Edgar Filing: CITY NATIONAL CORP - Form 4

CITY NAT	IONAL CORP										
Form 4											
February 01	1, 2011										
FORM	ЛД								OMB A	PPROVA	۹L
	UNITED	STATES			AND EXCHA 1, D.C. 20549	NGE (COMMISSIO	0	MB umber:	3235-	-0287
Check t if no lor subject	to STATEN	x STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF									ry 31, 2005
Section 16.SECURITIESburden hours per responseForm 4 orFiled pursuant to Section 16(a) of the Securities Exchange Act of 1934,obligationsFiled pursuant to Section 16(a) of the Securities Exchange Act of 1934,obligationsSection 17(a) of the Public Utility Holding Company Act of 1935 or SectionSee Instruction30(h) of the Investment Company Act of 1940											0.5
(Print or Type	Responses)										
1. Name and CAREY C	Person <u>*</u>	2. Issuer Name and Ticker or Trading Symbol				5. Relationship of Reporting Person(s) to Issuer					
(Lest)	Middle)	CITY NATIONAL CORP [CYN]				(Check all applicable)					
(Last) 400 NORT	3. Date of Earliest Transaction (Month/Day/Year) 01/31/2011				Director 10% Owner X Officer (give title Other (specify below) below) EVP & Chief Financial Officer						
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
BEVERLY	HILLS, CA 902	10					Form filed by Person	More t	than One Re	eporting	
(City)	(State)	(Zip)	Tab	ole I - Non-	Derivative Secur	rities Acc	quired, Disposed	of, or	Beneficial	lly Owne	d
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deem Execution any (Month/Da	Date, if	3. Transactic Code (Instr. 8)	4. Securities onAcquired (A) or Disposed of (D) (Instr. 3, 4 and 5	r S) H 5) (5. Amount of Securities Beneficially Dwned Following	Form	: Direct r Indirect	7. Nature Indirect Beneficia Ownersh (Instr. 4)	al iip

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

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 control number.

Reported

Transaction(s)

(Instr. 3 and 4)

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exercisable and	7. Title and Amount of	8. Price of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	onNumber	Expiration Date	Underlying Securities	Derivative
Security	or Exercise		any	Code	of	(Month/Day/Year)	(Instr. 3 and 4)	Security

(A)

or

Code V Amount (D) Price

Edgar Filing: CITY NATIONAL CORP - Form 4

(Instr. 3)	Price of Derivative Security	(Month/Day/Yea	ur) (Instr.	8)	Deri ¹ Secu Acqu (A) o Disp of (E (Inst 4, an	rities uired or osed)) r. 3,					(Instr. 5)
			Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Fund Units (EDCP)	<u>(1)</u>	01/31/2011	А		72		(2)	(2)	Common Stock	72	\$ 57.79

Reporting Owners

Reporting Owner Name / Address	Relationships								
	Director	10% Owner	Officer	Other					
CAREY CHRISTOPHER J 400 NORTH ROXBURY DRIVE BEVERLY HILLS, CA 90210			EVP & Chief Financial Officer						
Signatures									

Christopher J. Carey 02/01/2011 <u>**Signature of Date</u> Reporting Person

Explanation of Responses:

- * 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).
- (1) These Stock Fund Units were acquired under the Executive Deferred Compensation Plan (EDCP) and convert to stock on a one-for-one basis.
- (2) The Stock Fund Units are generally distributed upon termination, or following retirement on the date or dates specified by the reporting person.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.