Edgar Filing: PNC FINANCIAL SERVICES GROUP INC - Form 4/A

PNC FINAL Form 4/A May 13, 20	NCIAL SERVICE	ES GROU	P INC										
									OMB A	OMB APPROVAL			
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							N OMB Number:	3235-0287					
Check this box if no longer subject to Section 16. Form 4 or				CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES						Expires: January 31 2005 Estimated average burden hours per			
Form 5 obligation may cor <i>See</i> Instr 1(b).	Filed pur ons stinue. Section 17(a) of the l	Public U		ding Cor	npan	y Act	nge Act of 1934, of 1935 or Sectio 940		0.5			
(Print or Type	Responses)												
1. Name and Address of Reporting Person <u>*</u> CHELLGREN PAUL W			2. Issuer Name and Ticker or Trading Symbol PNC FINANCIAL SERVICES GROUP INC [PNC]				-	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
(3. Date of Earliest Transaction(Month/Day/Year)04/01/2011					X_ Director 10% Owner Officer (give title Other (specify below) below)					
Filed			Filed(Mo	If Amendment, Date Original led(Month/Day/Year) 4/05/2011				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 					
CRESCEN	T SPRINGS, KY	41017						Form filed by Person	More than One F	Reporting			
(City)	(State)	(Zip)	Tab	ole I - Non-I	Derivative	Secui	rities A	cquired, Disposed	of, or Beneficia	ally Owned			
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, any (Month/Day/Year)		Date, if	3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) (A) or			Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)					
D 1 1 2		c	0	Code V			Price						
Reminder: Re	port on a separate line	e for each cl	ass of sec	urities benef	ficially ow	ned di	rectly c	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.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number	6. Date Exercisable and		7. Title and Amount of		8. Price
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio		Expiration Date				Derivativ Security
Security	or Exercise		any	Code	Derivative	(Month/Day/	Month/Day/Year) ((Instr. 3 and 4)	
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)						(Instr. 5)
	Derivative				Acquired					
	Security				(A) or					
					Disposed					
					of (D)					
					(Instr. 3, 4,					
					and 5)					
				Code V	(A) (D)	Date	Expiration	Title	Amount	
						Exercisable	-		or	
							2		Number	
									of	
									Shares	
									0111100	
Phantom					500			\$5 Par		
Stock	<u>(1)</u>	04/01/2011		$A^{(2)}$	522	(4)	(4)	Common	522 <u>(3)</u>	\$ 63.7
Unit					(3)			Stock		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
CHELLGREN PAUL W TOEBBEN EXECUTIVE CENTER 541 BUTTERMILK PIKE, SUITE 207 CRESCENT SPRINGS, KY 41017	Х						
Signatures							
Lori A. Hasselman, Attorney-in-Fact for Chellgren	Paul W.	04/15/2011					
<u>**</u> Signature of Reporting Person			Da	ate			

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) One phantom stock unit is the economic equivalent of one share of The PNC Financial Services Group, Inc. ("PNC") Common Stock.
- (2) Phantom Stock Units received under the PNC Directors Deferred Compensation Plan.
- (3) This amendment is being filed to correct an administrative error in the number of shares previously reported in the original filing.
- (4) Phantom Stock Units will be settled in cash upon distribution from the reporting person's plan account and generally do not expire.

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.

Relationshins