FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| | | 00540 | |
|-------------|------|-------|--|
| Nashington, | D.C. | 20549 | |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| UIVID APP | TOVAL | | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | |
| Estimated average burden | | | | | | | | | |
| hours per response: | 0.5 | | | | | | | | |

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

| Name and Address of Reporting Person* Zhu Christina (Xiaojing) | | | | 2. Issuer Name and Ticker or Trading Symbol Yum China Holdings, Inc. [YUMC] 3. Date of Earliest Transaction (Month/Day/Year) | | | | | | | | ck all app | , | ng Pers | son(s) to Is 10% Ov Other (s | vner | | | |
|--------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|--------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|------------------|--------|--------------------------------------------------------------------------------------------------|-------|-----------------------------------|-------------------------------------------------------|------------------------------------------|-------------------|-------------------------------------------------------------------------|--------------------------------------------------------------------|--|---|------------|
| (Last) | (Fir | st) (M | Middle) | | 06/01/2024 | | | | | | | below | | | below) | specify | | | |
| 1F, TOWER 3, SZITIC SQUARE | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable | | | | | | | |
| 69 NONGLIN ROAD, FUTIAN DISTRICT | | | | | | | | | | | | 1 ′ | ine) Form filed by One Reporting Person | | | | | | |
| (Street) SHENZHEN F4 518040 | | | | | Form filed by More than One Reporting Person | | | | | | | | | | orting | | | | |
| | | | | | Rule 10b5-1(c) Transaction Indication | | | | | | | | | | | | | | |
| (City) | (Sta | ate) (Z | Zip) | | Check this box to indicate that a transaction was made pursuant to a contract, instruction of satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10. | | | | | | | | uction or writt | en plan | that is inter | nded to | | | |
| | | Table | I - Non | -Deriva | tive S | Secu | ritie | s Acqı | uired, | Disp | osed of | , or E | Bene | ficiall | y Own | ed | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | Execution D | | Date, Transaction Code (Instr | | | | | 4 and Secu Bene Own | | ially Following | Form: | : Direct Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | | | | | | Code | v | Amount | (A) (D) | or F | Price | Report Transa (Instr. 3 | tion(s) | | | (11150. 4) |
| Common | Stock | | | 06/01/2 | /2024 | | | | A | | 4,684 | A | A | \$ <mark>0</mark> | 10,197 | | | 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) | ivative conversion or Exercise Price of Derivative Security Date (Month/Day/Year) (Month/Day/Year) Execution Date, if any (Month/Day/Year) (Month/Day/Year) 8) | | Transaction of Code (Instr. Derivati | | ivative urities uired or posed O) tr. 3, 4 | 6. Date Exercisable a Expiration Date (Month/Day/Year) | | te | 7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4) | | De Se (II | Price of erivative ecurity nstr. 5) | | | 10. Ownership Form: Direct (D) or Indirect I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | Code | v | (A) | | Date Exercisa | able | Expiration Date | Title | Amor or Numl of Share | ber | | | | | | | |

Explanation of Responses:

/s/ Pingping Liu, Power of Attorney

06/04/2024

** 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.

 $^{^{\}star}$ 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).