

Bank of New York Mellon CORP
 Form 4
 July 25, 2007

FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
 Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0287
 Expires: January 31, 2005
 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).

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 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person *
 REIN CATHERIN A

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)

(Last) (First) (Middle)

3. Date of Earliest Transaction (Month/Day/Year)
 07/23/2007

Director 10% Owner
 Officer (give title below) Other (specify below)

METLIFE, INC., 27-01 QUEENS PLAZA NORTH

(Street)

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)
 Form filed by One Reporting Person
 Form filed by More than One Reporting Person

LONG ISLAND CITY, NY 11101

(City) (State) (Zip)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 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 Ownership: Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price
Common Stock (Par Value \$0.01)	07/23/2007		P		13,000	A	\$ 44.64
Common Stock (Par Value \$0.01)	07/23/2007		P		9,391	A	\$ 44.65
Common Stock (Par Value \$0.01)	07/23/2007		P		1,940	A	\$ 44.76

Edgar Filing: Bank of New York Mellon CORP - Form 4

\$0.01)

Common Stock (Par Value	07/23/2007	P	3,900	A	\$ 44.77	115,005.1374	D
-------------------------------	------------	---	-------	---	-------------	--------------	---

\$0.01)

Common Stock (Par Value	07/23/2007	P	1,900	A	\$ 44.78	116,905.1374	D
-------------------------------	------------	---	-------	---	-------------	--------------	---

\$0.01)

Common Stock (Par Value	07/23/2007	P	1,100	A	\$ 44.79	118,005.1374	D
-------------------------------	------------	---	-------	---	-------------	--------------	---

\$0.01)

Common Stock (Par Value	07/23/2007	P	4,500	A	\$ 44.8	122,505.1374	D
-------------------------------	------------	---	-------	---	---------	--------------	---

\$0.01)

Common Stock (Par Value	07/23/2007	G	35,731	D	\$ 0	86,774.1374	D
-------------------------------	------------	---	--------	---	------	-------------	---

\$0.01)

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.

SEC 1474
(9-02)

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. Transaction Code (Instr. 8)	5. Number of Derivative 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 of Underlying Securities (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr
				Code	V (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
REIN CATHERIN A METLIFE, INC. 27-01 QUEENS PLAZA NORTH LONG ISLAND CITY, NY 11101		X		

Signatures

Bart R. Schwartz	07/25/2007
**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).

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.