Instruction 1(b)

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL	OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 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

Bojdak Robert J						<u>&T</u>				RP [M				k all app	all applicable) Director		0% O				
(Last) (First) (Middle) ONE FOUNTAIN PLAZA						3. Date of Earliest Transaction (Month/Day/Year) 06/04/2010											Officer (give title below) Executive Vice		Other (speci below)		
(Street) BUFFALO NY 14203-149 (City) (State) (Zip)			95	4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)									Line)	Individual or Joint/Group Filing (Check Applicable ne) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
		Tab	le I - No	n-Deri	vativ	e Se	curiti	ies A	cqı	uired,	Dis	posed	of, or B	enefi	cially	Owne	d				
1. Title of Security (Instr. 3) 2. Trans. Date (Month/I					saction n/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)			3. Transac Code (li 8)			rities Acqu ed Of (D) (Ir		4 and 5) Secur Benef Owne		cially I Following	6. Ownersl Form: Dire (D) or Indir (I) (Instr. 4)	ct ect	7. Nature of Indirect Beneficial Ownership	
									Ì	Code	v	Amount	(A) (D)	or P	rice		ed action(s) 3 and 4)			(Instr. 4)	
Common Stock 06/04/					4/2010	0				A ⁽¹⁾		89.3	1 A	(1) \$	0.00(2)	14	,915.96	D	\neg		
Common Stock 06/04					4/2010	0				F		43	D	\$	75.36	14,872.96		D	\neg		
Common Stock																	1,565	I		401 (k) Plan ⁽³⁾	
		7	Гable II -										f, or Be			Owned					
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)		of E		Exp	Date Exe Diration I Donth/Day	Date		7. Title a Amount Securitie Underlyi Derivativ (Instr. 3 a		De Se (In	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)	(D) rect	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Dat Exe	e ercisable		piration ate	Title	Amor or Numl of Share	oer						
Phantom Common Stock	(4)									(4)		(4)	Common Stock	(4)			429	I		Supplemental 401 (k)	

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

06/08/2010

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.