GILLIS RUTH ANN M

Form 4

October 03, 2017

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB Number:

3235-0287

Expires:

5. Relationship of Reporting Person(s) to

(Check all applicable)

Issuer

January 31, 2005

0.5

Estimated average burden hours per

OMB APPROVAL

response...

if no longer subject to Section 16. Form 4 or Form 5 obligations

Check this box

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 See Instruction

2. Issuer Name and Ticker or Trading

KEYCORP /NEW/ [KEY]

3. Date of Earliest Transaction

Symbol

1(b).

(Last)

(Print or Type Responses)

GILLIS RUTH ANN M

1. Name and Address of Reporting Person *

(First)

(Middle)

may continue.

C/O KEYCORP, 127 PUBLIC SQUARE		(Month/Day/Year) 09/29/2017				_X_ Director Officer (give below)		6 Owner er (specify	
			endment, Date Original nth/Day/Year)			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
CLEVELAN					Form filed by More than One Reporting Person				
(City)	(State) (Zip)	Table	e I - Non-D	erivative S	ecurit	ies Acq	quired, Disposed o	of, or Beneficia	lly Owned
1.Title of Security (Instr. 3)	any	eemed tion Date, if h/Day/Year)	3. Transaction Code (Instr. 8)	4. Securit on(A) or Dis (D) (Instr. 3, 4	sposed	of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	
Common Shares	09/29/2017		M	11,495	A	<u>(1)</u>	22,045	D	
Common Shares							5,000	I	By Trust
Common Shares							12,900	I	By Trust
Common Shares							14,938	I	By GRAT
Common Shares							7,900	I	By GRAT

Common Shares 2,000 I $\frac{\text{By GRAT}}{\frac{(4)}{2}}$

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.

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. Transactio Code (Instr. 8)			6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Deferred Shares	<u>(1)</u>	09/29/2017		M		11,495	09/29/2017	09/29/2017	Common Shares	11,495

Reporting Owners

Reporting Owner Name / Address	Relationships						
1 6	Director	10% Owner	Officer	Other			
GILLIS RUTH ANN M							
C/O KEYCORP	X						
127 PUBLIC SQUARE	Λ						
CLEVELAND, OH 44114							

Signatures

Carrie A. Benedict POA for Ruth Ann M.
Gillis
10/03/2017

**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).
- (1) Each Deferred Share was the economic equivalent of one KeyCorp Common Share.
- (2) These shares are held in a living trust. The reporting person is trustee of the trust.
- (3) These shares are held in a trust for the benefit of the reporting person's children. The reporting person's spouse is trustee of the trust.

(4)

Reporting Owners 2

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These shares are held in a grantor retained annuity trust for the benefit of the reporting person and the reporting person's children. The reporting person is the trustee of the trust.

(5) Includes approximately 767 dividend-equivalent Deferred Shares accrued between June and September 2017.

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.