FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, D.C. 205 | 49 |
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| | 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

| Name and Address of Reporting Person* Bouque Amy J | | | | | 2. Issuer Name and Ticker or Trading Symbol KELLY SERVICES INC [KELYA] | | | | | | | (Chec | k all app Direc | chip of Reporting applicable) rector ficer (give title | | rson(s) to Is 10% O Other (| wner | | |
|--|---|--|------------------------------|-----------------|---|---|---|---|---|-------------------------|------------|--|--|---|--|--|-------------|-------------|-------|
| (Last) (First) (Middle) 999 WEST BIG BEAVER ROAD | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 12/15/2021 | | | | | | | | X | below | | e Pro | below) | opeoy |
| (Street) TROY (City) | MI (Sta | | .8084 Zip) | | 4. If A | | | | | | | | | 6. Indi Line) X | Form | Joint/Group filed by One filed by Mo | e Rep | orting Pers | on |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day | | | | Execution Date, | | | 3. Transaction Code (Instr. 8) 4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5) | | | 3, 4 and Secur Benef | | rities Fe ficially (E ed Following (I) | | wnership n: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | |
| | | | | | | | Code | v | Amount | (A) (D) | or Pr | ice | Transa | nsaction(s) tr. 3 and 4) | | | (111341. 4) | | |
| Class A Common Stock, Par Value \$1 | | | 12/15/2 | 2021 | | | | F | | 418 | 3 D \$ | | 17.84 | 8,322 | | | 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) |) if any (Month/Day/Year) | | 4. Transaction Code (Instr. 8) S. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | Expiration Date (Month/Day/Year) | | Amount of Securities Underlying Derivative Security (In 3 and 4) | | De Se (In: | Price of rivative curity str. 5) | 9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | y | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |

Explanation of Responses:

/s/ Cynthia D. Mull, attorney-12/16/2021 in-fact for Ms. Bouque

** 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.