FORM 4

Check this box if no longer subject

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL							
OMB Number: 3235-0287							
Estimated average burden							
hours ner response:							

to Section 16. Form 4 or Form 5 obligations may continue. See Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 Instruction 1(b).

1. Name and Address of Reporting Person*  Thirot Olivier						2. Issuer Name and Ticker or Trading Symbol  KELLY SERVICES INC [ KELYA ]								(Che	ck all app Direc	,	ng Pers	son(s) to Is 10% Ov Other (s	wner	
(Last) 999 WES	(Fir	st) (t AVER ROAD		3. Date of Earliest Transaction (Month/Day/Year) 02/15/2022								X	specify							
(Street) TROY (City)	MI (St	ate) (2	8084 Zip)	on Darius	4. If Amendment, Date of Original Filed (Month/Day/Year)  ative Securities Acquired, Disposed of, or Benef									6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person Form filed by More than One Reporting Person						
1. Title of Security (Instr. 3)  2. Transactic Date (Month/Day/			on	n 2A. Deemed Execution Date,		3 T C	3. Transaction Code (Instr. 8)  4. Securities Disposed Of 5)			Acquire	ed (A) o	r 5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership				
									Code	v	Amount	(A) oi (D)	Price	)	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Class A Common Stock, Par Value \$1				02/15/20	)22				Α		10,129(1)	A	\$21	.77	99,06	52.0944		D		
Class A Common Stock, Par Value \$1 02			02/15/20	)22				Α		18,812 <sup>(2)</sup>	A	\$0	(3)	117,8	117,874.0944		D			
Class A Common Stock, Par Value \$1 02/15/20				22			A		3,002(4)	A	\$0	(3)	120,876.0944(5)			D				
		Tal	ole II								oosed of, convertib				Owne	d				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execu	eemed ution Date, th/Day/Year)	4. Transa Code 8)				6. Date Exe Expiration I (Month/Day/		ate	7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		Di Si (II	Price of derivative security nstr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y C	.0. Ownership Form: Direct (D) or Indirect I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A) (I		Date Exercisable		Expiration Date	Title	Amount or Number of Shares	ber						

## **Explanation of Responses:**

- 1. Restricted stock award granted under the Kelly Services Equity Incentive Plan. Shares vest in equal increments over four (4) years on the anniversary date of the grant.
- 2. Restricted stock units granted following satisfaction of specified performance criteria for 2021. Shares vest in four (4) equal increments beginning with date they were certified as earned by the Compensation and Talent Management Committee, February 15, 2022 and on the next three (3) anniversaries of that date.
- 3. Each restricted stock unit represents a contingent right to receive one share of Kelly Services Class A common stock.
- 4. Restricted stock units granted following satisfaction of specified performance criteria for 2021. One half (50%) of the shares vested on February 15, 2022 and one half (50%) of shares will vest in an additional two (2) years following certification by the Compensation and Talent Management Committee.
- 5. Includes shares acquired pursuant to dividend reinvestment.

/s/ Cynthia D. Mull, attorneyin-fact for Mr. Thirot

02/17/2022

\*\* Signature of Reporting Person Date

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

- \* 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.