

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5
KeyCorp Advocates Fund-Federal

ADDRESS (number and street) 127 Public Square
OH-01-27-0200
 Check if different than previously reported. (ACC) Cleveland OH 44114

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00399063

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- | | | | |
|--------------------------------------|--------------------------------------|---|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input checked="" type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

(c) 12-Day PRE-Election Report for the:

<input type="checkbox"/> Primary (12P)	<input type="checkbox"/> General (12G)	<input type="checkbox"/> Runoff (12R)
<input type="checkbox"/> Convention (12C)	<input type="checkbox"/> Special (12S)	

Election on M M M / D D D / Y Y Y Y Y Y in the State of

(d) 30-Day POST-Election Report for the:

<input type="checkbox"/> General (30G)	<input type="checkbox"/> Runoff (30R)	<input type="checkbox"/> Special (30S)
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Election on M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period 08 / 01 / 2020 through 08 / 31 / 2020

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Pugliese, Christopher, , ,

Type or Print Name of Treasurer

Signature of Treasurer Pugliese, Christopher, , , [Electronically Filed] Date 09 / 11 / 2020

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office Use Only									
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

KeyCorp Advocates Fund-Federal

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2020"/>	<input type="text" value="11232.24"/>	<input type="text" value="11232.24"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="29135.99"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="2280.38"/>	<input type="text" value="20205.13"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="31416.37"/>	<input type="text" value="31437.37"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="3.00"/>	<input type="text" value="24.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="31413.37"/>	<input type="text" value="31413.37"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

KeyCorp Advocates Fund-Federal

Report Covering the Period: From: M M / D D / Y Y Y Y
08 / 01 / 2020 To: M M / D D / Y Y Y Y
08 / 31 / 2020

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1823.78	13242.60
(ii) Unitemized	456.60	6962.53
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	2280.38	20205.13
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	2280.38	20205.13
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	2280.38	20205.13
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	2280.38	20205.13

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	3.00	24.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	3.00	24.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	3.00	24.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3.00	24.00

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	2280.38	20205.13
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2280.38	20205.13
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	3.00	24.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	3.00	24.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 15
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
KeyCorp Advocates Fund-Federal

A. Belgio, Lisa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 165 Bauer Rd
 City Monaca State PA Zip Code 15061-2203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KeyBank National Association Occupation (for Individual) Sr Learning Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 653.82

Date of Receipt 08 / 07 / 2020
Transaction ID : 87F6B392B573456D97D0
 Amount of Each Receipt this Period 38.46
 Memo Item

B. Belgio, Lisa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 165 Bauer Rd
 City Monaca State PA Zip Code 15061-2203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KeyBank National Association Occupation (for Individual) Sr Learning Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 653.82

Date of Receipt 08 / 21 / 2020
Transaction ID : 22488D37EA6C45279693
 Amount of Each Receipt this Period 38.46
 Memo Item

C. Brennan, Brian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2961 Edgewood Rd
 City Pepper Pike State OH Zip Code 44124-5101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KeyBanc Capital Markets Inc. Occupation (for Individual) Nat'l Hd, Fix Inc Sls & Trdng
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 08 / 07 / 2020
Transaction ID : 3BAC2CDB750943AAA EFD
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	96.92
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 15
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
KeyCorp Advocates Fund-Federal

A. Brennan, Brian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2961 Edgewood Rd
 City Pepper Pike State OH Zip Code 44124-5101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KeyBanc Capital Markets Inc. Occupation (for Individual) Nat'l Hd, Fix Inc Sls & Trdng
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 08 / 21 / 2020
Transaction ID : 3713DF8A51D64681B259
 Amount of Each Receipt this Period 20.00
 Memo Item

B. Carlson, Amy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2884 Woodbury Rd
 City Shaker Heights State OH Zip Code 44120-2426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KeyBank National Association Occupation (for Individual) Grp Hd, DCM Orig & Structuring
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3269.10

Date of Receipt 08 / 07 / 2020
Transaction ID : 5B0D6302F49A47F3B517
 Amount of Each Receipt this Period 192.30
 Memo Item

C. Carlson, Amy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2884 Woodbury Rd
 City Shaker Heights State OH Zip Code 44120-2426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KeyBank National Association Occupation (for Individual) Grp Hd, DCM Orig & Structuring
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 3269.10

