FORM 4

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

OMB APPF	ROVAL
OMB Number:	3235-0287
Estimated average	burden
houre por rosponso	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

1. Name and Address of Reporting Person* OWENS CHRISTINE M (Last) (First) (Middle) 55 GLENLAKE PARKWAY, NE		2. Issuer Name and Ticker or Trading Symbol UNITED PARCEL SERVICE INC [UPS]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)Director10% Owner							
			3. Date of Earliest Transaction (Month/Day/Year) 11/03/2010					X	X Officer (give title below) Other (specify below) Senior Vice President				w)		
ATLANTA	A, GA 303	(Street)	4	4. If Amen	dment,	, Date	Orig	inal Filed(Mo	onth/Day/Year)	_X_	Form filed by	One Reporting	p Filing(Check Person Reporting Person	Applicable Li	ne)
(City)		(State)	(Zip)			Tal	ble I	- Non-Deriv	ative Securitie	es Acquired	, Disposed	of, or Bene	ficially Own	ed	
1.Title of Sec (Instr. 3)	curity		2. Transaction Date (Month/Day/Year)	2A. Deen Execution any (Month/D	Date,	if Co		(A	Securities Acq a) or Disposed on str. 3, 4 and 5)	of (D) Owr Tran		Securities Being Reported	d I	5. Ownership Form: Direct (D) or Indirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)
							Code	e V Aı	(A) or (D)	Price				(I) (Instr. 4)	
Reminder: Re								in this f	s who respon orm are not r s a currently	equired to	respond	unless the		eu sec	1474 (9-02)
1. Title of	2.	3. Transaction	3A. Deemed	(e.g., puts.	calls,	warra Numl	ants,	in this f displays aired, Dispo options, cor 6. Date Exe	orm are not rest a currently sed of, or Bendivertible securicisable and	required to valid OMB eficially Own rities) 7. Title and	respond control n	unless the number.	9. Number o	f 10.	11. Natu
	2. Conversion or Exercise Price of Derivative Security	Date	3A. Deemed Execution Date, it	4. Transac Code	calls, 5. tion of D So A (A	warra Numl	ants, ber ive ies ed	in this for displays uired, Disponoptions, con	orm are not rest a currently sed of, or Bendal securitible securicisable and Date	required to valid OMB eficially Own	respond control n rned d Amount ying	unless the number.	e form	f 10. Owners: Form of Derivati Security Direct (i	11. Naturof Indire Benefici Ownersh (Instr. 4)
1. Title of Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, it	4. Transac Code	5. 5. 5. 1. 1. 1. 1. 1.	Number of Number	ants, ber ive ies ed	in this fidisplays ired, Dispo options, con 6. Date Exe Expiration I (Month/Day	sed of, or Bend evertible secur recisable and Date t/Year)	required to valid OMB eficially Own rities) 7. Title and of Underly Securities	respond control n rned d Amount ying	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(f 10. Owners: Form of Derivati Security Direct (i or Indire s) (I)	11. Naturof Indire Benefici Ownersh (Instr. 4)

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
OWENS CHRISTINE M 55 GLENLAKE PARKWAY, NE ATLANTA, GA 30328			Senior Vice President			

Signatures

Robert S. Shaw, Power of Attorney	11/04/2010
**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.