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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject t	റ
Section 16. Form 4 or Form 5	0
obligations may continue. See	
Instruction 1(b).	

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

1. Name and Address of Reporting F Morrison Christina	Person*	2. Issuer Name and Ticker or Trading Symbol <u>Aramark</u> [ARMK]		5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
(Last) (First)	(Middle)		_ x	Officer (give title below)	Other (specify below)			
C/O ARAMARK 1101 MARKET STREET		11/18/2014		Senior Vice President, Finance				
		4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv	vidual or Joint/Group Fili	ng (Check Applicable			
(Street) PHILADELPHIA PA	19107		X	Form filed by One Re Form filed by More th				
(City) (State)	(Zip)	_		Person	an one repolung			

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Transaction Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			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	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(11311.4)
Common Stock	11/18/2014 ⁽¹⁾		A		4,883.373(2)	Α	\$0.00	66,832.9148	D	

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (8)		tion of Expiration Date (Month/Day/Year) Amount of Securities Curities Acquired (A) or Disposed of (D) Expiration Date (Month/Day/Year) Derivative Security (Instr. 3 and 4) Derivative Security (Instr. 3 and 4) Composed			Expiration Date		Expiration Date Amou (Month/Day/Year) Secur Under Deriva Secur			Expiration Date Amount of Month/Day/Year) Securities Underlying Derivative Security (Instr. 3				9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	lerivative Ownership securities Form: beneficially Direct (D) owned or Indirect ollowing (I) (Instr. 4) teported ransaction(s)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares									

Explanation of Responses:

1. The date of the transaction represents the date on which the financial performance criteria of a previously granted performance stock unit award were determined to have been satisfied.

2. Represents the number of underlying shares of common stock determined to have been earned on a previously granted performance stock unit award based upon the satisfaction of certain fiscal 2014 financial performance criteria of such award. Also includes dividend equivalents accrued on such award since the date of grant calculated based upon the number of underlying shares of common stock earned. The performance stock unit award is now subject only to time-based vesting, and will vest in equal annual installments on each of December 20, 2014, 2015 and 2016.

Remarks:

/s/ Megan Timmins, as Attorney-in-fact

11/20/2014

** 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.

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