FORM	4
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Check this box if no	
longer subject to Section	
16. Form 4 or Form 5	
obligations may	Б
continue. See Instruction	г
1(b).	

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

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

ons may e. See Instruction 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 [*] ABNEY DAVID P	2. Issuer Name and UNITED PARC						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director10% Owner				
(Last) (First) 55 GLENLAKE PARKWAY, NE		3. Date of Earliest Transaction (Month/Day/Year) 10/26/2007						X_Officer (give title below) Other (specify below) Chief Operating Officer			
(Street) ATLANTA, GA 30328		4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City) (State)	(Zip)		Table I -	Non-	Derivative S	ecuriti	es Acqui	red, Disposed of, or Beneficially Owned			
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		(Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	Ownership Form:	Beneficial	
		(Month/Day/Year)	Code	v	Amount	(A) or (D)	Price	(Instr. 3 and 4)	Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
Class A Common Stock	10/26/2007		М		440.6573	А	\$ 0	58,501.3995	D		
Class A Common Stock 10/26/2007			F		142.9933	D	\$ 76.54	58,358.4062	D		
Class A Common Stock								596	Ι	Child I	
Class A Common Stock								596	Ι	Child II	
Class A Common Stock								26,500	Ι	Spouse	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained in SEC 1474 (9-02) this form are not 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	3A. Deemed	4.		5. Num	ber of	6. Date Exer	cisable and	7. Title and	Amount of	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transac				Expiration Date		Underlying Securities		Derivative	Derivative	Ownership	of Indirect
		(Month/Day/Year)		Code			Securities Acquired (Month/Day/Year) (Instr. 3 and 4)		2			Beneficial			
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)		Disposed of					(Instr. 5)	Beneficially		Ownership
	Derivative					(D) (Leaster 2	4 15)							Security:	
	Security				-	(Instr. 2	s, 4, and 5)		1		1			Direct (D) or Indirect	
								Date	Expiration		Amount or		Transaction(s)		
				Code	v	(A)	(D)	Exercisable		Title	Number of Shares		× /	(Instr. 4)	
Restricted Stock Units	\$ 0 (1)	10/26/2007		М			440.6573	(2)	(2)	Class A Common Stock	440.6573	\$ 0	1,502	D	
Restricted Stock Units	\$ 0 <mark>(1)</mark>	10/26/2007		А		1,074		<u>(2)</u>	10/15/2012	Class A Common Stock	1,074	\$ 0	1,074	D	

Reporting Owners

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
ABNEY DAVID P 55 GLENLAKE PARKWAY, NE ATLANTA, GA 30328			Chief Operating Officer				

Signatures

Robert S. Shaw, Power of Attorney	10/30/2007
Signature of Reporting Person	Date

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) Represents Restricted Stock Units (RSUs) granted as Management Incentive Awards under the United Parcel Service, Inc. Incentive Compensation Plan. Each restricted stock unit represents a right to receive one share of Class A Common stock.

(2) Restricted stock grant vests at the rate of 20% on the first anniversary date and on each anniversary date thereafter.

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.