**BRADY CORP** Form 4

November 21, 2016

### FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**OMB** Number:

3235-0287

Expires:

January 31, 2005

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**OMB APPROVAL** 

response...

Check this box if no longer subject to Section 16. Form 4 or Form 5

**SECURITIES** Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

may continue. 30(h) of the Investment Company Act of 1940 See Instruction

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \* Bolognini Louis T

(First)

(Street)

2. Issuer Name and Ticker or Trading Symbol

5. Relationship of Reporting Person(s) to

Issuer

BRADY CORP [BRC]

(Check all applicable)

(Last)

(Middle)

3. Date of Earliest Transaction

10% Owner Other (specify

6555 WEST GOOD HOPE RD

(Month/Day/Year) 11/18/2016

SR VP - GENERAL COUNSEL

\_X\_\_ Officer (give title ) below)

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check

Applicable Line)

Director

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

Person

MILWAUKEE, WI 53223

(City)	(State)	(Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned							
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code V	Amount	or (D)	Price	Transaction(s) (Instr. 3 and 4)		
Class A Common Stock	11/18/2016		M	13,786 (1)	A	\$ 22.66	31,844	D	
Class A Common Stock	11/18/2016		F	11,010 (1)	D	\$ 37.21	20,834	D	
Class A Common Stock	11/18/2016		M	11,132 (2)	A	\$ 19.96	31,966	D	
Class A Common	11/18/2016		F	8,474 (2)	D	\$ 37.21	23,492	D	

#### Stock

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

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SEC 1474 (9-02)

# 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. Transactic Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option Net Exercise	\$ 22.66	11/18/2016		M	13,786	(3)	09/25/2024	Class A Common Stock	13,786
Stock Option Net Exercise	\$ 19.96	11/18/2016		M	11,132	(3)	09/25/2025	Class A Common Stock	11,132

## **Reporting Owners**

Reporting Owner Name / Address	Relationships
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Director 10% Owner Officer Other

Bolognini Louis T

6555 WEST GOOD HOPE RD MILWAUKEE, WI 53223 SR VP - GENERAL COUNSEL

#### **Signatures**

Heidi Knueppel, Attorney-In-Fact

\*\*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).

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- (1) Represents net exercise of stock option. 13,786 options were exercised, resulting in a net gain of 2,776 shares (5,391 gross shares less payroll tax withholding of 2,615 shares).
- (2) Represents net exercise of stock option. 11,132 options were exercised, resulting in a net gain of 2,658 shares (5,161 gross shares less payroll tax withholding of 2,503 shares).
- (3) Represents options exercisable one third each year for the three years subsequent to the grant date.

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.