FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| I | OMB APPROVAL | | | | | | | | | | |
|---|--------------------------|-----------|--|--|--|--|--|--|--|--|--|
| l | OMB Number: | 3235-0287 | | | | | | | | | |
| | Estimated average burden | | | | | | | | | | |
| l | 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

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 Addr | Issuer Name and Ticker or Trading Symbol UNITED PARCEL SERVICE INC [UPS] Date of Earliest Transaction (Month/Day/Year) | | | | | | | | | | tionship of R all applicabl Director | e) | erson(| 10% Ov | · I | | | | |
|--|--|--|--|--------|---------------------------------|--|---|------------------------------------|---------------------------------|--------------------|--|--|-------------------------------------|---|--|---|---|---|---|
| (Last) (First) (Middle) 55 GLENLAKE PARKWAY, NE | | | | | 02/08/2023 | | | | | | | | | X | Officer (gi below) Chief I | | e Other (s below) an Resources Office | | . , |
| (Street) ATLANTA GA 30328 | | | | | 4. If A | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | vidual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| (City) | (State) | (Zi | | | <u> </u> | | | | | | | | | <u> </u> | | | | | |
| 1. Title of Security (Instr. 3) 2. Trans Date | | | | | | vative Securities Acquesaction 2A. Deemed Execution Date, if any (Month/Day/Year) | | | 3. Transac Code (In 8) | tion | 4. Securi | Securities Acquired (A) or sposed Of (D) (Instr. 3, 4 an | | | 5. Amount Securities Beneficial Following Transactio | | Form: | Direct (D) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | | | | | Code | v | Amount (A) or (D) | | Price | (Instr. 3 and 4) | | | | | |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Da if any (Month/Day/Y | ite, T | 4. Transactio Code (Instr | | 5. Numb Derivativ Securitie Acquired or Dispo of (D) (Ir 4 and 5) | 6. Date E Expiratio (Month/D | n Date | Securities Underly | | | erlying | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficial Owned Following Reported | Ownersh Form: Direct (D or Indirect (I) (Instr. | Ownership | Beneficial Ownership t (Instr. 4) | |
| | | | C | Code | ode V (A) | | (D) | | | Expiration Date | Title | | Amount or Number of Shares | | Transaction(s) (Instr. 4) | | | | |
| Restricted Performance Units | (1) | 02/08/2023 | | | A | | 6,425 | | (1) | | (1) | Class Comn Stoc | non | 6,425 | \$0.0000 | 6,425 | ; | D | |
| Restricted Units 2023 | (2) | 02/08/2023 | | | A | | 3,188 | | (2) | | (2) | Class Comn Stoc | non | 3,188 | \$0.0000 | 3,188 | 3 | D | |

Explanation of Responses:

- 1. Restricted performance units awarded under the Company's Long Term Incentive Compensation Program following the completion of the performance period. Each unit automatically converts into one share of Class A common
- 2. Each unit automatically converts into one share of Class A common stock following the first anniversary of the grant date.

Eli Brown, Power of Attorney 02/10/2023

** Signature of Reporting Person

Date

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

- * 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.