FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

| - 1 | | | | | | | | |
|-----|--------------------------|-----|--|--|--|--|--|--|
| | OMB APPROVAL | | | | | | | |
| | OMB Number: 3235-01 | | | | | | | |
| | Estimated average burden | | | | | | | |
| | hours per response: | 0.5 | | | | | | |

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* Bromark Raymond J | | | Date of Event equiring Staten Month/Day/Year 7/22/2011 | nent | 3. Issuer Name and Ticker or Trading Symbol YRC Worldwide Inc. [YRCW] | | | | | | | | |
|--|------------------|----------|--|--|---|---|---|--|--|---|-------|--|--|
| (Last) 10990 ROE A | (First) VENUE | (Middle) | | | | Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | 5. If Amendment, Date of Original Filed (Month/Day/Year) | | | | |
| (Street) OVERLAND PARK | NND KS 66211 | | | | Officer (give title below) | Other (spe below) | | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| (City) | (State) | (Zip) | | | | | | | | reporting P | erson | | |
| Table I - Non-Derivative Securities Beneficially Owned | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 4) | | | | | 2. Amount of Securities Beneficially Owned (Instr. 4) | | 3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5) | | 4. Nature of Indirect Beneficial Ownership (Instr. 5) | | | | |
| Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 4) 2. Date Exercisable Expiration Date (Month/Day/Year) | | | ate | 3. Title and Amount of Secu Underlying Derivative Secur | | ity (Instr. 4) Conve | | rcise Form: | | 6. Nature of Indirect Beneficial Ownership (Instr. 5) | | | |
| | | | Date Exercisable | Expiration Date | n Title | 3 | Amount or Number of Shares | Price of Derivati Security | ve or | rect (D) Indirect (Instr. 5) | | | |

Explanation of Responses:

No securities are beneficially owned.

/s/ Raymond J. Bromark 08/01/2011

** 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 5 (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.