FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPRO | DVAL | | | | | | | |
|--------------------------|---------------------------------------|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | |
| Estimated average burden | | | | | | | | |
| hours per response: | 0.5 | | | | | | | |
| | OMB Number: Estimated average burd | | | | | | | |

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

| 1. Name and Address of Reporting Person* Hill Paul A. | | | | | 2. Issuer Name and Ticker or Trading Symbol Yum China Holdings, Inc. [YUMC] | | | | | | | | (Checl | k all appl Direct | ionship of Reportin all applicable) Director Officer (give title | | 10% Ov | vner |
|---|--|--|---|---------|---|------------------|---|--|-------------------------------------|------------------|--|-----------------------------------|-----------------|---|--|----------------|---|---|
| | ` | GATEWAY | (Middle) | | 3. Date of Earliest Transaction (Month/Day/Year) 01/01/2017 | | | | | | | | X | below | | | Other (specify below) Controller | |
| (Street) SHANG: | | | 200030 (Zip) | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | 6. Indi Line) X | Form | r Joint/Group Filing (Check Applicable I filed by One Reporting Person I filed by More than One Reporting on | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | ate | - 1 | Execution if any | A. Deemed xecution Date, any Month/Day/Year) | | Transaction Dispose Code (Instr. 5) | | rities Acqui ed Of (D) (In | | and Securit | | ies ially Following | Form (D) or | n: Direct r Indirect estr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | | | | Code | Code V | | (A) (D) | Pri | се | Transac | action(s) 3 and 4) | | | (11150.4) |
| Common Stock 01/01/2 | | | | 01/01/2 | /2017 | | М | | 662 | . A | \$2 | 26.12 | | 2,323 | | 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) | 3A. Deemed Execution Date if any (Month/Day/Ye | Co | nsactior de (Instr | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Securi (Instr. 3 and 4) | | De Se (In | Price of crivative curity estr. 5) | 9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | y | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) |
| | | | | Co | de V | (A) | (D) | Date Exercisabl | | xpiration ate | Title | Amou or Numb of Share | er | | | | | |
| Phantom Stock | (1) | 01/01/2017 | | N | 1 | | 662 | (2) | | (3) | Common Stock | 662 | | \$0 | 0 | | D | |

Explanation of Responses:

- 1. Conversion occurs on a one-for-one basis.
- 2. Distribution occurs upon earlier of separation of employment or 1/1/2017.
- 3. This grant does not have an expiration date.

/s/ Pingping Liu, Power of 01/04/2017 **Attorney**

** Signature of Reporting Person Date

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.