FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549	
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	O WID ALL I K
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:

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

OMB APPROVAL							
OMB Number: 3235-0287							
Estimated average burden							
hours per response:	0.5						

Name and Address of Reporting Person*     Polehna James				2. Issuer Name and Ticker or Trading Symbol KELLY SERVICES INC [ KELYA ]								ationship of Reporti k all applicable) Director		ng Person(s) to Is 10% Ov Other (s		wner			
(Last) (First) (Middle) 999 WEST BIG BEAVER ROAD					3. Date of Earliest Transaction (Month/Day/Year) 08/08/2021							X	below	fficer (give title elow) Corporate S		below)	specify		
(Street) TROY (City)	MI (Sta		28084 Zip)		4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Indi Line) X	Form Form	al or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or E	Benef	icially	/ Own	ed			
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day			Execution Date,		3. Transaction Disposed Of (D) (Instr. 3, 5)			4 and Securi Benefi		ties cially Following	Forr (D)	m: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)						
									Code	v	Amount	(A) (D)	or Pr	ice	Transa	ction(s) 3 and 4)			(111341.4)
Class A Common Stock, Par Value \$1 08/08/2					2021 08		8/09/2021		F		358	D	\$	22.67	7 18,540.92			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)  3. Deemed Execution Date, if any (Month/Day/Year)		4. Transa Code ( 8)	(Instr. Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Expiration Exercisable Date		7. Title and Amount of Securities Underlying Derivative Security (Ins: 3 and 4)  Amou or Numb of Title Share		De Se (In	Price of rivative curity str. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			

**Explanation of Responses:** 

Cynthia D. Mull, attorney-infact for Mr. Polehna

08/09/2021

\*\* Signature of Reporting Person

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.