FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL
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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

| 1. Name and Address of Reporting Person [*] Evans Donald J | | | | | | | 2. Issuer Name and Ticker or Trading Symbol UNIFIRST CORP [UNF] | | | | | | | | | | elationship eck all appli X Directo | cable) | porting Person(s) to Issu) 10% Own | | |
|---|--|--------------|---|--------|--------------------------------|---------------------------------|--|-------|------------|------|------------------------------------|------|--|--|------|---|--|---|---|---|-------------------------|
| (Last) | , | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 01/16/2009 | | | | | | | | | | Office below) | er (give title v) | | Other (s below) | specify |
| 68 JONSPIN ROAD | | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | |
| (Street) WILMINGTON MA 01887 | | | | | _ | | | | | | | | | | | X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| (City) (State) (Zip) | | | | | | | | | | | | | | | | | | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) Date (Month/E | | | | | | Execution Dat | | | Code (Inst | | | | ties Acquired (A) o d Of (D) (Instr. 3, 4 | | | 5. Amou Securiti Benefic Owned Followi | ally (D) o | | n: Direct or rect (I) | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | | | | 6 | Code | v | Amount | (A) (D) | or P | Price | Reporte Transac (Instr. 3 | ed ction(s) | | r. 4) | (Instr. 4) |
| Common Stock 01/16/20 | | | | | | 2009 |)09 | | | | Α | | 2,000 | (1) A | | \$ <mark>0</mark> | 4, | 4,400 | | 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. Conversid or Exercis Price of Derivative Security | on [se (| 3. Transaction Date Month/Day/Year) | if any | emed on Date, /Day/Year) | 4. Transac Code (In 8) | | | | Exp | Date Exer iration D nth/Day/ |)ate | | 7. Title and Amount of Securities Underlying Derivative Security (Instr and 4) | | r. 3 | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4) | ly | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership |
| | | | | | | Code | v | (A) | (D) | Date | e rcisable | Exp | iration e | Title | or | ount nber ıres | | | | | |
| Common Stock Option (right to buy) | \$28.55 | | 01/16/2009 | | | A | | 1,500 | | 01/ | 16/2009 | 01/1 | 16/2017 ⁽²⁾ | Common Stock, \$0.10 par value | 115 | 500 | \$0 | 1,500 | | D | |

Explanation of Responses:

1. Such shares of Common Stock represent an award of restricted stock and become fully vested and exercisable on January 2, 2010

2. This Common Stock Option expires on the earlier of 1/16/2017 or the first anniversary of the reporting person's death.

 Donald Evans, by power of attorney
 01/20/2009

 ** 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.