FORM 4

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

|   | OMB APPROVAL |             |  |  |  |  |  |  |  |  |  |
|---|--------------|-------------|--|--|--|--|--|--|--|--|--|
|   | OMB Number:  | 3235-028    |  |  |  |  |  |  |  |  |  |
| - |              | la constant |  |  |  |  |  |  |  |  |  |

37 Estimated average burden hours per response: 0.5

# Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

|   |  |                                      |                 |                 | OI :   | Section   | 1 30(11)                                      | or the  | invest        | ment C                        | ompany Act          | 01 194  | 40                          |   |   |   |   |  |  |  |
|---|--|--------------------------------------|-----------------|-----------------|--|---|---|---|---------------|-------------------------------|---------------------|---|-----------------------------|---|---|---|---|--|--|--|
| 1. Name and Address of Reporting Person* FOSS ERIC J              |  |                                      |                 |                 |  | 2. Issuer Name <b>and</b> Ticker or Trading Symbol Aramark [ ARMK ] |   |   |               |                               |                     |   |                             |   |   |   | p of Reporting<br>plicable)   | g Person(s) to   | Issuer   |  |
| FOSS ERIC J   |  |                                      |                 |                 |  |   |   |   |               |                               |                     |   |                             |   | X   | Direc   | ctor  | 10%  | Owner  |  |
| (Last)  | (Last) (First) (Middle)                                |                                      |                 |                 |  |   | Date of Earliest Transaction (Month/Day/Year) |   |               |                               |                     |   |                             |   | X   | Offic<br>belov                                      | er (give title<br>w)  | Othe<br>belov  | r (specify<br>v)   |  |
| ARAMA   | 06/  | 06/20/2017                           |                 |                 |  |   |   |   |               |                               |                     | Cha   | Chairman, President and CEO |   |   |   |   |  |  |  |
| 1101 MARKET STREET  |  |                                      |                 |                 |  |   |   |   |               |                               |                     |   |                             |   |   |   |   |  |  |  |
| (Street)  |  |                                      |                 | -   4. If       | 4. If Amendment, Date of Original Filed (Month/Day/Year) |   |   |   |               |                               |                     |   |                             | 6. Individual or Joint/Group Filing (Check Applicable Line) |   |   |   |  |  |  |
| , ,   | ELPHIA PA  | A                                    | 19107           |                 |  |   |   |   |               |                               |                     |   |                             |   | X Form filed by One Reporting Person                              |   |   |  |  |  |
|   |  |                                      | -               |                 |  |   |   |   |               |                               |                     |   |                             | Forn<br>Pers  |   | e than One Re                                       | porting   |  |  |  |
| (City)  | (St  | ate) (                               | Zip)            |                 |  |   |   |   |               |                               |                     |   |                             |   |   |   |   |  |  |  |
|   |  | Tabl                                 | e I - N         | lon-Deriv       | ative  | Sec   | uritie  | s Ac  | quire         | ed, D                         | isposed o           | f, o  | r Bei                       | nefic   | ially   | Owne  | ed  |  |  |  |
| 1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Y |  |                                      |                 | Execution Date, |  | 3.<br>Transaction<br>Code (Instr.<br>8)                             |   | 4. Securities Acquired (A) or<br>Disposed Of (D) (Instr. 3, 4 an  |               |                               |                     | nd 5) Securi<br>Benefi<br>Owned   |                             | ties<br>cially<br>Following                                 | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4) | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership |   |  |  |  |
|   |  |                                      |                 |                 |  |   | Code  | v   | Amount        |                               | (A) or<br>(D)       | Price   | •                           | Reported<br>Transaction(s)<br>(Instr. 3 and 4)              |   |   | (Instr. 4)  |  |  |  |
| Common Stock 06/20/201  |  |                                      |                 | 017             | .7   |   |   | F <sup>(1)</sup>  |               | 30,771.0908                   |                     | D   | \$41                        | .02   | 1,382,563.4564  |   | D   |  |  |  |
| Common Stock  |  |                                      |                 |                 |  |   |   |   |               |                               |                     |   |                             |   | 5   | 9,241   | I   | By<br>Grantor<br>Retained<br>Annuity<br>Trust                            |  |  |
|   |  | Та                                   | ble II          |                 |  |   |   |   |               |                               | oosed of, convertib |   |                             |   |   | wned  |   |  |  |  |
| 4 Tid 4   | •  | 0. T                                 | 04 D            |                 |  |   | _   |   |               |                               |                     | _   |                             |   | _   |   | 0 November 2  | : 140  | 44 Notions   |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)               | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | Execu<br>if any |                 |  | Transaction<br>Code (Instr.   |   | 5. Number<br>of<br>Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3, 4<br>and 5) |               | te Exer<br>ation D<br>th/Day/ |                     | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>Security (Instr.<br>and 4) |                             | f<br>S<br>g   | Deri<br>Sec   |   | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s<br>(Instr. 4) | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |
|   |  |                                      |                 |                 |  | v   | (A)   | (D)   | Date<br>Exerc | cisable                       | Expiration<br>Date  | Title   | or<br>No<br>of              | umber   |   |   |   |  |  |  |

#### **Explanation of Responses:**

1. Represents shares withheld to pay taxes applicable to vesting of restricted stock units and the delivery of cash in lieu of fractional shares in accordance with the terms of the award.

### Remarks:

/s/ Robert T. Rambo, as 06/22/2017 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.