Edgar Filing: KEYCORP /NEW/ - Form 4

KEYCORP /	'NEW/										
Form 4											
February 17,	2016										
FORM	4							~ ~		PPROVAL	
	UNITE	D STATES		ITIES A hington,			NGE (COMMISSION	OMB Number:	3235-0287	
Check thi									Expires:	January 31,	
subject to	if no longer subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP					NERSHIP OF	Estimated average				
Section 1	. SECURITIES						burden hours per				
Form 4 or									response	•	
Form 5 obligation	20	•						ge Act of 1934,			
may cont				•	•	- ·		f 1935 or Sectio	n		
See Instru 1(b).	uction	30(n)) of the Inv	vestment	Company	y Act	01 19	40			
(Print or Type F	Responses)										
1 Name and A	ddress of Report	ing Person *	2.1	N	71 , 1	F 1'		5. Relationship of	Reporting Per	son(s) to	
Devine Den		2. Issuer Name and Ticker or Trading Symbol KEYCORP /NEW/ [KEY]				Issuer					
						•					
						1		(Check all applicable)			
(Last) (First) (Middle) C/O KEYCORP, 127 PUBLIC SQUARE				3. Date of Earliest Transaction (Month/Day/Year) 02/15/2016				Director	109	6 Owner	
			-					X_Officer (give title Other (specify below) Co-Pres., Key Community Bank			
	(Churant)		4 10 4	1 (D					-		
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person 			
			rneu(mon								
CLEVELAN	ND, OH 44114	4							More than One R		
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securi	ties Ac	quired, Disposed of	f, or Beneficia	lly Owned	
1.Title of	2. Transaction			3.	4. Securi			5. Amount of	6. Ownership		
Security	(Month/Day/Y		ion Date, if		onAcquired				Form: Direct		
(Instr. 3)		any (Month	/Day/Year)	Code (Instr. 8)	Disposed (Instr. 3.			Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership	
		(,	((-)	Following	(Instr. 4)	(Instr. 4)	
						(A)		Reported			
						or		Transaction(s) (Instr. 3 and 4)			
C				Code V	Amount	(D)	Price	(instr. 5 and 4)			
Common								51,147	D		
Shares											

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. Transactio Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed o (D) (Instr. 3, 4, and 5)	Expiration I (Month/Day	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>	02/15/2016		А	22,878	(2)	(2)	Common Shares	22,878	
Option to Buy	\$ 10.49	02/15/2016		А	28,037	(3)	02/15/2026	Common Shares	28,037	

Reporting Owners

Reporting Owner Name / Address	ess						
	Director	10% Owner	Officer	Other			
Devine Dennis A C/O KEYCORP 127 PUBLIC SQUARE CLEVELAND, OH 44114			Co-Pres., Key Community Bank				
Signatures							
Carrie A. Benedict POA for Den Devine	nis A.		02/17/2016				
**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 15, 2016, vest in four equal annual installments beginning on February 17, 2017.

(3) The options to buy, granted on February 15, 2016, vest in four equal annual installments beginning on February 17, 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.