FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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 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* ZILLMER JOHN J						2. Issuer Name and Ticker or Trading Symbol Aramark [ARMK]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last)	(I = -4)					3. Date of Earliest Transaction (Month/Day/Year) 08/15/2024							y	belov	er (give title w) Chief Executiv		Other (s below) Officer	specify	
2400 MARKET STREET					4. If <i>i</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)							Line)	<u>·</u>					
(Street) PHILAD	(Street) PHILADELPHIA PA 19103													V	Form filed by One Reporting Person Form filed by More than One Reporting Person				
Rule 10b5-1(c) Transaction Indication																			
					Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.										nded to				
		Table	I - No	on-Deriva	tive	Secui	rities	Acc	quired	l, Dis	posed of	, or E	Benef	icially	y Own	ed			
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/					(Year) Execution		tion D			3. Transaction Code (Instr. 8) 4. Securities Disposed Of 5)		s Acquired (A) of f (D) (Instr. 3, 4		or and	Securit Benefic Owned	curities neficially ned Following		n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership
									Code	v	Amount	(A) (D)	or Pri	ice	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common Stock 08/15/20)24			A		140,608(1)	A	. \$3	35.56	819,	819,009.907		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)	ative Conversion Date rity or Exercise (Month/Day/Year) if any		ıtion Date,	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exerc Expiration Da (Month/Day/Y		ate	7. Title and Amount of Securities Underlying Derivative Security (In: 3 and 4)		De Se (In	Price of rivative curity str. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exerci	sable	Expiration Date	Title	Amou or Numb of Share	er					

Explanation of Responses:

1. Represents restricted stock units, which vest on the earlier to occur of; (i) the third anniversary of the date of grant and (ii) the date that is six months following the date (the "Succession Date") upon which a successor Chief Executive Officer appointed by the Board on a permanent basis commences active employment with the Issuer (or such earlier date following the Succession Date as may be determined by the Board in its sole discretion), subject to the reporting person's continued employment with the Issuer through such vesting date.

Remarks:

/s/ Harold Dichter, as Attorney-in-fact

08/16/2024

** 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.