FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPE	RUVAL
OMB Number:	3235-0287
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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).

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* <u>Croatti Michael A</u>			2. Issuer Name and Ticker or Trading Symbol UNIFIRST CORP [UNF]										ck all applica Director	able)	10% Owr		vner		
(Last) 68 JONSP	(Fire	st) (I	Middle)	3. Date of Earl 01/29/2019			Earliest Transaction (Month/Day/Year) 19							X	Officer (give title below) Senior VP of Operations			specify	
(Street) WILMING	GTON MA	Λ 0	1887		4. If	Amen	dmen	t, Date (of Original	Filed	(Month/Da	ay/Year))	6. Inc Line)	Form fil	ed by One	Repo	(Check App rting Persor One Repor	1
(City)	(Sta	ite) (2	Zip)												Person				
		Tab	le I - No	n-Deri\	ative	Sec	uriti	ies Ac	quired,	Dis	posed o	of, or I	Benef	icially	Owned				
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		ar) E	2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr.		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4			a) or 4 and 5)	5. Amoun Securities Beneficia Owned Fo	s ally following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
						Code	v	Amount	(A (D	() or ()	Price	Transacti	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)			
Common S	Stock			01/29	9/2019				M		2,666	5	A	\$102.9	5,6	550		D	
Common S	Stock		01/29/2		9/2019	019		D		2,343	3	D S	\$135.67	3,3	3,307		D		
Common Stock		01/30/2019					S		323(1	1) D \$13		\$135.1	2,984(2)			D			
Class B Co	ommon Stoc	ck													48,	292		D	
Common Stock													810			Ι .	By 401(k) Plan		
Class B Common Stock												4,000			I ⁽³⁾	By Sons			
		7	able II -								osed of converti				wned				
Derivative Conversion Date Executive Security or Exercise (Month/Day/Year) if any		3A. Deem Execution if any (Month/Da	ded 4. Transactio Code (Inst			on of		6. Date Exercisa Expiration Date (Month/Day/Year		•	7. Title and Amo of Securities Underlying Derivative Secur (Instr. 3 and 4)		urity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	Owners Form: Direct (or Indir (I) (Insti	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	0 1	Amount or Number of Shares					
Stock Appreciation	\$102.9	01/29/2019			M			2,666	10/28/201	18 1	.0/28/2023	Comn stock/\$	\$0.10	2,666	\$0	5,334	4	D	

Explanation of Responses:

- 1. Represents shares sold pursuant to a Rule 10b5-1 sales plan.
- 2. Consists of 1,044 restricted stock units that vest 100% on December 20, 2022, 1,231 restricted stock units that vest 100% on October 22, 2023 and 709 shares of Common Stock owned by the reporting person.
- 3. Represents shares owned by Michael Croatti's children. Michael Croatti disclaims beneficial ownership of these reported securities, except to the extent of his pecuniary interest therein, and this report shall not be deemed an admission that he is the beneficial owner of these securities for purposes of Section 16 or any other purpose.

Remarks:

/s/ David Whitman, Attorney-

01/30/2019

in-Fact

** 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.

 $Persons \ who \ respond \ to \ the \ collection \ of \ information \ contained \ in \ this \ form \ are \ not \ required \ to \ respond \ unless \ the \ form \ displays \ a \ currently \ valid \ OMB \ Number.$