### FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

washington, D.C. 20049	OMB APPROVAL			
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-0287		

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 or Section 30(h) of the Investment Company Act of 1940

							( )				. 1 )			_						
1. Name and Address of Reporting Person*						2. Issuer Name <b>and</b> Ticker or Trading Symbol									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
FOSS ERIC J					Aramark [ ARMK ]									- 1		ector 10% (		.0% C	)wner	
,												ficer (give title	(	Other	(specify					
(Last)	(Fi	rst) (	Middle)					t Tran	saction	(Mont	h/Day/Year)				DE	low)		elow)		
ARAMARK						06/07/2016									C	hairman, Pre	esident an	d CE	O	
1101 MA	RKET STF	REET																		
					4. If	Amen	dment,	Date	of Origi	inal Fil	ed (Month/Da	ay/Ye	ar)	6	. Individua	l or Joint/Grou	p Filing (Ch	eck A	pplicable	
(Street)															ine)	file d b O	- D			
PHILAD	ELPHIA PA	A	19107													orm filed by On				
-																rm filed by Mo erson	re man On	е кер	orung	
(City)	(St	ate) (	Zip)																	
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of S	ecurity (Inst	r. 3)		2. Transacti Date		Execu	eemed Ition Da	ate,	3. Transaction Code (Instr. 8)  4. Securities Acquired Disposed Of (D) (Instr.					5) Sec	mount of urities	6. Ownership Form: Direct		7. Nature of Indirect Beneficial		
				(Month/Day	(Year)	if any (Mont	h/Day/\	rear)					Owi	Beneficially Owned Following		(D) or Indirect (I) (Instr. 4)				
									Code	v	Amount		(A) or (D)	Pric	Trai	orted saction(s) r. 3 and 4)			(Instr. 4)	
Common	Stock			06/07/2	016	016			A		2,053.3718 <sup>(1)</sup> A		\$	0 1,4	1,454,557.516					
										Ш					_				Held by	
									H									grantor		
Common Stock										H						100,000	I		retained	
																			annuity	
																			trust	
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
				(e.g., p	uts, c	alls,	warr	ants	, opti	ons,	convertib	le s	ecuri	ties)						
1. Title of Derivative	2. Conversion or Exercise	3. Transaction Date (Month/Day/Year)	3A. De Execu if anv	emed tion Date,	4. Transa		5. Number of		Expira		Amount of			8. Price of Derivative	e derivative	Owne	Ownership	11. Nature of Indirect		
Security (Instr. 3)	n/Day/Year)	Code ( 8)	Securities		(Month/Day/Year)			Und	Securities Underlying		Security (Instr. 5)	Securities Beneficially	Direct	Form: Direct (D)	Beneficial Ownership					
	Derivative Security					Acquired (A) or Disposed of (D)					Derivative Security (Instr. and 4)		str. 3		Owned Following		or Indirect (I) (Instr. 4)	(Instr. 4)		
															Reported Transaction	ı(s)				
						(Instr. 3, 4 and 5)										(Instr. 4)				
					<del>                                     </del>		1		Am	ount	1									
								or	nber											
				Code	code V (A) (D)			Date Exercisable		Expiration Date	Title	of Title Shares								

## **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 and performance stock units held by the reporting person. These dividend equivalent rights vest on the same schedules as the underlying awards.

### Remarks:

/s/ Robert T. Rambo, as 06/09/2016 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.