SEC Form 4

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to Section 16. Form 4 or Form 5 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 |
|-----------------------|-----------|
| Estimated average but | urden |
| hours per response: | 0.5 |

| 1. Name and Addres | 1 0 | | 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 | | | |
| | | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) 09/08/2021 | | Officer (give title below) | Other (specify below) | | | |
| C/O ARAMARK | C | | | | | | | | |
| 2400 MARKET STREET | | | | C. In dia | | | | | |
| | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Individual or Joint/Group Filing (Check Applicab Line) | | | | | |
| (Street) | | | | X | orting Person | | | | |
| PHILADELPHIA PA 19103 | | 19103 | | | Form filed by More than Person | One Reporting | | | |
| (City) (State) (Zip) | | | | | | | | | |

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

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | if any ' | | | | | | Securities Beneficially | 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 | | Price | Transaction(s) (Instr. 3 and 4) | | (1130. 4) |
| Common Stock | 09/08/2021 | | Α | | 14.743(1) | Α | \$ <mark>0</mark> | 8,925.364 | D | |

| Tal | | | | ired, Disposed of, o options, convertib | | | d | |
|-----|------------|----|-----------|---|--------------|-------------|--------------|-----|
| | 3A. Deemed | 4. | 5. Number | 6. Date Exercisable and | 7. Title and | 8. Price of | 9. Number of | 10. |

| 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) | | of | | 6. Date Exerc Expiration Da (Month/Day/Y | Amount of Securities | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 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. 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:

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

09/09/2021

** 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.