## Edgar Filing: KEYCORP /NEW/ - Form 4

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Form 4	NEW/									
March 14, 200									PPROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549						-	3235-0287			
Check this		x STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES							January 31,	
if no longe subject to Section 16 Form 4 or	SIAIEN								2005 average ırs per 0.5	
Form 5 obligations may contir <i>See</i> Instruc 1(b).	Section 17(	a) of the		ility Hold	ing Com	pany Act	age Act of 1934, of 1935 or Sectio 940	on		
(Print or Type Re	esponses)									
1. Name and Address of Reporting Person <u></u> <u></u> <u></u> MEYER HENRY L III			2. Issuer Name <b>and</b> Ticker or Trading Symbol KEYCORP /NEW/ [KEY]				5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (1	Middle)	3. Date of Earliest Transaction				(Check all applicable)			
KEYCORP, 127 PUBLIC SQUARE			(Month/Day/Year) 03/11/2005				_X_ Director 10% Owner _X_ Officer (give title Other (specify below) below) Chair and CEO			
			endment, Date Original nth/Day/Year)			<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>				
CLEVELAN	D, OH 44114						Person	More than One K	eporting	
(City)	(State)	(Zip)	Table	e I - Non-De	erivative S	ecurities A	cquired, Disposed o	of, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Dat (Month/Day/Year)	Executio any	med on Date, if Day/Year)	3. Transactic Code (Instr. 8) Code V	4. Securit onAcquired Disposed (Instr. 3, 4 Amount	(A) or 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)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Shares							220,509	D		
Common Shares							157,369	Ι	Savings and Excess Savings Plans (1)	

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.

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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. Transactio Code (Instr. 8)	5. Number of pDerivative 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
Phantom Shares (2)	\$ 0 <u>(3)</u>	03/11/2005		А	19,336	03/11/2006	03/11/2008	Common Shares	19,336

# **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships					
	Director	10% Owner	Officer	Other		
MEYER HENRY L III KEYCORP 127 PUBLIC SQUARE CLEVELAND, OH 44114	Х		Chair and CEO			
Signatures						
Steven N. Bulloch POA for Henry	y L.	03/1	4/2005			

Meyer III

Date

## **Explanation of Responses:**

\*\*Signature of Reporting Person

- 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, 2004.
- Under Automatic Deferral Plan, a portion of compensation is deferred over three year period and paid in treasury shares or transferred to (2)Deferred Compensation Plan.
- (3) Conversion to common shares is on a one-to-one basis.

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.