FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF **SECURITIES**

OMB APPROVAL							
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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 Add Fry James	. Date of Event lequiring Staten Month/Day/Year 4/20/2015	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)     Director 10% Owner			5. If Amendment, Date of Original Filed (Month/Day/Year)			
(Street) OVERLAND PARK (City)	KS (State)	66211 (Zip)			X	Officer (give title below) VP, General Counsel	Other (spe below) and Secy.	· I	6. Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person			
Table I - Non-Derivative Securities Beneficially Owned												
1. Title of Security (Instr. 4)				2	2. Amount of Securities Beneficially Owned (Instr. 4)		3. Ownership		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 Security Underlying Derivative Security		ty (Instr. 4) Conver or Exer		ise Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)			
			Date Exercisable	Expiration Date	n Title		Amount or Number of Shares	Price of Derivativ Security				

**Explanation of Responses:** 

No securities are beneficially owned.

/s/James A. Fry

04/21/2015

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

<sup>\*</sup> If the form is filed by more than one reporting person, see Instruction 5 (b)(v).

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