FORM 4

## **UNITED STATES SECU**

Washington, D.C. 20549

| ΚI | HES | AND | EXC | HANGE | COMM | ISSION |
|----|-----|-----|-----|-------|------|--------|
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| OIVIB APPROVAL    |           |  |  |  |  |  |  |  |  |
|-------------------|-----------|--|--|--|--|--|--|--|--|
| OMB Number:       | 3235-0287 |  |  |  |  |  |  |  |  |
| Estimated average | e burden  |  |  |  |  |  |  |  |  |

0.5

hours per response:

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

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

## 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

| Name and Address of Reporting Person*  Heller Bridgette P  |   |         |           |              | 2. Issuer Name <b>and</b> Ticker or Trading Symbol Aramark [ ARMK ] |  |   |      |  |                         |                          | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable)                           |   |  |                                    |   |  |  |  |
|--|---|---------|-----------|--------------|---|--|---|------|--|-------------------------|--------------------------|---|---|--|------------------------------------|---|--|--|--|
| (Last) (First) (Middle)  |   |         |           |              | 3. Date of Earliest Transaction (Month/Day/Year) 09/03/2024         |  |   |      |  |                         |                          | -   | _   | r (give title  |                                    | 10% Ov<br>Other (s<br>below)                                      |  |  |  |
| C/O ARAMARK<br>2400 MARKET STREET  |   |         |           |              | If Amendment, Date of Original Filed (Month/Day/Year)               |  |   |      |  |                         |                          |   | 6. Individual or Joint/Group Filing (Check Applicable                     |  |                                    |   |  |  |  |
| (Street) PHILADELPHIA PA 19103   |   |         |           |              |   |  |   |      |  |                         |                          |   | /   | Line)  Form filed by One Reporting Person  Form filed by More than One Reporting  Person |                                    |   |  |  |  |
| (City)   | (Sta  | ate) (Z | Zip)      |              |   |  |   |      |  |                         |                          |   |   |  |                                    |   |  |  |  |
|  |   | Table   | I - No    | n-Deriva     | tive S  | Secu   | rities  | Acq  | uired,   | Dis                     | posed of                 | , or E  | Bene  | ficiall  | ly Own                             | ed  |  |  |  |
| 1. Title of Security (Instr. 3)  2. Transact Date (Month/Day   |   |         |           |              | Execution Date,   |  | 3.<br>Transaction<br>Code (Instr.<br>8)  4. Securities Acquire<br>Disposed Of (D) (Inst |      |  | uired (a<br>Instr. 3    | A) or<br>s, 4 and        | Securit<br>Benefic<br>Owned   | 5. Amount of<br>Securities<br>Beneficially<br>Owned Following<br>Reported |  | n: Direct<br>r Indirect<br>str. 4) | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |  |  |
|  |   |         |           |              |   |  |   | Code | v  | Amount                  | (A)<br>(D)               | or  | Price   | Transa<br>(Instr. 3  | ction(s)                           |   |  | (111511. 4)  |  |
| Common   | Stock   |         |           | 09/03/2      | 2024  |  |   | A    |  | 65.537 <sup>(1)</sup> A |                          | \$ <mark>0</mark>   | \$0 25,107.171  |  |                                    | D   |  |  |  |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |   |         |           |              |   |  |   |      |  |                         |                          |   |   |  |                                    |   |  |  |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)  | vative Conversion Date Execution I rity or Exercise (Month/Day/Year) if any |         | ion Date, | Code (Instr. |   | of<br>Deriv<br>Secu<br>Acqu<br>(A) o<br>Dispo<br>of (D<br>(Instr | of E  |      | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |                         |                          | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>Security (Inst<br>3 and 4) |   | Price of<br>erivative<br>ecurity<br>nstr. 5)   | ative derivative<br>ity Securities |   | 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) |  |
|  |   |         |           |              | Code  | v  | (A)   | (D)  | Date<br>Exercis  | able                    | Expiration le Date Title |   | Amo<br>or<br>Num<br>of<br>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 deferred stock units held by the reporting person. These dividend equivalent rights vest on the same schedules as the underlying awards.

## Remarks:

/s/ Harold B. Dichter, as 09/05/2024 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.