FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549
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**OMB APPROVAL** OMB Number: Estimated average burden hours per response: 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b) 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 Person*  JONES RENE F					2. Issuer Name and Ticker or Trading Symbol  M&T BANK CORP [ MTB ]										all appl	tor	Perso	10% Ov	wner		
(Last)	(Fi &T PLAZA	rst)	(Middle)													Other (s below) ial Office	·				
(Street) BUFFAI			14203-23	99	4. 1	f Ame	nendment, Date of Original Filed (Month/Day/Year)								Indiv ne) X	,					
(City)	(S		(Zip)	n Dori	vativ	0 50	ouriti	05. 4.0	auirad	Dic	nosod	of or	Pon	oficia	My (	Owno	4				
Table I - Non-Deri  1. Title of Security (Instr. 3)  2. Trans Date (Month/			action	ar) if	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transa Code (	3. 4. Secur Dispose Code (Instr.			rities Acquired (A) o ed Of (D) (Instr. 3, 4			5. Amo Securit Benefic Owned	unt of ies cially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	ount (A) or (D)		Price			ed ction(s) 3 and 4)			(Instr. 4)	
Common	ommon Stock			09/0	09/09/2011						286.4	42 .	<b>A</b> <sup>(1)</sup>	\$0.0	0(2)	36,033.62		D			
Common	Stock			09/0	9/2011	L			F		110		D	\$70	).5	35,	923.62				
Common	Stock															5	5,859	By 401(1) Plan <sup>(</sup>			
		٦	Гable II -						uired, [ s, option							wned	,				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,	4. Transa Code ( 8)		n of		6. Date Exi Expiration (Month/Da	Date		7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)			Deri Sec	rice of ivative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Ownership Form: Direct (D) or Indirect	Beneficial Ownership (Instr. 4)	
					Code	v	(A)		Date Exercisabl		xpiration ate	Title	or No of	umber							
Phantom Common Stock	(4)								(4)		(4)	Commo		(4)			1,122		I	Supplemental 401 (k)	

## **Explanation of Responses:**

- 1. The reported transaction involves an award of fully vested restricted stock issued under the M&T Bank Corporation 2009 Equity Incentive Compensation Plan. The stock represents a portion of the reporting person's salary and may be subject to restrictions on transfer. For more information, please see the Current Report on Form 8-K filed by M&T Bank Corporation on January 25, 2011.
- 2. The restricted stock was granted under an equity incentive compensation plan maintained by M&T Bank Corporation, and therefore the reporting person paid no price for the restricted stock.
- 3. The information presented is as of June 30, 2011.
- $4. \ The reported phantom common stock units are held by the reporting person in an excess benefit plan account maintained by M&T Bank Corporation and represent a like number of shares of M&T Bank Corporation and RA Ba$ Corporation common stock. The phantom common stock units may only be settled in cash upon distribution in accordance with the terms of the plan. The reported phantom common stock units also include units acquired through the dividend reinvestment feature of the plan.

## Remarks:

By: Andrea R. Kozlowski, Esq. 09/13/2011 (Attorney-In-Fact)

\*\* Signature of Reporting Person

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

- \* 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.

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 Number.