## Edgar Filing: CITY NATIONAL CORP - Form 4

CITY NAT	IONAL CORP								
Form 4									
May 03, 20	11								
FORM	ΛΛ							PPROVAL	
	UNITED	STATES			AND EXCHANG , D.C. 20549	E COMMISSION	OMB Number:	3235-0287	
Check the			Expires:	January 31,					
if no lon subject t		<b>AENT O</b>	F CHANGES IN BENEFICIAL OWNERSH				Estimated	2005 average	
Section 16. SECURITIES						burden ho			
Form 4							response	•	
Form 5 obligation					he Securities Excha	•			
may con				•	lding Company Ac		on		
See Inst	ruction	30(h)	of the I	nvestmen	t Company Act of	1940			
1(b).									
(Print or Type	Responses)								
1 Name and	Address of Reporting	Person *	2.1	N	1 TT 1 TT 1'	5 Relationship o	f Reporting Per	rson(s) to	
CAREY C		2. Issuer Name <b>and</b> Ticker or Trading			5. Relationship of Reporting Person(s) to Issuer				
0111121 01		Symbol CITY NATIONAL CORP [CYN]							
- · ·					(Che	e)			
(Last) (First) (Middle)			3. Date of Earliest Transaction			<b>D</b>	10/		
400 NORT	DIVE	(Month/Day/Year) 04/29/2011			Director 10% Owner _X_ Officer (give title Other (specify				
400 NOK1	04/29/2011			below) below) EVP & Chief Financial Officer					
						EVP & C	hief Financial (	Officer	
	4. If Amendment, Date Original			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person					
	Filed(Month/Day/Year)								
BEVERLY	HILLS, CA 902	10					More than One R		
(City)	(State)	(Zip)	Tab	ole I - Non-	Derivative Securities	Acquired, Disposed o	of, or Beneficia	lly Owned	
1.Title of	2. Transaction Date	2A. Deem	ed	3.	4. Securities	5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Year)	Execution	Date, if	Transactio	onAcquired (A) or	Securities	Form: Direct	Indirect	
(Instr. 3)		any		Code	Disposed of (D)		(D) or Indirect		
		(Month/D	ay/Year)	(Instr. 8)	(Instr. 3, 4 and 5)		(I) (Instr. 4)	Ownership (Instr. 4)	
						Reported	(	(	

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.

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	orNumber	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

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(Instr. 3)	Price of Derivative Security	(Month/Day/Year)	) (Instr. 8)	Deriva Securit Acquir (A) or Dispos of (D) (Instr. 1 4, and	ties red red 3,				(Instr. 5)
			Code V	(A) (	D) Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Fund Units (EDCP)	<u>(1)</u>	04/29/2011	А	77	(2)	(2)	Common Stock	77	\$ 57.11

## **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 05/02/2011 <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.