FORM 3

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

OMB APPROVAL

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## INITIAL STATEMENT OF 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 *  CLARK KEVIN P		2. Date of Event Requiring Statement (Month/Day/Year) 03/03/2025	3. Issuer Name and Ticker or Trading Symbol UNITED PARCEL SERVICE INC [ UPS ]					
(Last)	(First)	(Middle)		Relationship of Reporting Person(s) to Issuer (Check all applicable)		) to Issuer	5. If Amendment, Date of Original Filed (Month/Day/Year)	
55 GLENLAKE PARKWAY, NE			X	Director  Officer (give title below)	10% Owner Other (specify below)	6. Individual or Joint/Group Filing (Check Applicable Line)		
(Street) ATLANTA	GA	30328			25.011,	2010117	X Form filed by One Reporting Person Form filed by More than One Reporting Person	
(City)	(State)	(Zip)						

## Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	
Class B Common Stock	80	I	By LLC I
Class B Common Stock	67	I	By LLC II
Class B Common Stock	51	I	By Spouse
Class B Common Stock	15	I	By Trust I
Class B Common Stock	15	I	By Trust II

## Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	I I		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		Conversion Form: Direct (D) or	Form: Direct (D) or	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Price of Derivative Security Indirect (I) (Instr. 5)		

**Explanation of Responses:** 

Remarks:

kevinclark.txt

Michael Hanson, Power of Attorney

\*\* Signature of Reporting Person Date

03/04/2025

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

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.

 $<sup>^{\</sup>star}$  If the form is filed by more than one reporting person, see Instruction 5 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).