FORM 4

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

OMB APPROVAL					
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. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X Officer (give title below) Other (specify below) Senior VP, General / Counsel & Secretary				
(Last) (First) (Middle) 55 GLENLAKE PARKWAY, NE				3. Date of Earliest Transaction (Month/Day/Year) 10/28/2005											
(Street) ATLANTA, GA 30328				4. If Amendment, Date Original Filed(Month/Day/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 - Non-Derivative Securities Acqu						es Acquire	ured, Disposed of, or Beneficially Owned					
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year)		2A. Deemed 3. Transa Execution Date, if Code				of (D) B	Beneficially	of Securities y Owned Following ransaction(s) d 4)		Ownership Form: Direct (D)	Beneficial Ownership				
						Code	V	Amount	(A) or (D)	Price	or Indirect (I) (Instr. 4)		()	(Instr. 4)	
Class A Co	ommon Sto	ock	10/19/2005			J <u>(1)</u>	V 2	20.7539	A	\$ 70.83	32,349.30	72	I)	
Reminder: Re	eport on a sep	parate line for ec		<u> </u>			conta	ined in t	this fo	rm are no	ot required	of inform to respon ontrol num	nd unless th		474 (9-02)
Reminder: Re	eport on a sep	parate inie ioi et		,			_								
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative	3. Transaction	Table II -	- Derivative Secu (e.g., puts, calls 4. e, if Transaction Code	5. Num of Deri	Acquirants, on the state of the	ired, Dispetions, 6. Date and Exp	ined in t displays	this for a cur or Berole secu	rm are no rently val	ot required lid OMB co Owned d Amount ying	I to respond	9. Number of Derivative Securities Beneficially Owned	10. Ownersh Form of Derivativ Security	11. Natur of Indirec Beneficia Ownersh (Instr. 4)
1. Title of Derivative Security	2. Conversion or Exercise Price of	3. Transaction Date	Table II -	- Derivative Secu (e.g., puts, calls 4. e, if Transaction Code	5. Num of Deri Secu Acqu (A) (s Acquirants, on the property of the property	ired, Dispetions, 6. Date and Exp	nined in to displays sposed of, convertib Exercisaborization De	this for a cur or Berole secu	rm are no rently val neficially (nrities) 7. Title an of Underly Securities	ot required lid OMB co Owned d Amount ying	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially	10. Ownersh Form of Derivativ Security: Direct (I or Indire	11. Natur of Indirec Beneficia Ownersh (Instr. 4)
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Reporting Owners

	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	11/01/2005
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) Reflects an acquisition of shares pursuant to the Qualified Stock Ownership Plan (QSOP).
- (2) One for One
- $\textbf{(3)}\ \ 20\%\ of\ the\ restricted\ stock\ units\ vest\ on\ October\ 15,\ 2006\ and\ on\ each\ anniversary\ date\ thereafter.$

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.