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GOODKIN	D CONRAD G												
Form 4													
September	26, 2018												
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									OMB APPROVAL				
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549									OMB Numbe	r: 323	5-0287		
Check this box if no longer										Expires	Janı	ary 31, 2005	
subject to STATEMENT OF CHAI				NGES IN BENEFICIAL OWNERS)F	-	200 nated average		
Section 16.				SECURITIES						burden hours per			
Form 4 Form 5		Filed pursuant to Section 16(a) of the Securities Excha					F 1	A (6102		response 0.5			
obligati	oma *							•					
may co	ntinue. Section 17			Investmer	•	-	•	of 1935 or Sec	cuon				
<i>See</i> Inst 1(b).	truction	J0(II) (JI UIC I		n comp			940					
1(0).													
(Print or Type	Responses)												
1. Name and Address of Reporting Person * 2. Issuer N GOODKIND CONRAD G Symbol BRADY					er Name and Ticker or Trading				5. Relationship of Reporting Person(s) to				
								Issuer					
				OY CORF		(Check all applicable)							
(Last)	(First)			e of Earliest Transaction									
				Month/Day/Year) 9/25/2018				X_ Director 10% Owner Officer (give title Other (specify					
			09/25/					below) below)				1 y	
(Street) 4. If Ar			4. If An	mendment, Date Original				6. Individual or Joint/Group Filing(Check					
				Aonth/Day/Year)				Applicable Line)					
_X_Form filed by O								ne Reporting Person ore than One Reporting					
WHITEFI	SH BAY, WI 532	17						Person	by wior		ne Reporting		
(City)	(State)	(Zip)	Ta	ble I - Non	-Derivativ	ve Sec	urities A	cquired, Dispose	d of, a	or Benef	icially Owi	ned	
1.Title of	2. Transaction Date			3.	4. Securi			5. Amount of	6.		7. Nature c	-	
Security	(Month/Day/Year)	Execution D	Date, if	Transaction(A) or Disposed of (D)				Securities		wnership	Indirect Beneficia		
(Instr. 3) any (Mor			/Year)	Code (Instr. 3, 4 and 5) (Instr. 8)				Beneficially Owned	Form Direc	rect (D)	Ownership (Instr. 4)		
		` J	<i>,</i>					Following	or In	direct	× /		
						(A)		Reported Transaction(s)	(I) (Instr	. 1)			
						or		(Instr. 3 and 4)	(Insu	r. 4)			
Class A				Code V	Amount	(D)	Price						
Class A Common	09/25/2018			А	2,479	А	\$	70,440	Ι		Deferred		
Stock	07/25/2010			Α	(1)	Α	43.98	70,++0	1		Compens	sation	
Stock													

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

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 control number.

 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)	3. Transaction Date (Month/Day/Year)	4. Transact Code (Instr. 8)	5. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	;	Date	7. Titl Amou Under Securi (Instr.	int of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
		Code V	· (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
GOODKIND CONRAD G 741 E. SYLVAN AVENUE WHITEFISH BAY, WI 53217	Х							
Signatures								
Heidi Knueppel, Attorney-In-Fact	0	9/26/2018						
<u>**</u> 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).
- (1) Reporting owner acquired 2,479 unrestricted shares of Class A Common Stock as compensation for their services as a member of the Board of Directors. Reporting owner has elected to defer the stock into his Brady Corporation Deferred Compensation account.

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.