## FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OMB APPROVAL

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

|  | ction 1(b).        |                     |         |                     |   |  |                          | es Exchange<br>npany Act of |                              | 934          |                    |                      | per response:                       | 0.5  |                                   |                      |  |
|--|--------------------|---------------------|---------|---------------------|---|--|--------------------------|-----------------------------|------------------------------|--------------|--------------------|----------------------|-------------------------------------|--|-----------------------------------|----------------------|--|
| 1. Name and Address of Reporting Person <sup>*</sup><br>Nauman J Michael |                    |                     |         |                     | 2. Issuer Name <b>and</b> Ticker or Trading Symbol<br><u>BRADY CORP</u> [ BRC ] |  |                          |                             |                              |              |                    |                      | elationshi<br>ck all app<br>Direc   | licable)   | ng Person(s) to<br>10% (          | to Issuer<br>% Owner |  |
| (Last)<br>6555 WI  | (Fir<br>EST GOOD   | rst) (I<br>HOPE RD. | Viddle) |                     |   | 3. Date of Earliest Transaction (Month/Day/Year)<br>09/30/2021 |                          |                             |                              |              |                    |                      |                                     | Officer (give title Other (speci<br>below) below)<br>President & CEO                                       |                                   |                      |  |
| (Street)<br>MILWA  | MILWAUKEE WI 53223 |                     |         |                     |   | 4. If Amendment, Date of Original Filed (Month/Day/Year)       |                          |                             |                              |              |                    | 6. Ind<br>Line)<br>X | Form<br>Form                        | ividual or Joint/Group Filing (Che<br>Form filed by One Reporting<br>Form filed by More than One<br>Person |                                   | erson                |  |
|  |                    | Table               | I - Noi | n-Deriva            | tive S  | ecur   | ities Acq                | uired,                      | Dis                          | posed of,    | or Ber             | eficial              | ly Own                              | ed   |                                   |                      |  |
| 1. Title of Security (Instr. 3)<br>2. Transac<br>Date<br>(Month/Da       |                    |                     |         | Execution Date      |   | ution Date,  | Code (Instr.             |                             | 4. Securities<br>Disposed Of |              | Securi             | ount of<br>ties      | 6. Ownership<br>Form: Direct        | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership  |                                   |                      |  |
|  |                    |                     |         | (Month/Da)          | y/rear)   |  |                          |                             | Instr.                       | 5)           |                    |                      |                                     | d Following  | (D) or Indirect<br>(I) (Instr. 4) | Ownership            |  |
|  |                    |                     |         | (Month/Da           | y/rear)   |  |                          |                             | v                            | 5)<br>Amount | (A) or<br>(D)      | Price                | Owner<br>Repor<br>Transa            | d Following  |                                   |                      |  |
| Class A (  | Common St          | ock                 |         | (Month/Da)          |   |  |                          | 8)                          |                              | -            | (A) or<br>(D)<br>D | Price<br>\$51.35     | Owned<br>Repor<br>Transa<br>(Instr. | d Following<br>ted<br>action(s)  |                                   | Ownership            |  |
| Class A (  | Common St          |                     |         | 09/30/2<br>Derivati | 2021<br>ve Se   | (Mont  | h/Day/Year)<br>ies Acqui | 8)<br>Code<br>F             | v<br>Dispo                   | Amount       | (D)<br>D<br>r Bene | \$51.35              | Owned<br>Repor<br>Transa<br>(Instr. | d Following<br>ted<br>action(s)<br>3 and 4)<br>4,295   | (Ì) (Instr. 4)                    | Ownership            |  |

|  |  | Derivative<br>Security | ( , , , , , , , , , , , , , , , , , , , |      |   | Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3, 4<br>and 5) |     |                     |                    | Derivative<br>Security (Instr.<br>3 and 4) |  | Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 4) | or Indirect<br>(I) (Instr. 4) | (Instr. 4) |  |
|--|--|------------------------|---|------|---|--|-----|---------------------|--------------------|--|--|--|-------------------------------|------------|--|
|  |  |                        |   | Code | v | (A)  | (D) | Date<br>Exercisable | Expiration<br>Date | Title                                      | Amount<br>or<br>Number<br>of<br>Shares |  |                               |            |  |

Explanation of Responses:

1. Represents shares withheld to cover taxes on 8,351 restricted stock units that vested on September 30, 2021.

**Remarks:** 

## Heidi Knueppel, Attorney-In-10/04/2021

<u>Fact</u>

\*\* 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.

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