Aramark Form 4/A December 18, 2014

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

Number: 3235-0287

Expires: January 31, 2005

Estimated average burden hours per response... 0.5

5. Relationship of Reporting Person(s) to

Check this box if no longer subject to Section 16. Form 4 or

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

2. Issuer Name and Ticker or Trading

Form 5 obligations may continue. See Instruction Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person *

SUTHERLAND L FREDERICK			Symbol Aramark [ARMK]					Issuer (Charles II applicable)			
(Last) (First) (Middle) C/O ARAMARK, 1101 MARKET STREET			3. Date of Earliest Transaction (Month/Day/Year) 12/11/2014					(Check all applicable) Director 10% OwnerX_ Officer (give title Other (specify below) Exec Vice President, CFO			
File				endment, D nth/Day/Yea 014	Oate Origina ar)	.1		6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting			
(City)	(State)	(Zip)						Person			
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	•	d Date, if	3.	4. Securition(A) or Dis (Instr. 3, 4)	ies Ac sposed	quired l of (D)	uired, Disposed of, 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	12/11/2014			F(1)	13,763 (2)	D	\$ 29.55	662,116.5179 (3)	D		
Common Stock								325,000	I	See footnote (4)	
Common Stock								235,000	I	By Spouse	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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SEC 1474

(9-02)

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displays a currently valid OMB control number.

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

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Titl	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	orNumber	Expiration Date		Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ities	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Own
	Security				Acquired						Follo
	·				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						· ·
					4, and 5)						
									Amount		
						Date	Expiration	m: 1	or		
						Exercisable	Date	of	Number		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

SUTHERLAND L FREDERICK C/O ARAMARK 1101 MARKET STREET PHILADELPHIA, PA 19107

Exec Vice President, CFO

Signatures

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

12/18/2014

**Signature of Reporting Person

Date

Explanation of Responses:

- * 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).
- (1) Represents shares withheld to pay taxes applicable to vesting of restricted stock units.
- (2) This Form 4 is being amended to report the correct number of shares withheld to pay taxes applicable to vesting of restricted stock units and to correct the resulting balance of securities beneficially owned by the Reporting Person following the transaction.
- (3) The number of shares following the reported transaction reflects a change due to rounding.
- (4) These shares of common stock are held by a family limited liability company for which Mr. Sutherland serves as a manager.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

Reporting Owners 2