Edgar Filing: Koehler William R - Form 4

Koehler Will Form 4												
February 22,	1 /								PPROVAL			
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549									3235-0287			
Check thi if no long subject to Section 1	ser STATEMENT ()F CHANGE	CS IN B	Number: Expires: Estimated a	January 31, 2005 d average							
Section 16.SECURITIESLotinated averageForm 4 orForm 5burden hours per response0.5Form 5Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations may continue.Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 19400.51(b).1(b).1(b).1(b).1(b).												
(Print or Type F	Responses)											
1. Name and A Koehler Wil	ddress of Reporting Person <u>*</u> liam R	Symbol	2. Issuer Name and Ticker or Trading Symbol KEYCORP /NEW/ [KEY]					5. Relationship of Reporting Person(s) to Issuer				
(Last)	(First) (Middle)	3. Date of Ear	liest Tra	L .			(Chec	k all applicable	2)			
C/O KEYCO SQUARE	ORP, 127 PUBLIC	(Month/Day/Y 02/19/2011	Month/Day/Year))2/19/2011					Director 10% Owner X Officer (give title Other (specify below) below) President, Key Community Bank				
	4. If Amendm Filed(Month/D	endment, Date Original nth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Person						
CLEVELAND, OH 44114 Form filed by More than One Reporting Person												
(City)	(State) (Zip)					-	uired, Disposed of		-			
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, if any (Month/Day/Year)			3. 4. Securities Acquired Transaction(A) or Disposed of Code (D) (Instr. 8) (Instr. 3, 4 and 5) (A)				Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect Beneficial			
		Co	ode V	Amount	or (D)	Price	Transaction(s) (Instr. 3 and 4)					
Common Shares	02/19/2011	I	D	9,235	D	\$0	45,487	D				
Common Shares	02/19/2011]	F	1,026	D	\$ 9.53	44,461	D				
Common Shares	02/20/2011	1	D	2,171	D	\$0	42,290	D				
Common Shares	02/20/2011]	F	694	D	\$ 9.53	41,596	D				
Common Shares							8,611	I	Savings Plan (1)			

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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)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Tit	le and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	onNumber	Expiration D	ate	Amou	unt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	rlying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivativ	e		Secur	ities	(Instr. 5)	Bene
	Derivative				Securities	3		(Instr.	. 3 and 4)		Owne
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
						Date	Expiration	T . 1	or		
						Exercisable	Date	Title N	Number		
				<u> </u>	(A) (D)				of		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
Koehler William R C/O KEYCORP 127 PUBLIC SQUARE CLEVELAND, OH 44114			President, Key Community Bank			
Signatures						
Steven N. Bulloch POA for Wi Koehler	lliam R.		02/22/2011			

<u>**</u>Signature of Reporting Person 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) As of December 31, 2010.

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.

Date