FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| l | OMB APPRO | VAL | | | | |
|---|-------------------------|-----------|--|--|--|--|
| | OMB Number: | 3235-0287 | | | | |
| l | Estimated average burde | en | | | | |
| 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).

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* PINTO MICHAEL P | | | | | | 2. Issuer Name and Ticker or Trading Symbol M&T BANK CORP [MTB] | | | | | | | | | | | licable) | , | | |
|--|--|--|---|------------------|--|--|---|-------------------------|---|-------|--|---|----|--|----------------------------|---|--|---|--|---|
| (Last) (First) (Middle) ONE M&T PLAZA | | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 08/24/2012 | | | | | | | | | Office | , | Other (specify below) hairman | | |
| (Street) BUFFAL (City) | UFFALO NY 14203-2399 | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | | Indivine) | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | | | | r) E | 2A. Deemed Execution Date, if any (Month/Day/Year) | | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 | | | | 4 and 5) Sec Ben Owr | | cially I Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership |
| | | | | | | | Code | v | Amount | (, | A) or D) | Price | | Reported Transaction(s) (Instr. 3 and 4) | | | | (Instr. 4) | | |
| Common | /2012 | 2012 | | A ⁽¹⁾ | | 470.3 | | A ⁽¹⁾ | \$0.0 | 0(2) | 127 | 127,580.28 | | D | | | | | | |
| Common Stock 08/24/3 | | | | | | | 2012 | | F | | 198 | | D | \$85.87 | | 127,382.28 | |] | D | |
| Common Stock | | | | | | | | | | | | | | | 10,000 | | | I | By Wife | |
| | | Та | | | | | | | | | sed of, onvertib | | | | y Ov | vned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deem Execution if any (Month/D | n Date, | Date, Transacti Code (Ins | | | | 6. Date E Expiratio (Month/D | n Dat | е | 7. Title and Amount of Securities Underlying Derivative Security (Inst and 4) | | ount | Deriv Secu | Price of rivative curity str. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exercisa | | Expiration Date | Title | of | | | | | | | |

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.

Remarks:

By: Andrea R. Kozlowski, Esq. (Attorney-In-Fact)

** 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.