FORM 4	4
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Check this box if no	Ī
longer subject to	
Section 16. Form 4 or	
Form 5 obligations	
may continue. See	
Instruction 1(b).	

#### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response... 0.5

### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting I WHITFORD THOMAS K	2. Issuer Name a PNC FINANCE [PNC]			0,			5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director10% Owner XOfficer (give title below) Other (specify below) Vice Chairman				
ONE PNC PLAZA, 249 FIFT	3. Date of Earliest 03/12/2010	Transactio	n (M	onth/Day/	Year)		Vice Chairin				
(Street) PITTSBURGH, PA 15222-27	4. If Amendment, Date Original Filed(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)	Та	ble I - Nor	-Der	ivative S	ecuritie	es Acqui	uired, Disposed of, or Beneficially Owned			
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Code (Instr. 8)	ction 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			of (D)	5. Amount of Securities 6. 7. Na   Beneficially Owned Following Ownership of Im   Reported Transaction(s) Form: Beneficially			
		(Month/Day/Year)	Code	v	Amount	(A) or (D)	Price	(Instr. 3 and 4)	Direct (D) (C or Indirect ( (I) (Instr. 4)	Ownership (Instr. 4)	
\$5 Par Common Stock	03/12/2010		S		300	D	\$ 58.2	119,216	D		
\$5 Par Common Stock	03/12/2010		S		1,700	D	\$ 58.19	117,516	D		
\$5 Par Common Stock								10,625	Ι	401(k) Plan	

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

SEC 1474 (9-02)

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)														
1. Title of	2.	3. Transaction	3A. Deemed	4.		5.		6. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transact	ion	Number		and Expirati	xpiration Date Amount of		Derivative	Derivative	Ownership	of Indirect	
Security	or Exercise	(Month/Day/Year)	any	Code				(Month/Day	/Day/Year) Underlyin		rlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)		Deriv	· · · · · · · · · · · · · · · · · · ·		Securities (Instr. 5)		Beneficially	Derivative	Ownership		
	Derivative					Securities (1		(Instr. 3 and		Owned	Security:	(Instr. 4)			
	Security					Acqu	ired			4)			Following	Direct (D)	
						(A) o	r						Reported	or Indirect	
					Disposed		osed						Transaction(s)	(I)	
						of (D)							(Instr. 4)	(Instr. 4)	
						(Instr. 3,									
						4, and 5)									
											Amount				
								Date	Expiration		or				
								Exercisable	*	Title	Number				
								Excicisable	Date		of				
				Code	V	(A)	(D)				Shares				

# **Reporting Owners**

	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
WHITFORD THOMAS K ONE PNC PLAZA 249 FIFTH AVENUE PITTSBURGH, PA 15222-2707			Vice Chairman					

## Signatures

### Lori A. Hasselman, Attorney-in-Fact for Thomas K. Whitford

\*\*Signature of Reporting Person

03/16/2010 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).

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.