Peters Lisa B Form 4 March 18, 2010

FORM 4

OMB APPROVAL

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB Number: 3235-0287

Check this box if no longer subject to Section 16. Form 4 or Number:
January 31,
Expires: 2005

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Estimated average burden hours per response... 0.5

Form 4 or Form 5 obligations may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

e Instruction 30(h) of the Investment Company Ac

1(b).

Common

Common

Stock

Stock

03/16/2010

(Print or Type Responses)

1. Name and Address of Reporting Person * 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading Peters Lisa B Issuer Symbol Bank of New York Mellon CORP (Check all applicable) [BK] (Last) (First) (Middle) 3. Date of Earliest Transaction Director 10% Owner X_ Officer (give title Other (specify (Month/Day/Year) below) THE BANK OF NEW YORK 03/16/2010 Sr. Executive Vice President MELLON CORPORATION, BNY **MELLON CENTER SUITE 720** (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check Filed(Month/Day/Year) Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting PITTSBURGH, PA 15258-0001 (City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 1.Title of 2. Transaction Date 2A. Deemed 3. 4. Securities Acquired 5. Amount of 7. Nature of Security (Month/Day/Year) Execution Date, if Transaction(A) or Disposed of Securities Ownership Indirect (Instr. 3) Code Beneficially Form: Direct Beneficial (D) (Month/Day/Year) (Instr. 8) (Instr. 3, 4 and 5) Owned Following (D) or Ownership Reported Indirect (I) (Instr. 4) (A) Transaction(s) (Instr. 4) or (Instr. 3 and 4)

Code V

Α

(D)

Amount

26,265

(1)

Price

\$0

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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SEC 1474

(9-02)

148,602.7092

 $6,624.1755 \stackrel{(2)}{=}$

D

I

By 401(k)

Plan

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Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transact Code (Instr. 8)	5. Number of iorDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amour Underlying Securit (Instr. 3 and 4)	
				Code V	' (A) (D)	Date Exercisable	Expiration Date	Title	Amo or Num of Sh
EMP OPT-Right to Buy-Type NQ 3/16/10	\$ 30.25	03/16/2010		A(3)	84,563	03/16/2011(3)	03/15/2020	Common Stock	84,:

Reporting Owners

Reporting Owner Name / Address

Director 10% Owner Officer Other

Peters Lisa B THE BANK OF NEW YORK MELLON CORPORATION BNY MELLON CENTER SUITE 720 PITTSBURGH, PA 15258-0001

Sr. Executive Vice President

Signatures

/s/ Arlie R. Nogay, Attorney-in-Fact 03/18/2010

**Signature of Reporting Person Da

Explanation of Responses:

- * 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).
- Awards of Restricted Stock as part of annual long term incentive award for 2010 under The Bank of New York Mellon Corporation
 (1) Long-Term Incentive Plan. All shares cliff vest on March 16, 2013, with the vesting of 23,682 of such shares also subject to certain performance criteria.
- (2) Holdings reported as of 12/31/2009.
- (3) Grant of Stock Options as part of annual long term incentive award for 2010 under The Bank of New York Mellon Corporation Long Term Incentive Plan. Grant becomes exercisable in annual installments of one-fourth each beginning on date indicated.
- (4) Not Applicable.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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