FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden

| Section obligat | this box if no lo n 16. Form 4 or ions may contin tion 1(b). | | STAT | | ed pursi | DF CHAN | n 16(a |) of the Sec | curitie | es Exchan | ge Act of f | | RSHIF | 2 | Estima | Number: ated aver per respo | age burden | 0.5 |
|-------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------|--------------------------------------------|-------------------------------------------------------------|----------------------------------------------------------|---------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|------------------------------------------------------------|----------------------------------------------------------------|----------------------------------|------------------|-----------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|----------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------------------------------|----------------------------------------------------------------------|
| 1. Name and Address of Reporting Person [*] CUBBIN ROBERT S | | | | | 2. Issuer Name and Ticker or Trading Symbol KELLY SERVICES INC [KELYA] | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
| | | | | | _ | | | | | | | | X | Director Officer (give title | | 10% Owne Other (spe | | · . |
| (Last) (First) (Middle) 999 W. BIG BEAVER ROAD | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/18/2022 | | | | | | | | | below) | ve uue | | below) | Jechy |
| (Street) TROY MI 48084 | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | í | |
| (City) | (: | State) | (Zip) | (Zip) | | | | | | | | | | | | | | J |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | |
| D | | | | 2. Transaction Date (Month/Day/Year) | | ar) if any | 2A. Deemed Execution Date, if any (Month/Day/Year | | Transaction Disp Code (Instr. | | ties Acqui d Of (D) (In | | | 1d 5) 5. Amount o Securities Beneficially Following R Transaction | | 6. Own Form: (D) or I (I) (Inst | Direct li ndirect E r.4) C | 7. Nature of ndirect Beneficial Ownership |
| | | | | | | | | | v | Amount | (A) (D) | | rice | (Instr. 3 and | | | (| Instr. 4) |
| Class A Common Stock, Par Value \$1 | | | | | | | | | | | | | | 10,83 | 30 | | D | |
| 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 of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title a Securitie Derivativ (Instr. 3 a | s Under e Securi | ying Derivative | | 9. Number of derivative Securities Beneficially Owned Following Reported | | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | Code | v | (A) | (D) | Date Exercisabl | | xpiration ate | Title | Amou Numb Share | er of | | Transaction(s) (Instr. 4) | | | |
| Class A Common Stock, Par Value \$1 | \$1 | 05/18/2022 | | A | | 6,534.2394 ⁽¹⁾ | | 05/10/201 | 7 0 | 5/10/2027 | Class A Common Stock, Par Value \$1 | 6,53 | 4.2394 | \$19.13 | 35,191 | .9045 | I | by Issuer's Non- Employee Director Deferred Comp Plan |

Explanation of Responses:

1. Shares deferred pursuant to Kelly Services, Inc. Non-Employee Directors Deferred Compensation Plan.

/s/ Cynthia D. Mull, attorney-in-05/19/2022 fact for Mr. Cubbin

** 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.