## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington D.C. 20549

wasinigton,	D.C.	20343	

<b>STATEMENT</b>	OF CHANGES IN	BENEFICIAL	<b>OWNERSHIP</b>

OMB APPROVAL

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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

1. Name and Address of Reporting Person*  CHURAY DANIEL J					2. Issuer Name and Ticker or Trading Symbol  YELLOW ROADWAY CORP [ YELL ]								Check a	all app	licable)		Owner r (specify		
(Last) (First) (Middle) 10990 ROE AVENUE						3. Date of Earliest Transaction (Month/Day/Year) 02/25/2005								X	below)  Sr. VP, Gen. Con		belo	v)`	
(Street) OVERLA PARK (City)	K		56211 Zip)		4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)							Individue)	Form	or Joint/Group Filing (Check Applicable  In filed by One Reporting Person  In filed by More than One Reporting  In filed by More than One Reporting				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)  2. Transa Date (Month/D				Execution Date,		Transaction Dispose Code (Instr. 5)		Disposed	ties Acquired (A) or I Of (D) (Instr. 3, 4 and			5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
									Code	v	Amount	(A (D	) or )	Price	- 11	Transa	action(s) 3 and 4)		(11311.4)
Common Stock 02/25/				/2005	2005		A		4,896(1	.)	A	\$61.31		11,340		D			
Common Stock												98 <sup>(2)</sup>		I	401(k) Plan				
	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 Execution Date, if any (Month/Day/Year)  (Month/Day/Year)  3. Transaction Execution Date, if any (Month/Day/Year)  (Month/Day/Year)  4. Transaction Execution Date, if any (Month/Day/Year)			on of		6. Date Exercisable and Expiration Date (Month/Day/Year)		e	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		str. 3		curity curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction( (Instr. 4)	Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership (Instr. 4)			
					Code	v	(A)		Date Exercisa		Expiration Date	Title	Amo or Num of Shar	ber					

## **Explanation of Responses:**

1. The issuer granted the reporting person rights to receive shares of the issuer?s common stock, called performance share units, pursuant to the achievement of performance targets under a long-term incentive plan. After expiration of a holding period, the reporting person will receive one share of the issuer?s common stock for each vested performance unit. Fifty percent of the performance units vest on the third anniversary of their date of grant, and the remaining 50% vest on the sixth anniversary from the date of grant, termination of the reporting person's employment with the issuer, retirement at age 65, death, disability or upon certain change of control events in respect of the issuer.

2. As of 12/31/04.

## Remarks:

/s/ Daniel J. Churay

03/01/2005

\*\* Signature of Reporting Person Da

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.