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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL 3235-0287 OMB Number: Estimated average burden hours per response... 0.5

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

| The or Type It | esponses) | | | | | | | | | | | | | | |
|---|---|---|---|--|--------|--|-------------------------|--|--|------------------------------------|--------|-----------------------------|--|--|---|
| 1. Name and Address of Reporting Person *- Gutmann Kathleen M. | | | 2. Issuer Name and Ticker or Trading Symbol UNITED PARCEL SERVICE INC [UPS] | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner | | | | | | |
| (Last) (First) (Middle) 55 GLENLAKE PARKWAY, NE (Street) ATLANTA, GA 30328 | | | | 3. Date of Earliest Transaction (Month/Day/Year) 03/06/2015 | | | | | X | | | | | | |
| | | | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | | _X_ Fo | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person | | | | e) | | |
| (City) | | (State) | (Zip) | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | i | | | | | | | |
| 1.Title of Securi (Instr. 3) | ity | I | 2. Transaction Date Month/Day/Year | 2A. Deeme Execution 1) any (Month/Da | Date. | (Ins | | (A) (Ins | or Disposed of str. 3, 4 and 5) (A) or count (D) | (D) Owne Trans | | curities Ber ag Reported | · | 5. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | | | | 10 | rm are not red | | | | alopia | , - | |
| | | | Table II | | | | | red, Dispos | ly valid OMB ed of, or Benefi vertible securiti | cially Owne | | | | | |
| 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 | (e.g., puts, o 4. e, if Transac Code | calls, | 5. Num | ber ive ies ed | red, Dispose | ed of, or Beneficertible securitions: recisable and Date | cially Owne | Amount | | 9. Number of Derivative Securities Beneficially Owned Following Reported Transaction ((Instr. 4) | Owners Form of Derivat Security Direct (or Indir | Benefici Ownersh (Instr. 4) |
| Derivative Security | Conversion or Exercise Price of Derivative | Date | 3A. Deemed Execution Date (r) any | (e.g., puts, o 4. e, if Transac Code | calls, | 5. Num of Derivat Securiti Acquire (A) or Dispose of (D) (Instr. 3 | ber ive ies ed | red, Dispose ptions, con 6. Date Exe Expiration | ed of, or Beneficertible securitives and Date (y/Year) | 7. Title and of Underly Securities | Amount | Derivative Security | Derivative Securities Beneficially Owned Following Reported Transaction | Owners Form o Derivat Security Direct (or Indir | hip of Indire Benefici Ownersh (Instr. 4) D) |

| | Relationships | | | | | |
|---|---------------|--------------|-----------------------|-------|--|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | |
| Gutmann Kathleen M. 55 GLENLAKE PARKWAY, NE ATLANTA, GA 30328 | | | Senior Vice President | | | |

Signatures

| William L. Lyons, Power of Attorney | 03/06/2015 |
|-------------------------------------|------------|
| **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).
- Represents Restricted Performance Units (RPUs) granted as Management Incentive Awards under the United Parcel Service, Inc. Incentive Compensation Plan. Each RPU represents the right to receive one share of Class A common stock.
- (2) Securities vest at the rate of 20% annually beginning January 15, 2016.

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.