FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Filed purcuant to Section 16(a) of the Securities Evolution Act of 1024

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

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

| msuuc | iioii 1 (b). | | | FIIC | | | | | | | | pany Act | | | D 4 | | <u> </u> | | | | |
|--|---|--|---|-------------------------------|---|--|--|---------|-------------|---------------------------------------|-------------------|---|-----------------|-------|--|---|--|--|--|---|--|
| 1. Name and Address of Reporting Person* <u>Lu Xueling</u> | | | | | 2. Issuer Name and Ticker or Trading Symbol Yum China Holdings, Inc. [YUMC] | | | | | | | | | | (CI | neck all ap | ionship of Reporting all applicable) Director Officer (give title | | rson(s) to Is 10% O Other (| wner | |
| (Last) (First) (Middle) YUM CHINA BUILDING 20 TIAN YAO QIAO ROAD | | | | | | ate of 17/20 | | st Trar | nsact | tion (Moi | nth/D | ay/Year) | | | | X belo | | er and | below) | specify | |
| (Street) SHANGHAI F4 200030 (City) (State) (Zip) | | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | | Individual or Joint/Group Filing (Check Applicable ne) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| | | Tab | le I - Nor | ı-Deriv | ative | Sec | curiti | es A | cqu | ired, C | Disp | osed | of, o | r Ben | eficia | lly Own | ed | | | | |
| 1. Title of S | Security (Ins | r. 3) | | 2. Transa Date (Month/I | | ar) E | A. Dee Execution fany Month/I | on Date | е, | 3. Transac Code (In 8) | | 4. Secur Dispose 5) | | | | Secur Bene | icially d Following | Forn (D) c | wnership n: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | | Code | v | Amount (A) or (D) | | | Price | Trans | Transaction(s) (Instr. 3 and 4) | | | (IIISU. 4) | | |
| | | Т | able II - I | Derivat e.g., p | | | | | | | | | | | | Owne | i | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | | 4. Transaction Code (Instr. 8) | | | | Exp | Date Exer Diration D Donth/Day/ | ate | le and 7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4) | | | 8. Price o Derivative Security (Instr. 5) | | ly | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | Code | Code | v | (A) | (D) | Date Exe | e ercisable | Ex Da | piration te | or Nui of | | umber | | | | | | |

Explanation of Responses:

Restricted

Stock Unit

Restricted

Stock Unit

1. Conversion occurs on a one-for-one basis.

(1)

(1)

2. These units represent Restricted Stock Units issuable to the Reporting Person as a dividend equivalency payment with respect to Restricted Stock Units previously issued to the Reporting Person which vest 100% on the third anniversary of the grant date. The Restricted Stock Units reported herein shall vest on the same date and under the same terms as the underlying Restricted Stock Units with respect of which these dividend equivalency units vest

(2)

(2)

(3)

(3)

Common

Stock

Stock

3. This grant does not have an expiration date.

/s/ Pingping Liu, Power of Attorney

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\$0

\$<mark>0</mark>

** Signature of Reporting Person Date

2 356

2,855

09/18/2019

D

D

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).

09/17/2019

09/17/2019

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

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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.