Edgar Filing: Peetz Karen B - Form 4

Peetz Karen Form 4											
February 27,	Л) STATES					NGE	COMMISSION	OMB AF OMB Number:	PROVAL 3235-0287	
Check th if no long subject to Section 1 Form 4 o Form 5 obligation may cont <i>See</i> Instru 1(b).	6. Filed pu ns Section 17	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES 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							Expires: Estimated a burden hour response	Expires: January 31, 2005 Estimated average burden hours per	
(Print or Type I	Responses)										
1. Name and Address of Reporting Person <u>*</u> Peetz Karen B			2. Issuer Name and Ticker or Trading Symbol Bank of New York Mellon CORP [BK]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
	COF NEW YOR CORPORATION		3. Date of (Month/E 02/23/2	-	ansaction			Director X Officer (give below) Vie		Owner r (specify	
				Amendment, Date Original (Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
	K, NY 10286							Form filed by M Person	lore than One Re	porting	
(City)	(State)	(Zip)	Tabl	e I - Non-E	Derivative S	Securi	ties Ac	quired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	(Month/Day/Year) Execution Date, if		3.4. Securities Acquired Transactior(A) or Disposed of CodeCode(D)(Instr. 8)(Instr. 3, 4 and 5)(A) orCodeVAmount(D)Price			of 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock	02/23/2012			А	85,121 (1)	А	\$0	209,937.0165	D		
			2								

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

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 control number.

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

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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. Transactic Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount Underlying Securitie (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amou Numb Shares
EMP OPT-Right to Buy-Type NQ 2/23/2012	\$ 22.03	02/23/2012		A <u>(2)</u>	130,323	02/23/2013	02/22/2022	Common Stock	130,:

Reporting Owners

Reporting Owner Name / Address	Relationships				
	Director	10% Owner	Officer	Other	
Peetz Karen B THE BANK OF NEW YORK MELLON CORPORATION ONE WALL STREET NEW YORK, NY 10286			Vice Chairman		
Signatures					

/s/Arlie R. Nogay, 02/27/2012 Attorney-in-Fact

**Signature of Reporting Person

Date

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).

Award of Restricted Stock Units under The Bank of New York Mellon Corporation Long-Term Incentive Plan. Units vest in annual increments of one-third beginning on first anniversary of the award and are subject to forfeiture if certain performance criteria are not

(1) achieved for 2012. A portion of the units may also be forfeited prior to vesting based on ongoing performance adjustment criteria. Vested units will be settled in Common Stock.

Grant of Stock Options under the BNY Mellon Long-Term Incentive Plan. Grant becomes exercisable in annual installments of (2) one-fourth each beginning on date indicated. A portion of the options may be forfeited prior to vesting based on ongoing performance

adjustment criteria. (3) 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.