CITY NATIONAL CORP Form 4/A

April 24, 2013

## FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to Section 16.

Form 4 or Form 5 obligations

may continue. See Instruction

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES** 

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

2. Issuer Name and Ticker or Trading

(Print or Type Responses)

1(b).

(Last)

(City)

1. Name and Address of Reporting Person \* THOMAS PETER M

Symbol

(Middle)

CITY NATIONAL CORP [CYN]

3. Date of Earliest Transaction

(Month/Day/Year) 04/17/2013

5. Relationship of Reporting Person(s) to Issuer

**OMB APPROVAL** 

3235-0287

January 31,

2005

0.5

**OMB** 

Number:

Expires:

response...

Estimated average

burden hours per

(Check all applicable)

THOMAS & MACK CO., 2300 WEST SAHARA AVENUE, SUITE

(Street)

(State)

(First)

503

4. If Amendment, Date Original

Filed(Month/Day/Year)

04/19/2013

6. Individual or Joint/Group Filing(Check

Applicable Line)

X\_ Director

Officer (give title

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

below)

LAS VEGAS, NV 89102

1. Title of 2. Transaction Date 2A. Deemed Security (Month/Day/Year) Execution Date, if (Instr. 3)

(Zip)

(Month/Day/Year)

3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 3, 4 and 5) (Instr. 8)

Owned Reported

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

5. Amount of Securities Beneficially Following

Transaction(s)

(Instr. 3 and 4)

6. Ownership 7. Nature of Form: Direct Indirect (D) or Indirect Beneficial (I) (Instr. 4)

Ownership (Instr. 4)

10% Owner

Other (specify

Code V Amount (D) Price

(A)

or

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.

SEC 1474 (9-02)

#### Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

3. Transaction Date 3A. Deemed 1. Title of (Month/Day/Year) Execution Date, if Transaction of Derivative Expiration Date Derivative Conversion

5. Number

6. Date Exercisable and

7. Title and Amount of 8. Pric Underlying Securities Deriva

#### Edgar Filing: CITY NATIONAL CORP - Form 4/A

Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8)		Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		(Month/Day/Year)		(Instr. 3 and 4)		Securit (Instr.
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Fund Units (DDCP)	(1)	04/17/2013		A		1,097		(2)	(2)	Common Stock	1,097	\$ 54.

### **Reporting Owners**

Reporting Owner Name / Address

Director 10% Owner Officer Other

THOMAS PETER M
THOMAS & MACK CO.
2300 WEST SAHARA AVENUE, SUITE 503
LAS VEGAS, NV 89102

#### **Signatures**

/s/ Corinna Cherian, Attorney-in-Fact 04/24/2013

\*\*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).

X

- This is not a new transaction. This amendment is being filed solely for the purpose of filing a Power of Attorney. All other information remains the same and correct as filed on April 19, 2013. These Stock Fund Units were acquired under the Director Deferred Compensation Plan (DDCP) 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.

#### **Remarks:**

This Amendment was filed solely to allow the filing of the Power of Attorney (POA). All other information remains the same 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.

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