Date of Receipt 08 / 21 / 2020
Transaction ID : 6ECE77292E85442ABF05
 Amount of Each Receipt this Period 192.30
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	404.60
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 15
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
KeyCorp Advocates Fund-Federal

A. Chauvette, Derek, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18120 Parkland Dr
 City Shaker Heights State OH Zip Code 44122-3447
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KeyBank National Association Occupation (for Individual) Head of Public Sector
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1961.46

Date of Receipt 08 / 07 / 2020
Transaction ID : 13CC0C0689CE45C6A569
 Amount of Each Receipt this Period 115.38
 Memo Item

B. Chauvette, Derek, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18120 Parkland Dr
 City Shaker Heights State OH Zip Code 44122-3447
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KeyBank National Association Occupation (for Individual) Head of Public Sector
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1961.46

Date of Receipt 08 / 21 / 2020
Transaction ID : 9D6692B5E8F641E4B01A
 Amount of Each Receipt this Period 115.38
 Memo Item

C. Clarke, Charles, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 Grey Fox Run
 City Bentleyville State OH Zip Code 44022-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KeyBank National Association Occupation (for Individual) Regional Sales Exec
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 08 / 07 / 2020
Transaction ID : 5BAFD5D0953B42599A9A
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	280.76
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 15
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
KeyCorp Advocates Fund-Federal

A. Clarke, Charles, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 Grey Fox Run
 City Bentleyville State OH Zip Code 44022-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KeyBank National Association Occupation (for Individual) Regional Sales Exec
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 08 / 21 / 2020
Transaction ID : 4A2059F4B67B4D068BE7
 Amount of Each Receipt this Period 50.00
 Memo Item

B. DeLeone, Lara, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2125 Cheshire Rd
 City Columbus State OH Zip Code 43221-4132
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KeyBank National Association Occupation (for Individual) MD, Public Sector
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 653.82

Date of Receipt 08 / 07 / 2020
Transaction ID : 1D4E772EF6E4468CA1FD
 Amount of Each Receipt this Period 38.46
 Memo Item

C. DeLeone, Lara, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2125 Cheshire Rd
 City Columbus State OH Zip Code 43221-4132
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KeyBank National Association Occupation (for Individual) MD, Public Sector
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 653.82

Date of Receipt 08 / 21 / 2020
Transaction ID : E43ABA02DB2548F6B129
 Amount of Each Receipt this Period 38.46
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	126.92
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 15
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
KeyCorp Advocates Fund-Federal

A. Fraiman, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 Mountain Ave
 City Mount Kisco State NY Zip Code 10549-1321
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KeyBanc Capital Markets Inc. Occupation (for Individual) President of Healthcare, IB
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 653.82

Date of Receipt 08 / 07 / 2020
Transaction ID : AD4EA5B1DF1C469CA1C7
 Amount of Each Receipt this Period 38.46
 Memo Item

B. Fraiman, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 Mountain Ave
 City Mount Kisco State NY Zip Code 10549-1321
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KeyBanc Capital Markets Inc. Occupation (for Individual) President of Healthcare, IB
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 653.82

Date of Receipt 08 / 21 / 2020
Transaction ID : 4B5F4D0C747F4744A06C
 Amount of Each Receipt this Period 38.46
 Memo Item

C. Freese, Jeffrey, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2080 W 19th St
 City Cleveland State OH Zip Code 44113-3549
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KeyBanc Capital Markets Inc. Occupation (for Individual) MD, Public Sector
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 359.55

Date of Receipt 08 / 07 / 2020
Transaction ID : 0CBCD4D159D04238BEDA
 Amount of Each Receipt this Period 21.15
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	98.07
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 15
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
KeyCorp Advocates Fund-Federal

A. Freese, Jeffrey, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2080 W 19th St
 City Cleveland State OH Zip Code 44113-3549
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KeyBanc Capital Markets Inc. Occupation (for Individual) MD, Public Sector
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 359.55

Date of Receipt 08 / 21 / 2020
Transaction ID : 00A4FF12DD3C43D08FFD
 Amount of Each Receipt this Period 21.15
 Memo Item

B. Kane, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 210 Hardwicke Ln
 City Villanova State PA Zip Code 19085-1405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KeyBank National Association Occupation (for Individual) Commercial Sales Lead - MP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 653.82

Date of Receipt 08 / 07 / 2020
Transaction ID : 4AA0FAA32B9E4F8A95C5
 Amount of Each Receipt this Period 38.46
 Memo Item

