FORM 4

# **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

OMB	APP	RO\	/AI

OMB Number:	3235-0287							
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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).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the

## 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

	n*	2. Issuer Name and Ticker or Trading Symbol UNITED PARCEL SERVICE INC [ UPS ]		all applicable)	on(s) to Issuer
(First) PARKWAY, NE	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 02/05/2025	X	Officer (give title below)	Other (specify below)
GA (State)	30328	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv	Form filed by One Rep	` ' '
	(First) PARKWAY, NE	struction 10.  ss of Reporting Person*  new W  (First) (Middle)  PARKWAY, NE  GA 30328	setruction 10.  2. Issuer Name and Ticker or Trading Symbol UNITED PARCEL SERVICE INC [ UPS ]  3. Date of Earliest Transaction (Month/Day/Year) 02/05/2025  4. If Amendment, Date of Original Filed (Month/Day/Year)	Ses of Reporting Person*  AREW W  2. Issuer Name and Ticker or Trading Symbol UNITED PARCEL SERVICE INC [ UPS ]  3. Date of Earliest Transaction (Month/Day/Year) 02/05/2025  4. If Amendment, Date of Original Filed (Month/Day/Year)  A State of Earliest Transaction (Month/Day/Year)  4. If Amendment, Date of Original Filed (Month/Day/Year)  6. Indiv	set ruction 10.  Set of Reporting Person*  (Pirst)  PARKWAY, NE   2. Issuer Name and Ticker or Trading Symbol UNITED PARCEL SERVICE INC [UPS]  3. Date of Earliest Transaction (Month/Day/Year) 02/05/2025  4. If Amendment, Date of Original Filed (Month/Day/Year)  GA  3. Oate of Earliest Transaction (Month/Day/Year)  CHF Commercial of X  Form filed by One Rep Form filed by More than

# Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	ion Date, Transaction Code (Instr.		4. Securities Ad Disposed Of (D			Securities	Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 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		3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transac Code (In 8)			6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Derivative	9. Number of derivative Securities Beneficially Owned Following Reported	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)		
Restricted Performance Units	(1)	02/05/2025		A		1,416		(1)	(1)	Class A Common Stock	1,416	\$0.0000	1,416	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 stock.

### Remarks:

matthewguffey.txt

Michael Hanson, Power of Attorney

\*\* Signature of Reporting Person Date

02/07/2025

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.