Edgar Filing: CITY NATIONAL CORP - Form 4

CITY NAT	IONAL CORP										
Form 4											
November	01, 2011										
FORM	ЛД								OMB A	PPROVA	۹L
-	UNITED	STATES			AND EXCHAI , D.C. 20549	NGE	COMMISSIO	~	OMB Number:	3235	-0287
Check t if no los subject	nger STATEN	MENT OI	F	Expires:	Janua	ry 31, 2005					
Subject				SECUI	RITIES				Estimated a ourden hou		
Form 4	or								response		0.5
obligati may co	Form 5 obligations may continue.Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,See InstructionSection 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940										
(Print or Type	Responses)										
1. Name and Address of Reporting Person <u>*</u> CAREY CHRISTOPHER J			2. Issuer Name and Ticker or Trading Symbol			5. Relationship of Reporting Person(s) to Issuer					
			CITY NATIONAL CORP [CYN]				(Ch	ll applicable	applicable)		
(Last)	(First) (Middle)	3. Date of Earliest Transaction				(choch an approact)				
			(Month/Day/Year)				Director 10% Owner				
400 NORT	H ROXBURY D	RIVE	10/31/2	2011			X Officer (gi below) EVP & 0		e Oth below) Financial C	er (specify Officer	
	(Street)		4. If Am	endment, D	ate Original		6. Individual or	Joint/	/Group Filin	ng(Check	
BEVERLY	Y HILLS, CA 902	10	Filed(Mo	onth/Day/Yea	r)		Applicable Line) _X_ Form filed by Form filed by Person				
(City)	(State)	(Zip)	Tab	ole I - Non-J	Derivative Securi	ties Ac	quired, Disposed	of, or	Beneficia	lly Owne	d
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemo Execution any (Month/Da	Date, if	3. Transactic Code (Instr. 8)	4. Securities onAcquired (A) or Disposed of (D) (Instr. 3, 4 and 5))	5. Amount of Securities Beneficially Owned Following	Form	wnership n: Direct or Indirect r. 4)	7. Nature Indirect Benefici Ownersh (Instr. 4)	al 1ip

or Code V Amount (D) Price

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

(A)

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. Number	6. Date Exercisable and	7. Title and Amount of	8. Price of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onof	Expiration Date	Underlying Securities	Derivativ
Security	or Exercise		any	Code	Derivative	(Month/Day/Year)	(Instr. 3 and 4)	Security

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(Instr. 3)	Price of Derivative Security	(Mo	onth/Day/Year)	(Instr.	8)	Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)						(Instr. 5)
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Fund Units (EDCP)	<u>(1)</u>	10/31/2011		А		103		(2)	(2)	Common Stock	103	\$ 42.4

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	11/01/2011
<u>**</u> Signature of Reporting Person	Date

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.