#### Edgar Filing: Fitzmaurice Brian - Form 4

Fitzmaurice Brian	ı									
Form 4										
December 17, 200										
FORM 4	UNITED	ст і тес	SECU	DITIES			COMMISSION	T	PPROVAL	
Washington, D.C. 20549								N OMB Number:	3235-0287	
Check this box if no longer	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF								January 31,	
subject to Section 16.	STATEN	F CHAN	NGES IN SECUI	Estimated burden hou						
Form 4 or	r								. 0.5	
Form 5 obligations may continue. See Instruction 1(b). 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										
(Print or Type Respon	nses)									
1. Name and Address Fitzmaurice Bria	Symbol	er Name <b>an</b> e		Ū.	5. Relationship of Reporting Person(s) to Issuer					
<u> </u>					(Check all applicable)					
(Last) ( C/O CITY NATI S. FLOWER ST.	3. Date of Earliest Transaction (Month/Day/Year) 10/31/2009				Director 10% Owner Officer (give title Other (specify below) below) EVP & Chief Credit Officer					
(Street)			4. If Amendment, Date Original			1	6. Individual or Joint/Group Filing(Check			
LOS ANGELES	Filed(Month/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City) (	State)	(Zip)	Tak	la T. Nam I	Danimatina	C	and Dimond	af an Danafiaia	ller Oerreed	
							cquired, Disposed		•	
1.Title of Security2. Transaction Date (Month/Day/Year)2A. Deem Execution any (Month/D(Instr. 3)(Month/Day/Year)			Date, if TransactionAcquired (A) or Code Disposed of (D)			(A) or of (D) and 5)	Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code V	Amount	or (D) Price	Transaction(s) (Instr. 3 and 4)			
Reminder: Report on	a separate line	for each cl	ass of sec	urities bene	ficially own	ned directly	or indirectly.			
					inform requir	nation cont ed to resp ys a curre	spond to the colle tained in this form ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)	

# 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. I
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onof	Expiration Date	Underlying Securities	De
Security	or Exercise		any	Code	Derivative	(Month/Day/Year)	(Instr. 3 and 4)	Sec

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8)		Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)						(
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Employee Stock Option (Right to Buy)	\$ 23.68	10/31/2009		J	V		337 (1)	(2)	03/05/2019	Common Stock	337	

### **Reporting Owners**

	Relationships							
	Other							
Fitzmaurice BrianEVP &C/O CITY NATIONAL BANKChief Credit555 S. FLOWER ST., 11TH FL.Chief CreditLOS ANGELES, CA 90071Officer								

### Signatures

**Reporting Person** 

Brian Fitzmaurice 12/16/2009 \*\*Signature of 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).

Pursuant to limitations and restrictions in the Emergency Economic Stabilization Act of 2008, as amended by the American Recovery and
(1) Reinvestment Act of 2009 and Interim Final Regulations thereunder, 337 options granted to the reported person were forfeited for no consideration as of October 31, 2009 to comply with applicable law.

(2) The forfeited options were scheduled to vest in four equal installments beginning on March 6, 2010.

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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