U.S. EQUAL EMPLO 2023 EMPLOYER IN												OMB C	Revised ontrol Nu	Form 100 08/2023 umber: 30 ite: 11/30/			
				FION A CONSOL				1									
		SEC	FION E	B – EMP	LOYE	R IDEN	TIFICA	ATION									
OFS COMPANY ID 0965657	EMPLOYER NAME KEYCORP																
ADDRESS							C	ITY/TOV	WN			STATE ZIP CODE					
127 PUBLIC SQUARE CLEVELAND									OH		441	14					
SECTION C - HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)																	
HQ/ESTABLISHMENT-LEVEL UNIT ID HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME																	
HEADQUARTERS OR ESTABLISHME	ENT-LEV	/EL ADI	DRESS				С	ITY/TOV	WN			STATE ZIP CODE					
					346542	2451				D	•		·				
X YES (Employer Is Eligible				- EMPL oyer Is N						NO LO	NGER	IN BUS	INESS				
SEC	CTION			L CONI					(if applic	able)							
_			-	ntity ID (<u>_</u>	-											
YES (Single-Establishm	-	-															
X YES (F	Ieadqua	rters is	Federal	Contrac	tor) 🗌	YES (N	lon-Hea	dquarte	rs Establ	ishment	is Feder	ral Conti	ractor)				
		X X	ES (O	ne or Mo	ore Nor	n-Headqu	uarters H	Establis	hments i	s Federa	al Contra	actor)					
				ONG-1 Offices o													
	SF	ECTIO	N H – V	VORKF	ORCE	DEMO	GRAPI	HIC DA	ATA								
							Race/E		-								
		oanic atino			M	lale	Not	Hispa	nic or L	atino.	For	nale			-		
											1		ø	-			
JOB CATEGORIES	Male	Female	White	Black or African American	Asian	Native Hawaiian or Other Pacific Islander	American Indian or Alaska Native	Two or More Races	White	Black or African American	Asian	Native Hawaiian or Other Pacific Islander	American Indian or Alaska Native	Two or More Races	Row Total		
Executive/Senior Level Officials and Managers	2	3	67	3	7	0	0	1	25	3	1	0	0	2	114		
First/Mid-Level Officials and Managers Professionals	94 94	116 126	1821 1885	107 147	165 178	8	10 5	15 56	1558 1870	134 273	146 180	4	8	31 38	4217 4861		
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Sales Workers	118	148	1142	83	60	6	9	27	943	81	95	6	4	25	2747		
Administrative Support Workers Craft Workers	158 0	364 0	800 0	157 0	66 0	9	9 0	39 0	2946 0	579 0	219 0	21 0	30 0	101 0	5498 0		
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Laborers and Helpers Service Workers	0	0	0 15	0	0	0	0	0	0	0	0	0	0	0	0 22		
CURRENT 2023 REPORTING YEAR TOTAL	466	757	5730	500	476	24	33	138	7345	1070	642	32	49	197	17459		
PRIOR 2022 REPORTING YEAR TOTAL	496	821 SECTI	6173	528 WORK	481 FORC	16 E SNAP	26 SHOT	148 PERIO	8125	1192	677	33	53	229	18998		
				11/19/2	2023 -	12/2/20	23										
SECTION J Not Applicable	– HEA	DQUAI	RTERS	S OR ES	TABL	ISHME	NT-LE	VEL CO	OMME.	NTS (op	tional)						

U.S. 202	Re OMB Cont	EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026			
	SECTION K – OFFICIAL CI	ERTIFICATION OF SUBMISSION	N		
		IDENTIFICATION			
OFS COMPANY 0965657	ID	EMPLOYER NAME KEYCORP			
	ADDRESS	CITY/TOWN	STATE	ZIP CODE	
	127 PUBLIC SQUARE	CLEVELAND	ОН	44114	
		OLEVELAND	011 44114		
	CERTIFICATION	COMMENTS (optional)			
No Certification Comm	ents Provided				
	CEDTIFICAT	TON STATEMENT			
"I cartify that the infor	mation, including any workforce demographic		et and true to the he	st of my knowledge	
	ad was prepared in conformity with the direction			si oj my knowieug	
				001	
Knowin	gly and willfully false statements on this repo		, The 18, Section I	1001.	
	DATE OF (CERTIFICATION			
	5/13/2024	9:32 AM [EST]			
NY.		ERTIFYING OFFICIAL			
Nai	me of Employer's Certifying Official	Title of C	Certifying Official		
	Stacie Moutsios	Sr. HR Con	npliance Analyst		
F	mail Address of Certifying Official	Telephone Num	ber of Certifying Official		
L	shan Address of Certifying Official	Telephone Null	iber of certifying Official		
sta	cie_moutsios@keybank.com	216-	689-3407		
	PRIMARY POINT OF CONTACT (POC	C) FOR EEO-1 COMPONENT 1 REPO	RTING		
	Name of Primary POC		bloyer of Primary POC		
	Stacie Moutsios		npliance Analyst		
	SIACIE IVIOUISIUS				
			eyCorp		
	Email Address of Primary POC	Telephone N	umber of Primary POC		
-1-	cia mauteias@koutaatk.com	040	SPD 2407		
sta	cie_moutsios@keybank.com	216-	689-3407		