FORM 4

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

OMB APPR	OVAL					
OMB Number:	3235-0287					
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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Type	e Responses)			1												
1. Name and Address of Reporting Person * ESKEW MICHAEL L				2. Issuer Name and Ticker or Trading Symbol UNITED PARCEL SERVICE INC [UPS]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
55 GLENI		(First) RKWAY, NE	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 10/30/2009						Officer (give title	e below)		r (specify below	v)		
(Street)				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				
ATLANTA											-	1 01111 11100 0 9 11101	c tilaii one rep	orung r croon		
(City))	(State)	(Zip)			Table	I - Nor	ı-Deriv	vative S	ecuriti	es Acqui	red, Disposed of,	or Benefici	ally Owned		
1.Title of Security 2. Transaction Date (Month/Day/Yea		2A. Deemed Execution Date, if r) any (Month/Day/Year)		(Instr. 8		on 4. Securities Acquir or Disposed of (D) (Instr. 3, 4 and 5)		ed (A)		nsaction(s)			7. Nature of Indirect Beneficial Ownership			
				(Wollin	/Day/ 1	Code	v	An	nount	(A) or (D)	Price	(Ilisti. 3 and 4)			Direct (D) or Indirect (I) (Instr. 4)	
Class A Co	ommon Sto	ock	10/30/2009			М		1,19	9.408	A	\$ 57.71	216,011.2777			D	
Class A Co	ommon Ste	ock	10/30/2009			М		558.	.2451	A	\$ 57.71	216,569.5228			D	
Class A Co	ommon Ste	ock	10/30/2009			F		203.	.4803	D	\$ 57.71	1 216,366.0425			D	
Class A Co	ommon Ste	ock	10/30/2009			F		437.	.1844	D	\$ 57.71	71 215,928.8581			D	
Class A Common Stock											820			I	Child IV	
Class A Co	ommon Ste	ock										40,000			I	Spouse
Reminder: Re	eport on a se	parate line for each of	class of securities ber	neficially	owned	directly or in	Per	sons form	are no	t requ	ired to	collection of in respond unless number.			in SEC	1474 (9-02)
			Table I			ecurities Acq						wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transact Code	5. De Second	Number of rivative curities quired (A) or sposed of (D) str. 3, 4, and	Expiration Date Under		7. Title	and Amount of ring Securities and 4)		9. Number Derivative Securities Beneficially Owned Following Reported	Owners Form of Derivat Securit Direct or India	Ownershi y: (Instr. 4)		
				Code	V (A	(D)	Date Exerc	isable	Expirat Date	ion	Title	Amount or Number of Shares		Transaction (Instr. 4)	(I) (Instr. 4	4)
Restricted Stock Units	\$ 0 (1)	10/30/2009		M		1,199.40	3 ((2)	Ú	2)	Class Comm Stoc	ion 1,199.408	\$ 0	1,705	D	
Restricted Stock Units	\$ 0 (1)	10/30/2009		M		558.2451		(2)	10/15	/2012	Class Comm Stoc	ion 558.2451	\$ 0	1,674	D	

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
ESKEW MICHAEL L 55 GLENLAKE PARKWAY, NE ATLANTA, GA 30328	X					

Signatures

Robert S. Shaw, Power of Attorney	11/03/2009
**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 RSU represents the right to receive one share of Class A common stock.
- (2) RSUs vest at the rate of 20% on October 15th of each year during the vesting period.

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.