FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

| Washington, I | D.C. | 20549 |
|---------------|------|-------|
|---------------|------|-------|

| Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See | STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP                           |
|---|--|
| Instruction 1(b).   | Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 |

| OMB APPF            | ROVAL     |
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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*  Shaller Russell     |  |         |          | 2. Issuer Name <b>and</b> Ticker or Trading Symbol BRADY CORP [ BRC ] |        |  |   |   |  |               |   |   | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) |  |   |         |   |                    |           |
|---|--|---------|----------|---|--------|--|---|---|--|---------------|---|---|---|--|---|---------|---|--------------------|-----------|
| Shaher Russen   |  |         |          |   |        | Bill Di Gotti  |   |   |  |               |   |   |   | X Direc  |   | tor 10% |   | 10% Ov             | vner      |
| (Last)  | (Fi  | rst) (N | Middle)  |   |        | 3. Date of Earliest Transaction (Month/Day/Year) 09/16/2023    |   |   |  |               |   |   |   | X  | Office  | ,       |   | Other (s<br>below) | specify   |
| 6555 W. GOOD HOPE RD  |  |         |          |   |        | 33. 23. 23 <b>.</b> 2  |   |   |  |               |   |   |   |  | President & CEO   |         |   |                    |           |
| (Street)  |  |         |          |   |        | 4. If Amendment, Date of Original Filed (Month/Day/Year)       |   |   |  |               |   |   |   | 6. Individual or Joint/Group Filing (Check Applicabl                     |   |         |   |                    | pplicable |
| MILWAU  | JKEE W   | I 5     | 3223     |   |        |  |   |   |  |               |   |   |   | X Form filed by One Reporting Person                                     |   |         |   | on                 |           |
|   |  |         |          |   |        |  |   |   |  |               |   |   |   |  | Form filed by More than One Reporting<br>Person                   |         |   |                    |           |
| (City)  | (St  | ate) (Z | Zip)     |   | Rul    | e 10   | )b5-                                    | 1(c)  | Tran   | sac           | tion Indi                                 | icatio  | n '   |  |   |         |   |                    |           |
|   |  |         |          |   |        |  |   |   | Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10. |               |   |   |   |  |   |         |   |                    |           |
|   |  | Table   | I - No   | n-Deriva  | tive S | Secui  | rities                                  | Acq   | uired,   | Dis           | posed of                                  | , or B  | enefic  | ially  | Own   | ed      |   |                    |           |
| 1. Title of Security (Instr. 3)  2. Transact Date (Month/Day) |  |         |          | Execution Dat   |        | Oate,  | 3.<br>Transaction<br>Code (Instr.<br>8) |   | 4. Securities Acquired (A<br>Disposed Of (D) (Instr. 3,<br>5)  |               |   | , 4 and Secu<br>Bene<br>Own   |   | cially<br>Following  | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4) |         | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership |                    |           |
|   |  |         |          |   |        |  | Code                                    | v   | Amount   | (A) oi<br>(D) | Price                                     |   |   | ted<br>action(s)<br>3 and 4)   |   |         | (Instr. 4)  |                    |           |
| Class A Common Stock 09/16/2                                  |  |         |          |   | 2023   |  | F                                       |   | 755 <sup>(1)</sup>   | D             | \$55                                      | .68 86,313  |   | 5,313  |   | D       |   |                    |           |
|   |  | Tal     | ole II - |   |        |  |   |   |  |               | osed of, convertib                        |   |   |  | Owne  | d       |   |                    |           |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)           | tive   Conversion   Date   Execution Date,   Transactor   or Exercise   (Month/Day/Year)   if any   Code (In |         |          |   |        | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |   | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>Security (Inst<br>3 and 4) |  | Der<br>Sec    | Price of<br>rivative<br>curity<br>str. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | у   | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | Beneficial<br>Ownership<br>(Instr. 4)                             |         |   |                    |           |
|   |  |         |          |   | Code   | v  | (A)                                     | (D)   | Date<br>Exercis  | able          | Expiration<br>Date                        |   | Amount<br>or<br>Number<br>of<br>Shares                                  |  |   |         |   |                    |           |

## **Explanation of Responses:**

1. Represents shares withheld to cover taxes on 1,607 restricted stock units that vested on September 16, 2023.

## Remarks:

Heidi Knueppel, Attorney-In-

\*\* Signature of Reporting Person

Fact

09/18/2023

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.