FORM 4

Section 16. Form 4 or Form 5 obligations may continue. See

Instruction 1(b).

Check this box if no longer subject to

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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Machinaton	$D \subset \mathcal{A}$	0540	

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* ZILLMER JOHN J					2. Issuer Name and Ticker or Trading Symbol Aramark [ARMK]								(Che	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
<u>EIEDMBIC JOHN J</u>														_		10% Owne				
(1 4) (5:4) (M: -11-)				2 00	O. Data of Facilitat Transaction (Manth (Davidson))									Office below	er (give title		Other (: below)	specify		
(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 12/12/2024								Chief Executive Officer							
C/O ARAMARK			12/1	12,12,202																
2400 MARKET STREET												<u> </u>								
				4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)	EL DIVI - D		0100											Line	,	filed by One	e Reno	rtina Pers	on	
PHILAD	ELPHIA P.	A I	9103											1 10	_	,	•	Ü		
-															Form filed by More than One Reporting Person					
(City)	(Sta	ate) (Z	Zip)																	
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of S	Security (Inst	r. 3)		2. Transac	tion	ion 2A. Deemed				3. 4. Securities Acquired (A)				A) or	5. Amo	unt of 6. O		nership	7. Nature	
Date (Month/Day			Execution Date,			Transaction Disposed Of (D) (Instr. 3, Code (Instr. 5)			, 4 and	Securit Benefic				of Indirect Beneficial						
(10011)			((Month/Da			/Year)	8)					Following (I) (I		(Instr. 4)	Ownership (Instr. 4)				
								Code	v	Amount	(A)	or	Price	Transa	action(s)			(111511.4)		
						<u> </u>		(D)	<u> </u>		(Instr. 3	3 and 4)								
Common Stock 12/12/20				024		A		709.546 ⁽¹⁾ A		\$ <mark>0</mark>	823,946.465			D						
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
(e.g., puts, calls, warrants, options, convertible securities)																				
Derivative Conversion Date Executive or Exercise (Month/Day/Year) if an			if any	emed 4. Ition Date, Trans. Code h/Day/Year) 8)				6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		S	. Price of derivative security nstr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transactio (Instr. 4)	y D (I	0. Ownership Form: Direct (D) or Indirect () (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
						v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amo or Num of Shar	ber						

Explanation of Responses:

1. Represents dividend equivalent rights in connection with the Issuer's quarterly dividend and accrued to the reporting person on restricted stock units. These dividend equivalent rights vest on the same schedules as the underlying awards.

Remarks:

/s/ Harold B. Dichter, as 12/13/2024 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.