FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
hours nor resnance	0.5								

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

Name and Address of Reporting Person* PEARSON KEVIN J						2. Issuer Name and Ticker or Trading Symbol M&T BANK CORP [MTB]									all app Direc	licable)	g Person	erson(s) to Issuer 10% Owner Other (specify		
(Last) 350 PAR 6TH FLO	K AVENU	,	(Middle)				3. Date of Earliest Transaction (Month/Day/Year) 04/23/2010									below) below) Executive Vice President				
(Street) NEW YO	DRK N		10022 (Zip)		4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indi Line) X						
(0.0)	(0)			n-Deriv	vativ	- S	Curiti	Δς Δ	cauired	Die	nosed	of or B	enefic	ially	Owne	nd				
1. Title of Security (Instr. 3)			2. Trans	nsaction :		2A. Deemed Execution Date, if any (Month/Day/Year)		3. 4. Se Transaction Disp		4. Secui	ed of, or Beneficia curities Acquired (A) or osed Of (D) (Instr. 3, 4 ar			5. Amount of		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
										Code V		Amount (A) or (D)		ce	Transa	Transaction(s) (Instr. 3 and 4)			(111501.4)	
Common Stock			04/23	3/2010				A ⁽¹⁾		239.0)5 A	(1) \$0	.00(2)	34,876.87		D				
Common	Common Stock			04/23	3/2010				F		103	В	\$8	8.49	34,773.87		D			
Common Stock														2,223		I		By 401(k) Plan ⁽³⁾		
		7	Гable II -									f, or Be			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/Day	Date,	4. Transa Code (8)		n of		6. Date Ex Expiration (Month/Da	Date		7. Title and Amount of Securities Underlying Derivative Securi (Instr. 3 and 4)		Der Sed (Ins	rice of ivative surity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transactions (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisab		xpiration ate	Title	Amour or Numbe of Shares	er						
Phantom Common Stock Units	(4)								(4)		(4)	Common Stock	(4)			779		I	Supplemental 401 (k) Plan ⁽³⁾	

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, 2010.
- 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 March 31, 2010.

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 and distributed 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: Brian R. Yoshida, Esq. (Attorney-In-Fact) ** Signature of Reporting Person

04/27/2010

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.