT (	OF CLA	SS REPRESENTED BY AMOUNT IN ROW 9	
11	0.0% (See Item 4)			
12	TYPE OF REPORTING PERSON* CO			

13765N107
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	NAME OF REPORTING PERSON				
1	Chicago Title Insurance Company				
	CHECK TH	CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP* (a) x			
2	(b)	(b)			
3	SEC USE O	SEC USE ONLY			
	CITIZENSHIP OR PLACE OF ORGANIZATION				
4	Florida				
	-		SOLE VOTING POWER		
		5	0 (See Item 4)		
	MBER OF SHARES		SHARED VOTING POWER		
BEN	EFICIALLY WNED BY	6	0 (See Item 4)		
1	EACH REPORTING PERSON WITH:		SOLE DISPOSITIVE POWER 0 (See Item 4)		
			SHARED DISPOSITIVE POWER		
		8	0 (See Item 4)		
	AGGREGA	ТЕ АМО	DUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON		
9	0 (See Item 4)				
	CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES*				
10	N/A				
	PERCENT (	OF CLA	SS REPRESENTED BY AMOUNT IN ROW 9		
11	0.0% (See	Item 4)			
12	TYPE OF REPORTING PERSON* CO				

#### Item 1(a). Name of Issuer

Cannae Holdings, Inc. ("Issuer").

#### Item 1(b). Address of Issuer's Principal Executive Offices

1701 Village Center Circle Las Vegas, NV 89134

## Item 2(a). Name of Person Filing

This statement is being filed on behalf of:

- (i) Fidelity National Financial, Inc. ("FNF")
- (ii) Commonwealth Land Title Insurance Company ("CLTIC");
- (iii) Fidelity National Title Insurance Company ("FNTIC"); and
- (iv) Chicago Title Insurance Company ("CTIC")

## Item 2(b). Address of Principal Business Office or, if None, Residence

The principal business office of each of the Reporting Persons is:

c/o Fidelitry National Financial, Inc. 601 Riverside Ave Jacksonville, Florida 32204

#### Item 2(c). Citizenship

- (i) FNF: Delaware; and
- (ii) CLTIC, FNTIC, and CTIC: Florida

#### Item 2(d). Title of Class of Securities

Common Stock, \$0.0001 par value per share.

#### Item 2(e). CUSIP Number

13765N107

# Item 3. Not applicable.

## Item 4. Ownership

The beneficial ownership of the Reporting Persons as of the date of this Schedule 13G is as follows:

(a) - (c) The responses of the Reporting Persons to Rows 5, 6, 7, 8, 9 and 11 in each of their respective over pages to the Schedule 13 G are incorporated herein by reference.

FNF wholly owns CTIC, FNTIC, and CLTIC.

The breakdown of the ownership by Reporting Person is as follows (amounts beneficially owned; percentage of class):

- FNF 0; 0.00%
- CLTIC 0; 0.00%
- FNTIC 0; 0.00%
- CTIC 0; 0.00%

#### Item 5. Ownership of Five Percent or Less of a Class

If this statement is being filed to report the fact that as of the date hereof the reporting person has ceased to be the beneficial owner of more than 5% of the class of securities, check the following [x]

# Item 6. Ownership of More than Five Percent on Behalf of Another Person

Not applicable.

## Item 7. Identification and Classification of the Subsidiary Which Acquired the Security Being Reported on by the Parent Holding Company

Not applicable.

## Item 8. Identification and Classification of Members of the Group

See Item 4(a).

# Item 9. Notice of Dissolution of Group

Not applicable.

## Item 10. Certification

Not applicable.

# **SIGNATURES**

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

Dated: February 13, 2023 FIDELITY NATIONAL FINANCIAL, INC.

By: /s/ Michael L. Gravelle

Name: Michael L. Gravelle

Title: Executive Vice President, General Counsel and Corporate Secretary