## FORM 4

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

OMB APPRO	OVAL
OMB Number:	3235-0287
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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

1. Name and Address of Reporting Person *- HILL ALLEN E					2. Issuer Name and Ticker or Trading Symbol UNITED PARCEL SERVICE INC [UPS]							5	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
55 GLENLA		(First) WAY, NE	** ***					Date of Earliest Transaction (Month/Day/Year) 09/2005						X Officer (give title below) Other (specify below) Senior VP, General / Counsel & Secretary			
(Street) ATLANTA, GA 30328				4. If Amendment, Date Original Filed(Month/Day/Year)							y/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				
(City)		(State)	(Zip)				Table	I - I	Non-D	erivativ	ve Securiti	es Acquir	ed, Disposed	of, or Benef	icially Owned		
(Instr. 3) Date		2. Transaction Date (Month/Day/Year	2A. Deemed Execution Date, if any (Month/Day/Year)		if Code (Instr.	(Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		i C	6. Ownership Form: Direct (D) or Indirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
							Cod	le	v	Amour	(A) or (D)	Price			I) Instr. 4)	(111011111)	
Class A Com	ımon Stock	(	01/05/2005				G		V		D	\$ 83.92	32,269.1946		]	)	
Class A Com	ımon Stock	3	01/06/2005				G		V		D	\$ 83.75	32,263.1946		1	)	
Class A Common Stock 03/09/2005		03/09/2005	J <u>(1)</u>		)	V	4.644	2 A	\$ 77.11 <sup>3</sup>	32,267.8388		1	)				
			Table II					quire	in thi a cur ed, Dis	s form rently	are not revalid OMI	equired t B control eficially O	o respond u number.		on contained form displays		1474 (9-02
1. Title of Derivative Security (Instr. 3)	2. 3. Transaction Conversion Date Or Exercise (Month/Day/Yes Price of Derivative Security			4. 5. Code Se (Instr. 8) Ac (Irstr. 8) (Irst		5. Number Derivative Securities Acquired (	Number of erivative ecurities cquired (A) Disposed of D) nstr. 3, 4,		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)			9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s)	10. Ownersh Form of Derivativ Security: Direct (D or Indirect (I)	ve Owners (Instr. 4	
				Co	ode	v	(A)	(D)	Date	cisable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	(Instr. 4	)
Phantom Stock Units	\$ 0 (2)	03/09/2005		J!	(3)	,	73.4208			<u>(4)</u>	(4)	Class Commo	on 73.4208	\$ 77.11	17,229.444	1 D	
					<u>(5)</u>							Class .	A				

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
HILL ALLEN E 55 GLENLAKE PARKWAY, NE ATLANTA, GA 30328			Senior VP, General	Counsel & Secretary			

### **Signatures**

Allen E. Hill	03/11/2005
***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) Shares acquired through reinvestment of dividends within Qualified Stock Ownership Plan (QSOP).
- (2) One for One
- (3) Phantom stock units acquired through reinvestment of dividends within Deferred Compensation Plan.
- (4) The settlement date of the phantom stock generally will be the earlier of death, disability, retirement or termination of employment.
- $\textbf{(5)} \ \ Restricted \ Performance \ stock \ units \ acquired \ through \ reinvestment \ of \ dividends.$
- (6) The settlement date of the restricted performance units generally will be five years from the date of grant.

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.