FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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| OMB Number: | 3235-0104 | | | |
|--------------------------|-----------|--|--|--|
| Estimated average burden | | | | |
| hours per response: | 0.5 | | | |

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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. Name and Address of Reporting Person DONOVAN TIMOTHY R | 2. Date of Event Requiring Statement (Month/Day/Year) 09/08/2023 | 3. Issuer Name and Ticker or Trading Symbol Vestis Corp [VSTS] | |
|---|--|--|--------------|
| (Last) (First) (Middle) 2400 MARKET STREET | | 4. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director The control of Reporting Person(s) to Issuer (Month/Day/Year) 5. If Amendment, Date of Original (Month/Day/Year) The control of Reporting Person(s) to Issuer (Month/Day/Year) The control of Reporting Person (Month | Filed |
| (Street) PHILADELPHIA PA 19103 (City) (State) (Zip) | | General Counsel 6. Individual or Joint/Group Filing Applicable Line) X Form filed by One Report Form filed by More than Person | rting Person |

Table I - Non-Derivative Securities Beneficially Owned

| Indirect (I) (Instr. 5) | 1. Title of Security (Instr. 4) | 2. Amount of Securities Beneficially Owned (Instr. 4) | 3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5) | 4. Nature of Indirect Beneficial Ownership (Instr. 5) |
|-------------------------|---------------------------------|--|--|---|
|-------------------------|---------------------------------|--|--|---|

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

| 1. Title of Derivative Security (Instr. 4) | | | 3. Title and Amount of Securities Underlying Derivative Security (Instr. 4) | | Conversion or Exercise | Form: Direct (D) or | 6. Nature of Indirect Beneficial Ownership (Instr. 5) |
|--|---------------------|--------------------|---|-------------------------------------|------------------------------------|----------------------------|---|
| | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | Price of Derivative Security | Indirect (I) (Instr. 5) | |

Explanation of Responses:

Remarks:

No securities are beneficially owned.

/s/ Timothy R. Donovan

09/08/2023

** Signature of Reporting Person Date

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

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.

^{*} If the form is filed by more than one reporting person, see Instruction 5 (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).