FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington D.C. 20549

Vashington,	D.C. 20549	

	OMB APPRO	DVAL							
	OMB Number:	3235-0287							
	Estimated average burden								
l	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).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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*						2. Issuer Name and Ticker or Trading Symbol  M&T BANK CORP [ MTB ]									k all app Direc	licable) tor	Person(s) to Is	wner	
(Last) ONE M8	(Fi &T PLAZA	rst)	(Middle)			Date of (05/2)		est Tran	saction (Month/Day/Year)					X	belov	•	other below) nancial Offic		
(Street) BUFFAL (City)			14203-23	99	- 4. l <sup>1</sup>	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indi Line) X	<b>'</b>				
(City)	(3)		le I - No	n-Deri	vative	e Se	curiti	es Ac	cauirea	. Di	isposed	of. or E	enefi	cially	Owne	.d			
1. Title of Security (Instr. 3) 2. Trans Date			2. Trans Date	action	action 2A Ex Day/Year) if a		2A. Deemed Execution Date, if any (Month/Day/Year)		3. 4. Securi Dispose Code (Instr.		rities Acquired (A) or ed Of (D) (Instr. 3, 4 and 5		or	5. Amount of		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	Code V Amount		(A) (D)	or Pi	Price		ed action(s) 3 and 4)		(Instr. 4)	
Common Stock 10				10/05	5/2012	2012			A <sup>(1)</sup>		234.2	26 A	(1) \$	0.00(2)	39,711.6		D		
Common Stock			10/05	5/2012	/2012					89	Ι	\$	98.51	39,622.6		D			
Common Stock														6,115		I	By 401(k) Plan <sup>(3)</sup>		
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day)	Date, Transa Code (I			of Ex		6. Date E Expiratio (Month/D	n Dat		Amount of		De Se (In	Price of rivative curity str. 5)		Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code			Date Exercisal	ate Exp tercisable Date		Title	Amou or Numb of Share	er						
Phantom Common Stock Units	(4)								(4)		(4)	Common Stock	(4)			1,525	I	Supplemental 401 (k) Plan <sup>(3)</sup>	

## **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 and represents a portion of the reporting person's salary.
- 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 September 30, 2012.
- 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 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. (Attorney-In-Fact)

10/09/2012

\*\* Signature of Reporting Person

Date

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.