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YUM BRA	NDS INC											
Form 4												
February 09	9, 2015											
FORM	ЛΔ									OMB A	PPROVA	۹L
	UNITED	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549									3235	35-0287
Check t if no lor											Janua	-
subject		MENT OI	F CHAI	NGES IN BENEFICIAL OWNERSHIP OF						Estimated average		
	Section 16. SECURITIES									burden hours per		
Form 4 Form 5				16() 6.1	с ·	т	- 1	A (6102	4	response		0.5
obligati	ong *							nge Act of 193				
may con	ntinue. Section 17			nvestment	•	· ·	•	of 1935 or Sec	cuon			
<i>See</i> Inst 1(b).	ruction	50(II)	of the fi	livestillen	i Compa	Iy AC		240				
1(0).												
(Print or Type	Responses)											
1. Name and Address of Reporting Person <u>*</u> Grismer Patrick J S				er Name an	ng	5. Relationship of Reporting Person(s) to Issuer						
			-	BRANDS	INC [Y]	UM]						
(Last)	(First)	(Middle)		of Earliest T	-	-		(0	Check	all applicabl	e)	
(2450)	(1100)	(11110010)		Day/Year)	ransaction			Director		109	% Owner	
			02/06/2015					X_Officer (give titleOther (specify below)			,	
								· · ·	nief F	inancial Offic	cer	
	(Street)		4 If Am	endment, D	ate Origina	1		6. Individual of	or Ioi	nt/Group Fili	ng(Check	
				onth/Day/Yea	-	••		Applicable Line		nu oroup r m	ng(eneek	
					*			_X_ Form filed	by O			
LOUISVII	LE, KY 40213							Person	by Mo	ore than One R	eporting	
(City)	(State)	(Zip)	Tab	ole I - Non-l	Derivative	Secur	rities A	cquired, Dispose	ed of,	or Beneficia	lly Owne	d
1.Title of	2. Transaction Date	2A. Deem	ed	3.	4. Securit	ies		5. Amount of	6.	Ownership	7. Nature	e of
Security	(Month/Day/Year)	Execution		Transactio	•			Securities	Fo	orm: Direct	Indirect	
(Instr. 3)		any (Marth/D	(N /)	Code	Disposed			Beneficially) or Indirect		
		(Month/Da	ay/rear)	(Instr. 8)	(Instr. 3,	4 and 3	5)	Owned Following	(I) (Ir	nstr. 4)	Ownersh (Instr. 4)	
						(\mathbf{A})		Reported	((
						(A) or		Transaction(s)				
				Code V	Amount	(D)	Price	(Instr. 3 and 4)				
Damindam Da	port on a separate lin	a for each a	ass of see	urities hore	ficially or	nad di	rectly	rindiractly				
Kenniuer. Ke	port on a separate ini			unities belle	-		-	pond to the co	llecti	ion of	SEC 1474	

Persons who respond to the collection of information contained in this form are not (9-02) required to respond unless the form displays a currently valid OMB control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of Derivative	6. Date Exercisable and	7. Title and Amour
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orSecurities Acquired (A)	Expiration Date	Underlying Securit
Security	or Exercise		any	Code	or Disposed of (D)	(Month/Day/Year)	(Instr. 3 and 4)

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(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)		(Instr. 3, 4, and 5)					
	Derivative Security			Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amc Num Shar
Phantom Stock	<u>(1)</u>	02/06/2015		А		66,852.5		(2)	(3)	Common Stock	66,
Phantom Stock	<u>(1)</u>	02/06/2015		F			747.6755	(2)	(3)	Common Stock	747

Reporting Owners

Reporting Owner Name / Address	Relationships								
	Director	10% Owner	Officer	Other					
Grismer Patrick J 1441 GARDINER LANE LOUISVILLE, KY 40213			Chief Financial Officer						

Signatures

/s/ M. Gayle Hobson, POA 02/09/2015 <u>**</u>Signature of Reporting Date

Person

Explanation of Responses:

* 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).

(1) Conversion occurs on a one-for-one basis.

(2) Payments are made in accordance with elections on file.

(3) The Program does not have specified expiration dates.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.