FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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OMB Number:	3235-0287
Estimated average burden	
hours per response:	0.5

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Check this box to indicate that a

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(c). See Instruction 10. 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 Addre	ss of Reporting Person	•	2. Issuer Name and Ticker or Trading Symbol Vestis Corp [VSTS]	Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
(Last) VESTIS CORP 500 COLONIA	(First) ORATION L CENTER PARKV	(Middle) VAY, SUITE 140	3. Date of Earliest Transaction (Month/Day/Year) 10/02/2023		Officer (give title below)	Other (specify below)		
(Street) ROSWELL (City)	GA (State)	30076 (Zip)	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indivi	dual or Joint/Group Filing Form filed by One Repo Form filed by More than	` ' '		

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

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	ZA. Deemed 3. Execution Date, if any Code (Instr. 8)		4. Securities Ac Disposed Of (D)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership	
			Code	v	Amount	(A) or (D)	Price	(Instr. 3 and 4)		(Instr. 4)
Common Stock, par value \$0.01 per share	10/02/2023		A		2,744(1)(2)	A	\$0	2,744	D	
Common Stock, par value \$0.01 per share	10/02/2023		A		10,583(2)(3)	A	\$0	13,327	D	

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

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. Transac Code (li 8)		5. Numl Derivati Securiti Acquire or Disp (D) (Instand 5)	ive ies ed (A) osed of	e Expiration Date (Month/Day/Year) Securities Underlying Derivative Security (Instr. 3 and 4) Derivative Security (Instr. 5) Beneficially Owned or Indirect (Downson or Indirect		Securities Underlying Derivative Security (Instr.		Derivative Security	derivative Securities Beneficially Owned Following Reported	Ownership Form: Direct (D)	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 a grant of deferred stock units, which will vest on January 31, 2024, subject to the Reporting Person's continued service, and, if vested, will be settled in shares of Vestis common stock on the first day of the seventh month after the date of the Reporting Person's departure from the board.
- $2. \ Each \ stock \ unit \ represents \ the \ right \ to \ receive, \ at \ settlement, \ one \ share \ of \ Vestis \ common \ stock.$
- 3. Represents a special grant of deferred stock units, which is 100% vested upon grant, and will be settled in shares of Vestis common stock on the first day of the seventh month after the date of the Reporting Person's departure from the board.

Remarks:

/s/ Timothy Donovan, General Counsel, as Attorney-in-fact

10/04/2023

** 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.