Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| 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

| OMB APPROVAL | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | |
| Estimated average burden | | | | | | | |
| hours per response: | 0.5 | | | | | | |

| 1. Name and Address of Reporting Person* Reynolds Stephen R (Last) (First) (Middle) C/O ARAMARK HOLDINGS CORPORATION 1101 MARKET STREET | | | | | 3. [| 2. Issuer Name and Ticker or Trading Symbol ARAMARK Holdings Corp [ARMK] 3. Date of Earliest Transaction (Month/Day/Year) 12/20/2013 | | | | | | | | | ck all applic Directo Officer below) | etor er (give title | | 10% Owner Other (specify below) | |
|---|------------|--|---|-----------------|---|---|----------|----------------------------|--|-----------|---|---|---|------------------------------------|---|--|----------------|--|---------------------------------------|
| (Street) | DELPHIA P. | | 19107 | | 4.1 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Ind Line) | | | | | |
| (City) | (S | tate) | (Zip) | | | | | | | | | | | | | | | | |
| | | Tab | le I - Nor | n-Deriv | ativ | e Se | curities | s Ac | quired | , Dis | posed o | of, or Bo | enefic | ially | Owned | | | | |
| 1. Title of Security (Instr. 3) 2. Trans: Date (Month/L | | | | Execution Date, | | 3. 4. Securities Disposed Of Code (Instr. 8) 5) | | ties Acqui d Of (D) (Ir | red (A) str. 3, 4 | or and | 5. Amount of Securities Beneficially Owned Following Reported | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | |
| | | | | | | | | Code | v | Amount | ınt (A) or (D) | | ice | Transaction(s) (Instr. 3 and 4) | | | | (11341.4) | |
| Common | Stock | | | 12/20 | 0/201 | .3 | | | A | | 3,411 | (1) A | | \$ <mark>0</mark> | 89, | 89,798 D | | | |
| | | - | Table II - I | | | | | | | | osed of, converti | | | | Owned | | | • | |
| 1. Title of Derivative Security (Instr. 3) 2. Conversion Exercic Price of Derivative Security | | ercise (Month/Day/Year) of ative | 3A. Deemed Execution Date, if any (Month/Day/Year) | | 4. Transaction Code (Instr. 8) | | of | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | е | 7. Title and Amour of Securities Underlying Derivative Securit (Instr. 3 and 4) | | | B. Price of Derivative Security (Instr. 5) | 9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4) | e s Illy | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercisa | | Expiration Date | Title | Amo or Num of Shar | ber | | | | | |
| Stock Option (Right to Buy) | \$23.92 | 12/20/2013 | | | A | | 24,654 | | (2) | | 12/20/2023 | Commor Stock | 24,6 | 554 | \$0 | 24,65 | 4 | D | |

Explanation of Responses:

- 1. Represents restricted stock units, which vest in four equal annual installments beginning on the first anniversary of the date of grant.
- 2. These options to purchase shares of common stock vest in four equal annual installments beginning on the first anniversary of the date of grant.

/s/ Megan Timmins, as 12/23/2013 Attorney-in-fact

** Signature of Reporting Person Date

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.