SEC Form 3 FORM 3

UNITED STATES SECURITIES AND EXCHANGE

COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL

3235-0104 OMB Number:

Estimated average burden 0.5

hours per response:

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 [*] MFN Partners, LP			2. Date of Event Requiring Statement (Month/Day/Year)		3. Issuer Name and Ticker or Trading Symbol <u>Yellow Corp</u> [YELL]					
(Last)	(First)	(Middle) ET, 13TH	07/26/202		4. Relationship of Reporting Issuer (Check all applicable) Director ♪ Officer (give title below)	X 10% O	wner specify	5. If File	Amendment, d (Month/Day/	Date of Original 'Year)
(Street) BOSTON	MA	02116						(Ch	eck Applicable Form filed Person	int/Group Filing 2 Line) by One Reporting by More than One
(City)	(State)	(Zip)	<u> </u>			·	<u> </u>	X	Reporting I	
Table I - Non-D 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)			
Common Stock					5,666,555					
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)										
1. Title of Derivative Security (Instr. 4)		2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise		5. Ownership Form:	6. Nature of Indirect Beneficial Ownership (Instr.	
			Date Exercisable	Expiration Date		Amount or Number of Shares	Price of		Direct (D) or Indirect (I) (Instr. 5)	5)
1. Name and Address of Reporting Person* MFN Partners, LP					,	3	4			·
(Last) (First) (Middle) 222 BERKELEY STREET, 13TH FLOOR										
(Street) BOSTON	MA	021	116	_						
(City)	(State)	(Zip)							
1. Name and Address of Reporting Person [*] MFN Partners GP, LLC										
(Last) 222 BERKE	(First)	(Mic ET, 13TH FLC	idle))OR							
(Street) BOSTON	MA	022	116	_						
(City)	(State)	(Zip)							
1. Name and A MFN Part		orting Person [*] agement, LI								

(Last) 222 BERKELEY	(First) Y STREET, 13TH	(Middle) FLOOR						
(Street) BOSTON	MA	02116						
(City)	(State)	(Zip)						
1. Name and Address of Reporting Person [*] MFN Partners Management, LLC								
(Last) 222 BERKELEY	(First) Y STREET, 13TH	(Middle) FLOOR						
(Street) BOSTON	МА	02116						
(City)	(State)	(Zip)						
1. Name and Address of Reporting Person [*] DeMichele Michael								
(Last) 222 BERKELEY	(First) Y STREET, 13TH	(Middle) FLOOR						
(Street) BOSTON	MA	02116						
(City)	(State)	(Zip)						
1. Name and Address of Reporting Person [*] NANJI FARHAD								
(Last) 222 BERKELEY	(First) Y STREET, 13TH	(Middle) FLOOR						
(Street) BOSTON	МА	02116						
(City)	(State)	(Zip)						

Explanation of Responses:

1. MFN Partners, LP (the "Partnership") is the holder of the securities reported herein. MFN Partners GP, LLC ("MFN GP") is the general partner of the Partnership. MFN Partners Management, LP ("MFN Management") is the investment adviser to the Partnership. MFN Partners Management, LLC ("MFN LLC") is the general partner of MFN Management. Farhad Nanji and Michael F. DeMichele are managing members of MFN GP and MFN LLC. Each Reporting Person disclaims beneficial ownership of such securities, except to the extent of such Reporting Person's pecuniary interest, if any, therein.

MFN PARTNERS, LP, By: /s/ Jonathan Reisman, Name: Jonathan Reisman, Title: Authorized Person	<u>07/28/2023</u>
<u>MFN PARTNERS GP,</u> <u>LLC, By: /s/ Jonathan</u> <u>Reisman, Name: Jonathan</u> <u>Reisman, Title: Authorized</u> <u>Person</u>	<u>07/28/2023</u>
<u>MFN PARTNERS</u> <u>MANAGEMENT, LP, By:</u> <u>/s/ Jonathan Reisman,</u> <u>Name: Jonathan Reisman,</u> <u>Title: Authorized Person</u>	<u>07/28/2023</u>
<u>MFN PARTNERS</u> <u>MANAGEMENT, LLC,</u> <u>By: /s/ Jonathan Reisman,</u>	<u>07/28/2023</u>

Name: Jonathan Reisman,
Title: Authorized Person
StateMICHAEL F.
DEMICHELE, By: /s/
Michael F. DeMichele07/28/2023Michael F. DeMichele07/28/2023FARHAD NANJI, By: /s/
Farhad Nanji07/28/2023** Signature of Reporting
PersonDate

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.