FORM 4

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

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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 * SOUPATA LEA N				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_ Director10% Owner				
55 GLENLA		(First) WAY, NE		3. Date of Earliest Transaction (Month/Day/Year) 03/09/2005				X	X Officer (give title below) Other (specify below) Senior / Vice President						
(Street)			•	4. If Amendment, Date Original Filed(Month/Day/Year)					_X_	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, GA 30328 (City) (State) (Zip)			Table I. Non Dominating Co. 111					as A southed	uired, Disposed of, or Beneficially Owned						
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye					(Instr. 8)				of (D) Ow Tra	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		. (Ownership Form:	Beneficial	
				(Month/Day/Year)		Code	V	Amount	(A) or (D)	Price (Ins	Instr. 3 and 4)		(Ownership (Instr. 4)
Class A Com	mon Stock		03/09/2005			J <u>(1)</u>	V	5.678		\$ 77.11 242	2,484.018	4])	
	rt on a separa	ate line for each cl	ass of securities be	neficially own	ned direc	ctly or ir	Pers	ons wh					on contained		474 (9-02)
	rt on a separa	tte line for each cl		- Derivative S	Securiti	es Acqu	Pers in th a cu	ons who	are not r valid OMI of, or Bene	equired to B control n	respond u umber.		on contained form displays		474 (9-02)
	2. Conversion	3. Transaction	Table II	- Derivative S (e.g., puts, c 4. if Transaction Code	Securiticalls, wa 5. Nion Deri Securitical Securitica	res Acquarrants, number of evative arrities uired (Abisposed ttr. 3, 4,	Persin that a cu	ons who	are not revalid OMI of, or Benerible securities cisable on Date	equired to B control n	respond unumber. ned I Amount ing	8. Price of		10. Ownersh Form of Derivativ Security: Direct (D or Indirec	11. Natur of Indirec Beneficia Ownersh (Instr. 4)
Reminder: Repo	2. Conversion or Exercise Price of Derivative	3. Transaction Date	Table II and 3A. Deemed Execution Date, r) any	- Derivative (e.g., puts, c (e.g., puts, c 4. If Transactic Code ar) (Instr. 8)	Securiticalls, wa 5. No ion Deri Securitical Acquiration D(D) (Inst and securities)	es Acquirrants, rumber of vative irrities uired (A bisposed tr. 3, 4, 5)	Persin the a cu	ons who is form rrently visposed of convert ate Exerc Expiration onth/Day/	are not r valid OMI of, or Bene ible secur isisable on Date Year) Expiration	required to B control n reficially Ownities) 7. Title and of Underly Securities (Instr. 3 an	respond unumber. ned I Amount ing	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported	10. Ownersh Form of Derivativ Security: Direct (D or Indirec	11. Natur of Indirec Beneficia Ownersh (Instr. 4)

Reporting Owners

	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
SOUPATA LEA N 55 GLENLAKE PARKWAY, NE ATLANTA, GA 30328	X		Senior	Vice President	

Signatures

Lea N. Soupata	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) Restricted Performance stock units acquired through reinvestment of dividends.
- (4) 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.