## FORM 4

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

OWR 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 Responses)  1. Name and Address of Reporting Person * LIVERMORE ANN 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)  _X_ Director 10% Owner					
(Last) 55 GLENI	(Last) (First) (Middle) 55 GLENLAKE PARKWAY, NE			3. Date of Earliest Transaction (Month/Day/Year) 05/10/2018					-	Officer (giv	re title below)	Oth	er (specify below	)	
(Street)			4	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	A, GA 303														
(City)		(State)	(Zip)			Tabl	le I -	Non-Deriva	tive Securit	es Acquire	ed, Disposed	of, or Bene	ficially Own	ed	
1.Title of Sec (Instr. 3)	curity		2. Transaction Date (Month/Day/Year)	any		ecution Date, if Code (Instr. 8)		(A) or Disposed of (D)		of (D) O	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		d	Ownership of Form:	Beneficial
				(Month/D	ay/Yea		Code	V Am	ount (A) or		or Indirect (I)		or Indirect (	Ownership Instr. 4)	
Reminder: Re	eport on a sep	yarate 11110 101 Caci.		-				Dorcono	who roeso	nd to the	collection	of informs	tion contai	and SEC 1	174 (0.02)
Reminder: Re	eport on a se				e Secur	ities A		in this fo displays ired, Dispose	rm are not a currently ed of, or Be	required valid OM	to respond IB control i	unless the		ned SEC 14	174 (9-02)
	2. Conversion	3. Transaction	3A. Deemed Execution Date, i	4. Transac Code	Secur calls, v 5. tion of D ) Se A (A D of	ities A warran Numb	oer ve es d	in this fo displays	rm are not a currently ed of, or Ben rertible securisable and ate	required valid OM eficially Orities)	to respond IB control in Owned and Amount clying	8. Price of Derivative Security (Instr. 5)	e form  9. Number o	f 10. Ownershi Form of Derivativ Security: Direct (D or Indirec	11. Natur p of Indirec Beneficia Ownershi (Instr. 4)
Title of     Derivative     Security	2. Conversion or Exercise Price of Derivative	3. Transaction Date	3A. Deemed Execution Date, i	4. Transac Code	Secur calls, v 5. tion of D So A (A D of (II ar	Numb	oer ve es d d , 4,	in this fo displays ired, Dispose options, conv 6. Date Exer Expiration D	rm are not a currently ed of, or Ben rertible securisable and ate	required valid OM eficially Orities)  7. Title a of Under Securitie (Instr. 3 a	to respond IB control in Owned and Amount clying	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transactions	f 10. Ownershi Form of Derivativ Security: Direct (D or Indirec s) (I)	11. Natur p of Indirec Beneficia Ownershi (Instr. 4)

#### **Reporting Owners**

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
LIVERMORE ANN M						
55 GLENLAKE PARKWAY, NE ATLANTA, GA 30328	X					

### **Signatures**

Steve R Knapp, Power of Attorney	05/10/2018
**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) One unit is equivalent to one share of UPS Class A Common stock.

Represents Restricted Stock Units (RSUs) granted under the United Parcel Service, Inc. Incentive Compensation Plan. These RSUs will convert into shares of UPS Class A common stock on a one for one basis upon separation from service with the company.

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.