C. Kane, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 210 Hardwicke Ln
 City Villanova State PA Zip Code 19085-1405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KeyBank National Association Occupation (for Individual) Commercial Sales Lead - MP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 653.82

Date of Receipt 08 / 21 / 2020
Transaction ID : CEDFEE4C43A4443BAB57
 Amount of Each Receipt this Period 38.46
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 98.07
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 15
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
KeyCorp Advocates Fund-Federal

A. Moules, Todd, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1028 Summerset Dr
 City Pittsburgh State PA Zip Code 15217-2537
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KeyBank National Association Occupation (for Individual) Commercial Sales Ldr II - Mkt Pr
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 653.82

Date of Receipt 08 / 07 / 2020
Transaction ID : D552C0E7251B42729CC5
 Amount of Each Receipt this Period 38.46
 Memo Item

B. Moules, Todd, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1028 Summerset Dr
 City Pittsburgh State PA Zip Code 15217-2537
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KeyBank National Association Occupation (for Individual) Commercial Sales Ldr II - Mkt Pr
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 653.82

Date of Receipt 08 / 21 / 2020
Transaction ID : 5C8D1EC85BBC4F0E9EB1
 Amount of Each Receipt this Period 38.46
 Memo Item

C. Mulvihill, Thomas, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 71 Andrew St
 City Manhasset State NY Zip Code 11030-2309
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KeyBank National Association Occupation (for Individual) MD, Public Sector
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 08 / 07 / 2020
Transaction ID : 36D36EAEF4AE4376BA18
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	126.92
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 15
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
KeyCorp Advocates Fund-Federal

A. Mulvihill, Thomas, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 71 Andrew St
 City Manhasset State NY Zip Code 11030-2309
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KeyBank National Association Occupation (for Individual) MD, Public Sector
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 08 / 21 / 2020
Transaction ID : F4E34B1D3546445EB780
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Paine III, Andrew, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2501 Marlboro Rd
 City Cleveland Heights State OH Zip Code 44118-4027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KeyBanc Capital Markets Inc. Occupation (for Individual) Co-Head Corporate Bank
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3269.10

Date of Receipt 08 / 07 / 2020
Transaction ID : 297F6D29A4C14A099DDC
 Amount of Each Receipt this Period 192.30
 Memo Item

C. Paine III, Andrew, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2501 Marlboro Rd
 City Cleveland Heights State OH Zip Code 44118-4027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KeyBanc Capital Markets Inc. Occupation (for Individual) Co-Head Corporate Bank
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 3269.10

Date of Receipt 08 / 21 / 2020
Transaction ID : 364EDD84884048BF8386
 Amount of Each Receipt this Period 192.30
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	434.60
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 15
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
KeyCorp Advocates Fund-Federal

A. Schosser, Douglas, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4300 Burberry Ct
 City Avon State OH Zip Code 44011-4417
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KeyCorp Occupation (for Individual) Corporate Accounting Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 653.82

Date of Receipt 08 / 07 / 2020
Transaction ID : 258B4A2DD44F487E900F
 Amount of Each Receipt this Period 38.46
 Memo Item

B. Schosser, Douglas, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4300 Burberry Ct
 City Avon State OH Zip Code 44011-4417
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KeyCorp Occupation (for Individual) Corporate Accounting Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 653.82

Date of Receipt 08 / 21 / 2020
Transaction ID : B6C97E122BC34189A18D
 Amount of Each Receipt this Period 38.46
 Memo Item

C. Wise, Charles, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7174 Fox Lake Dr
 City Blacklick State OH Zip Code 43004-9545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KeyBank National Association Occupation (for Individual) VP, Public Sector
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 680.00

Date of Receipt 08 / 07 / 2020
Transaction ID : E13536FC4285407C8613
 Amount of Each Receipt this Period 40.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	116.92
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 15
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
KeyCorp Advocates Fund-Federal

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Wise, Charles, , ,

Mailing Address 7174 Fox Lake Dr

City Blacklick	State OH	Zip Code 43004-9545
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KeyBank National Association	Occupation (for Individual) VP, Public Sector
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
680.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 21 / 2020

Transaction ID : EF62B856535644C79657

Amount of Each Receipt this Period
40.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	40.00
TOTAL This Period (last page this line number only).....	1823.78