SEC Form 4

FORM 4

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

OMB APPROVAL 3235-0287 OMB Number:

Estimated average burden hours per response: 0.5

to Section 16. Form 4 or Form 5 obligations may continue. See

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

	dress of Reporting	Person [*]		uer Name and Tick T BANK CO			5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
GEISEL G	<u>ARY N</u>					1	X	Director	10% 0	Owner		
(Last) ONE M&T P	(First) LAZA	(Middle)		e of Earliest Transa 0/2022	action (Month/	Day/Year)	1	Officer (give title below)	Other below	(specify)		
			4. If A	mendment, Date of	f Original Filed	(Month/Day/Year)	6. Indiv	/idual or Joint/Grou	p Filing (Check	Applicable		
(Street)							Line)	Form filed by Or	e Reporting Per	son		
BUFFALO	NY	14203						Form filed by Mo Person				
(City)	(State)	(Zip)										
		Table I - Non	n-Derivative S	ecurities Acq	uired, Disp	oosed of, or Bene	ficially	Owned				
Date			2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date,	3. Transaction	4. Securities Acquired (Disposed Of (D) (Instr. 3		5. Amount of Securities	6. Ownership Form: Direct	7. Nature of Indirect		

Date (Month/Day/Year)	Execution Date, if any (Month/Day/Year)				(D) (Inst	r. 3, 4 and		(D) or Indirect	of Indirect Beneficial Ownership (Instr. 4)
		Code	v	Amount	(A) or (D)) or Price Transaction			(11150. 4)
04/29/2022		A ⁽¹⁾		721	A	\$0.00	20,049	D	
							2,990	Ι	By IRA
	(Month/Day/Year)	(Month/Day/Year) if any (Month/Day/Year)	(Month/Day/Year) if any (Month/Day/Year) Code (8) Code	(Month/Day/Year) if any (Month/Day/Year) Code (Instr. 8) Code V	(Month/Day/Year) if any (Month/Day/Year) Code (Instr. 5) 8) Code V Amount	(Month/Day/Year) if any (Month/Day/Year) Code (Instr. 5) Code V Amount (A) or (D)	(Month/Day/Year) if any (Month/Day/Year) Code (Instr. 8) 5) Code V Amount (A) or (D) Price	(Month/Day/Year) if any (Month/Day/Year) Code (Instr. 8) 5) Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) 04/29/2022 A ⁽¹⁾ 721 A \$0.00 20,049	$ \begin{array}{ c c c c c c c c c c c c c c c c c c c$

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 Derivative Security (Instr. 3)	Derivative Conversion Dat Security or Exercise (Mo		3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

1. The reporting person was granted an award of restricted stock units under the M&T Bank Corporation 2019 Equity Incentive Compensation Plan for service on the M&T Bank Corporation Board of Directors. Each restricted stock unit vests on the first anniversary of the grant and represents a contingent right to receive one share of M&T Bank Corporation common stock upon vesting. Remarks:

By: Stephen T. Wilson, Esq. (Attorney-In-Fact)

05/03/2022

** 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.

Check this box if no longer subject Instruction 1(b).