FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Machinatan	D C	20540	
Nashington,	D.C.	20049	

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APP	ROVAL						
OMB Number:	3235-0287						
Estimated average burden							
hours per response	0.5						

	tion 1(b).	muc. occ		Filed	pursua or Se	nt to S ection 3	Section 30(h) o	16(a) f the li	of the S nvestme	Securit ent Co	ies Exchang mpany Act o	e Act of 1940	of 193	4		nours	per re	esponse:	0.5	
1. Name and Address of Reporting Person* <u>Gravelle Michael L</u>				2. Issuer Name and Ticker or Trading Symbol Cannae Holdings, Inc. [CNNE]								eck all app Direc	licable) tor	J	rson(s) to Is	vner				
(Last) 1701 VII	`	irst) (I	(Middle) ER CIRCLE				3. Date of Earliest Transaction (Month/Day/Year) 11/11/2022							X Officer (give title Other (specify below) below) Executive Vice President					респу 	
(Street) LAS VE			9134 Zip)		4. If <i>I</i>									Line	ndividual or Joint/Group Filing (Check Applicable e) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
		Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired	, Dis	posed of	, or E	3ene	ficia	lly Own	ed				
1. Title of Security (Instr. 3) 2. Transact Date (Month/Date)				Execution Date,		Date,	3. Transaction Code (Instr. 8) 4. Securities Acquired (Disposed Of (D) (Instr. 5)				, 4 and Secur Benef Owne		ies ially Following	Forn (D) c	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership				
									Code	v	Amount	(A) (D)	or F	rice	Transa	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)	
Common Stock 11/11/.				11/11/2	2022	F 1,574 D \$25.5			1 157,820			D								
	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)	if any	emed ion Date, /Day/Year)		ransaction of Code (Instr. Derivative			6. Date Exercisable and Expiration Date (Month/Day/Year) (Month/Day/Year) 7. Title and Amount of Securities Underlying Derivative Security (In: 3 and 4)			str.	3. Price of Derivative Security Instr. 5)		y Di or (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	or Num of Shar	.						

Explanation of Responses:

Colleen E. Haley, as attorneyin-fact

11/12/2022

** Signature of Reporting Person

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.