FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPRO	VAL
OMB Number:	3235-0287
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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

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1. Name ar King D		Reporting Person*							cker or Tra						eck all app	olicable)	g Person(s) to	
(Last)		rst)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 05/04/2012						<u> </u>	V Office below	Director 10% Owner Officer (give title Other (spec below) below) Executive Vice President				
(Street) BUFFAI	LO N	Y	14203		- 4. I	f Ame	endmen	t, Date	of Origina	l Filed	(Month/[Day/Year)		Line) <mark>X</mark> Forn	n filed by One	Filing (Check Reporting Pe e than One R	erson
(City)	(Si		(Zip)													•		
1. Title of Security (Instr. 3)			2. Trans	saction 2/ Ex Day/Year) if		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disposed Code (Instr.		of, or Beneficial rities Acquired (A) or ed Of (D) (Instr. 3, 4 and		5. Am Secur Benef	ount of ities icially d Following	6. Ownership Form: Direct (D) or Indirec (I) (Instr. 4)	of Indirect Beneficial Ownership			
								Code	v	Amount	mount (A) or (D)		Price	Trans	action(s) 3 and 4)		(Instr. 4)	
Common	Stock			05/04	4/2012	2			A ⁽¹⁾		112.3	38 A	(1)	0.00	2) 11	,910.53	D	
Common	Stock			05/04	4/2012	2			F		34		D S	\$85.5	6 11	,876.53	D	
Common	Stock															1,398	I	By 401(k) Plan ⁽³⁾
		-	Гable II -						quired, I s, optio						Owned	i		
Derivative Conversion Date		3. Transaction Date (Month/Day/Year)	Execution Date,		4. Transactior Code (Instr. 8)		n of		6. Date Ex Expiration (Month/Da	Date		d 7. Title and Amount of Securities Underlying Derivative Sc (Instr. 3 and			3. Price of Derivative Security Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
				Cod	Code	v	(A)	(D)	Date Exercisab		xpiration ate		Amo or Num of Shai	ber				
Phantom Common Stock	(4)								(4)		(4)	Common Stock	1 (4	4)		77	I	Supplementa 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 and represents a portion of the reporting person's salary. The restricted stock will be subject to restrictions on transfer such that each executive may not sell, transfer or otherwise dispose of any of the shares received as stock salary until the earlier of (a) the date that M&T Bank Corporation repays Treasury's Capital Purchase Program investment made under the Troubled Asset Relief Program, or (b) January 1, 2014.
- 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 March 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. 05/08/2012 (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.