

STALEY JAMES D  
Form 3/A  
February 01, 2005

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

OMB APPROVAL

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**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,  
Section 17(a) of the Public Utility Holding Company Act of 1935 or Section  
30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person *		2. Date of Event Requiring Statement	3. Issuer Name <b>and</b> Ticker or Trading Symbol	
Â STALEY JAMES D		(Month/Day/Year)	YELLOW ROADWAY CORP [YELL]	
(Last)	(First)	12/18/2003		
1077 GORGE BLVD			4. Relationship of Reporting Person(s) to Issuer	
(Street)			(Check all applicable)	
AKRON, Â OH Â 44310			<input type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other (give title below)    (specify below) Chief Exec. Officer, Roadway	
(City)	(State)	(Zip)	5. If Amendment, Date Original Filed(Month/Day/Year)	
			12/23/2003	
			6. Individual or Joint/Group Filing(Check Applicable Line)	
			<input checked="" type="checkbox"/> Form filed by One Reporting Person	
			<input type="checkbox"/> Form filed by More than One Reporting Person	

**Table I - Non-Derivative Securities Beneficially Owned**

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	6,132 <sup>(1)</sup>	D	Â

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. SEC 1473 (7-02)

**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 control number.**

**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 Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D) or Indirect	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of	

Shares (I)  
(Instr. 5)

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
STALEY JAMES D 1077 GORGE BLVD AKRON, OH 44310	Â	Â	Â Chief Exec. Officer, Roadway	Â

## Signatures

/s/ James D. 02/01/2005  
Staley

\*\*Signature of Reporting Person Date

## Explanation of Responses:

- \* 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).
  1. The reporting person filed an amendment to his original Form 3 earlier today on February 1, 2005. That amendment was filed based on incorrect data and should not have been filed. The original Form 3 filed by the reporting person was correct. The incorrect Form 3 amendment filed previously made reference to 2,767 shares of Roadway Corporation common stock that the reporting person exchanged upon consummation of the merger of Roadway Corporation into Yankee LLC, a wholly owned subsidiary of the issuer. The reporting person received 100% cash in exchange for those 2,767 shares. The 6,132 shares listed in this Form 3 Amendment are the number of shares of the issuer's common stock that the reporting person directly held as of December 23, 2003, the date the reporting person's original Form 3 was filed.

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.