FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20049	OMB APP		
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:		

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 APP	ROVAL
OMB Number:	3235-0287
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hours per response	: 0.5

100	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/a) Can Instruction 10

Name and Address of Reporting Person* Bruno Marc A					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) (First) (Middle) ARAMARK 2400 MARKET STREET (Street) PHILADELPHIA PA 19103														V	Office	er (give title	Other ((specify		
					3. Date of Earliest Transaction (Month/Day/Year) 11/04/2024									below) below) COO, U.S. Food & Facilities							
					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting							
(City)	(Sta	ate) (Z	Zip)													Perso	on				
		Table	I - N	Non-Deriva	tive	Secur	ities	Acc	quire	ed, D	Disp	osed of	, or E	Bene	ficially	Own	ed				
1. Title of Security (Instr. 3)				2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Dat if any (Month/Day/Ye		TI C			4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and				Securi Benefi Owned	5. Amount of Securities Beneficially Owned Following		m: Direct or rect (I)	7. Nature of Indirect Beneficial Ownership		
							c	Code V		Amount		(A) or (D)	or I	Price	Reported Transaction(s) (Instr. 3 and 4)		(Ins	nstr. 4)	(Instr. 4)		
				11/04/202	4				Α		15,014(1)		A	A	\$ <mark>0</mark>	257,050.108		D			
				11/04/202	4				F	F		17,532.944(2)	\$38.21	1 239,517.164		D			
		Tal	ole I	I - Derivati (e.g., pu								sed of, o				Owne	d				
Security or (Instr. 3) Pr	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Exe if an	Deemed cution Date, ry nth/Day/Year)		action (Instr.	5. Number of Derivative Securities Acquired (A) or Dispose of (D) (Instr. 3, and 5)		Exp	iration	n Date	ercisable and Date y/Year)		7. Title and Amount of Securities Underlying Derivative Security (In: 3 and 4)		Price of rivative curity str. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	ly C	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficia Ownersh (Instr. 4)	
					Code	v	(A)	(D)	Date Exe	e rcisab		Expiration Date	Title	Amo or Num of Shar	ber						

- 1. Represents common stock earned and delivered on a performance stock unit award previously granted in November 2021 based upon the satisfaction of certain financial performance criteria of such award. Also includes dividend equivalents accrued on such awards since the date of grant calculated based upon the number of underlying shares of common stock earned.
- 2. Represents shares withheld to pay taxes applicable to the vesting of performance stock units, including performance stock units which were deemed to have been earned on November 6, 2023, and which were delivered on November 4, 2024

Remarks:

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

** Signature of Reporting Person

11/06/2024

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.