Edgar Filing: Midkiff Mark W - Form 4

Midletf Maale W

Form 4											
February 20, 201	UNITE	UNITED STATES SECURITIES AND EXCHANGE COMMISSION								OMB APPROVAL OMB 3235-0287 Number:	
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. <i>See</i> Instruction 1(b).	STATE Filed p Section 1	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							burden hou response	Estimated average burden hours per response 0.5	
(Print or Type Respo	nses)										
1. Name and Address of Reporting Person <u>*</u> Midkiff Mark W			2. Issuer Name and Ticker or Trading Symbol KEYCORP /NEW/ [KEY]				g	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) (First) (Middle) C/O KEYCORP, 127 PUBLIC SQUARE			3. Date of Earliest Transaction (Month/Day/Year) 02/18/2019					Director 10% Owner X Officer (give title Other (specify below) below) Chief Risk Officer			
				ndment, Date Original h/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 			
CLEVELAND,	OH 44114							Person	More than One Re	eporting	
(City)	(State)	(Zip)	Table	e I - Non-Do	erivative S	ecurit	ties Ac	quired, Disposed o	f, or Beneficial	lly Owned	
	Fransaction E onth/Day/Ye	any	med on Date, if Day/Year)	3. Transactic Code (Instr. 8) Code V	4. Securit mAcquired Disposed (Instr. 3, 4)	(A) of (D)	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								12,458	D		

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)

Edgar Filing: Midkiff Mark W - Form 4

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)	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)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Restricted Stock Units	<u>(1)</u>	02/18/2019		А	25,128	(2)	(2)	Common Shares	25,128
Option to Buy	\$ 17.51	02/18/2019		А	35,830	<u>(3)</u>	02/18/2029	Common Shares	35,830

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Midkiff Mark W C/O KEYCORP 127 PUBLIC SQUARE CLEVELAND, OH 44114			Chief Risk Officer				
Signatures							
Carrie A. Benedict POA for Ma Midkiff	ark W.	(02/20/2019				

<u>**</u>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 restricted stock unit represents the right to receive one KeyCorp common share at vesting.

(2) The restricted stock units, granted on February 18, 2019, vest in four equal annual installments beginning on February 17, 2020.

(3) The options to buy, granted on February 18, 2019, vest in four equal annual installments beginning on February 17, 2020.

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.