KEYCORP /NEW/ Form 4 April 01, 2009

## 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:

January 31, 2005

0.5

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**OMB APPROVAL** 

response...

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

Check this box

obligations may continue. See Instruction

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

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * STEVENS THOMAS G			2. Issuer Name and Ticker or Trading Symbol KEYCORP /NEW/ [KEY]			5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)			
(Last)	(First)	(Middle)	3. Date of	Earliest Tra	nsaction	(Clied	ck an applicable	<del>-</del> )	
C/O KEYCO SQUARE	PRP, 127 PUB	LIC	(Month/Day/Year) 03/31/2009			X Director X Officer (given below)		er (specify	
		4. If Amendment, Date Original			6. Individual or Joint/Group Filing(Check				
			Filed(Mon	th/Day/Year)		Applicable Line) _X_ Form filed by	1 0		
CLEVELAN	D, OH 44114					Form filed by I Person	More than One Re	eporting	
(City)	(State)	(Zip)	Table	e I - Non-Do	erivative Securities Acq	uired, Disposed o	f, or Beneficial	lly Owned	
1.Title of Security	2. Transaction I (Month/Day/Ye			3. Transactio	4. Securities Acquired n(A) or Disposed of	5. Amount of Securities	6. Ownership Form: Direct	7. Nature of Indirect	

					<del>-</del>		· -
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any	3. Transactio	4. Securities Acquired on(A) or Disposed of (D)	5. Amount of Securities Beneficially	6. Ownership Form: Direct (D) or	7. Nature of Indirect Beneficial
		(Month/Day/Year)	(Instr. 8)	(Instr. 3, 4 and 5)	Owned	Indirect (I)	Ownership
					Following	(Instr. 4)	(Instr. 4)
				(A)	Reported		
				or	Transaction(s) (Instr. 3 and 4)		
			Code V	Amount (D) Price	(msu. 3 and 4)		
Common Shares	04/01/2009		M	3,005 A \$ 7.87	183,441	D	
Common Shares					1,421	I	Savings Plan (1)

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

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# 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 ion Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		of Derivative Expiration Date Gecurities (Month/Day/Year) Acquired A) or Disposed of D) Instr. 3, 4,		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
Phantom Shares	\$ 7.87 (2)	04/01/2009		M		3,005	04/01/2009	04/01/2009	Common Shares	3,005
Phantom Shares	\$ 7.87	04/01/2009		F		1,411	04/01/2009	04/01/2009	Common Shares	1,411

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
<b>FS</b>	Director	10% Owner	Officer	Other			
STEVENS THOMAS G C/O KEYCORP 127 PUBLIC SQUARE CLEVELAND, OH 44114	X		Vice Chair and CAO				

## **Signatures**

Steven N. Bulloch POA for Thomas C.
Stevens

04/01/2009

\*\*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) As of December 31, 2008.
- (2) Conversion to common shares is on a one to one basis.
- (3) Shares remaining in Automatic Deferral Plan after distribution and tax withholding.

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.

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