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 | | | | | | | | |
| hours per response: | 0.5 | | | | | | | |

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person* RAMSEY ANTONINA M | | | | | | 2. Issuer Name and Ticker or Trading Symbol KELLY SERVICES INC [KELYA] | | | | | | | | | heck all ap Dire | onship of Reporting F Il applicable) Director Officer (give title below) Senior Vice | | g Person(s) to Issuer 10% Owner Other (specify below) ce President | |
|---|---|--|---|-------------------|---|---|---|---------------------------|---|-----|---------------------|---|-------|---------------------------|---|--|---|--|--|
| (Last) (First) (Middle) 999 W BIG BEAVER RD | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 12/01/2014 | | | | | | | | | | | | | | |
| (Street) TROY (City) | M] | | 18084 Zip) | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | ne) X Fori Fori | dual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| | | Tabl | e I - Nor | n-Deriv | ative | Se | curitie | s Ac | quired, | Dis | posed o | f, or l | Bene | eficia | lly Own | ed | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da | | | | | | Execution Date, | | | Code (Instr. 5) | | | | | nd Secur Benef Owne | icially d Following | Form (D) o | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | | | Code | v | Amount (A) or (D) | | Price | Trans | orted nsaction(s) tr. 3 and 4) | | | (Instr. 4) | |
| Class A Common Stock,Par Value \$1 | | | 12/01 | 1/2014 | | | | F | | 948 | D : | | \$15 | .2 | 57,113 | | D | | |
| | | Та | | | | | | | | | sed of, onvertib | | | | / Owned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deeme Execution if any (Month/Da | Date, sy/Year) | 4. Transacti Code (Ins 8) | | of Deriv Secu Acqu (A) o Dispo | r osed) r. 3, 4 | 6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Expiration Date | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. : and 4) Amount or Number of Title Shares | | ount nber | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | | 0. Ownership orm: Direct (D) or Indirect) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |

Explanation of Responses:

Antonina M Ramsey
by Wendy Lauzano-Hertz,
Attorney-in-Fact

12/02/2014

** Signature of Reporting Person Da

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.