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CITY NATI Form 4	ONAL CORP										
November 2	1, 2013										
FORM	UNITED	STATES		RITIES A shington,			NGE C	OMMISSION	OMB AF OMB Number:	PROVAL 3235-0287	
Check this box if no longer subject to Section 16. STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES SECURITIES January 3 ⁻ 200 Estimated average burden hours per							•				
(Print or Type I	Responses)										
			2. Issuer Name and Ticker or Trading Symbol CITY NATIONAL CORP [CYN]					5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (N	Middle)		f Earliest Tr		L	-	(Checl	c all applicable)	
400 NORTH ROXBURY DRIVE			(Month/Day/Year) 11/21/2013					Director 10% Owner X Officer (give title Other (specify below) EVP & Chief Financial Officer			
				mendment, Date Original Month/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person 			
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative S	Securi	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Executio any		3. Transactio Code (Instr. 8) Code V	4. Securiti n(A) or Dis (Instr. 3, 4)	sposed	l of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common	11/21/2013			M	25,000	(D) A	\$	56,725	D		
Stock Common Stock	11/21/2013			S	25,000	D	65.61 \$ 76.1 (1)	31,725	D		
Common Stock								7,201	I	By CNC Profit Sharing Plan (2)	

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)

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required to respond unless the form displays a currently valid OMB control number.

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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exer Expiration E (Month/Day	Date	7. Title and A Underlying S (Instr. 3 and	Securities
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Employee Stock Options (Right to Buy)	\$ 65.61	11/21/2013		М	25,000	<u>(3)</u>	07/05/2014	Common Stock	25,000

Reporting Owners

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

/s/ Christopher J.	
Carey	11/21/2013
**Signature of Reporting	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).

The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$75.96 to \$76.30, inclusive. The reporting person undertakes to provide to City National Corporation, any security holder of City National

- (1) to \$70.50, inclusive: The reporting person indertakes to provide to City National Corporation, any security holder of City National Corporation, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the price range set forth in this footnote (1) to this Form 4.
- (2) Shares held in the reporting person's City National Corporation Profit Sharing Plan as of November 20, 2013.
- (3) The stock options vested in four equal installments beginning July 6, 2005.

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.