FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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* BRUNO ELIZABETH P | | | | | | | 2. Issuer Name and Ticker or Trading Symbol BRADY CORP [BRC] | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | |
|--|---|--|----------|---|--------|---|---|---|--------|--|-------|---------------------------------|---|--|--|---|---|--|--|
| (Last) (First) (Middle) 211 STAGECOACH ROAD | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 09/22/2017 | | | | | | | | | er (give tit w) | Other (specify below) | | | |
| (Street) CHAPEL HILL NC 27514 (City) (State) (Zip) | | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) 09/26/2017 | | | | | | | | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| | | | Table I | I - Non- | -Deriv | ative | Sec | uritie | s Ac | quired | d, Di | sposed o | f, or E | Benefici | ally Own | ed | | | |
| 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/ | | | | | | | Execution Date, | | | | | Disposed O | es Acquired (A) or Of (D) (Instr. 3, 4 and | | Beneficially Owned Following | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership |
| | | | | | | | Code | v | Amount | (A) or (D) | Price | Reporte Transac (Instr. 3 | tion(s) | | | (Instr. 4) | | | |
| Class A Common Stock 09/25/2 | | | | | | 2017 | 017 | | | S | | 6,000 | D | \$36.7 | 5 365, | 365,509(1) | | D | |
| Class A Common Stock (Elizabeth P Pungello Non-Exempt Trust) | | | | | | | | | | | | | | 806,296(1) | | | Ι : | Beneficiary | |
| | | | Table | | | | | | | | | osed of, convertib | | | | | • | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercion Price of Derivative Security | | Year) Ex | 3A. Deemed Execution Date, if any (Month/Day/Year) | | 4. Transaction Code (Instr. 8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exerc Expiration Da (Month/Day/Y | | ate | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Numbe derivative Securitie Beneficia Owned Following Reported Transacti (Instr. 4) | e s ally g | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership ect (Instr. 4) |
| | | | | | | Code | v | (A) | (D) | Date Exercis | sable | Expiration Date | Title | Amount or Number of Shares | | | | | |

Explanation of Responses:

1. This amendment is being filed to correct securities disposed of and ownership share count of non-derivative securities. Original filing incorrectly attributed disposal of 6,000 shares from the owner's Non-Exempt Trust rather than the owner's direct holdings.

Remarks:

Heidi Knueppel, Attorney-In-

07/26/2018

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.