FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

wasiiiigton,	D.C.	20549	

	OMB APPROVAL						
S IN BENEFICIAL OWNERSHIP	OMB Number:	3235-0287					
O IN BENEFICIAL OWNERORIII	Estimated average burden						

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

STATEMENT OF CHANGE

		Reporting Person*					Name BAN										all app Direc		,	10% C)wner
(Last) ONE M8	(Fi &T PLAZA	rst)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 09/10/2010								X	Officer (give title Other (specification) Executive Vice President						
(Street) BUFFAL (City)		tate)	14203-23 (Zip)		-								Day/Year)		Lin	ne) X	Form Form Perso		Reporting	g Perso	on
Date			2. Trans	saction				3 , T	3. 4. Sec		4. Secui	d of, or Benefic urities Acquired (A) o sed Of (D) (Instr. 3, 4			or 5. Amo and 5) Securi Benefi Owned		ount of ties cially I Following	Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
								[Code V		Amount		or	Price	,,,, T		Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)	
Common	Stock			09/1	0/2010	0				A ⁽¹⁾		99.9	6 A	(1)	\$0.00) (2)	20,	661.53	D ⁽³)	
Common	Stock			09/1	0/2010	0				F		31		D	\$86.	57	20,	630.53	D ⁽³⁾)	
Common Stock															12,528		I		By 401(k) Plan ⁽⁴⁾		
		-	Гable II -										f, or Be			y Ov	vned				
1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise (Instr. 3) Price of Derivative Security 3. Transaction Date (Month/Day/Year) (Month/Day/Year) 3. Transaction Date (Execution Date, if any (Month/Day/Year)			Date,	Code (Ins				6. Date Exercis: Expiration Date (Month/Day/Yea				7. Title and Amount of Securities Underlying Derivative Se (Instr. 3 and 4			Deriv Secu	. Price of Perivative Pecurity Pecurity Pecurity	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownersh Form: Direct (D or Indire (I) (Instr.	: t (D) direct	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exerc			piration te	Title	or Nu of	ount mber ares						
Phantom Common Stock	(5)									(5)		(5)	Common Stock	1	(5)			727		I	Supplemental 401 (k) Plan ⁽⁴⁾

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. Jointly owned.
- 4. The information presented is as of June 30, 2010.
- 5. 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. 09/14/2010 (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.