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BRADY CC Form 4 May 04, 201										
FORM	ЛЛ								OMB AF	PROVAL
	UNITED S	STATES			AND EX(, D.C. 205		NGE C	OMMISSION	OMB Number:	3235-0287
Check th if no lon subject to Section 1 Form 4 of Form 5 obligation may con <i>See</i> Instr 1(b).	F CHAN Section 1 Public U	GES IN SECUE 6(a) of th tility Hol	BENEFI RITIES le Securiti	ERSHIP OF Act of 1934, 1935 or Sectior	F Expires: January 31 200 Estimated average burden hours per response 0.					
(Print or Type)	Responses)									
1. Name and A Johnson Ka	Address of Reporting I Ithleen	Person <u>*</u>	Symbol	r Name and Y CORP	Ticker or	Tradin	-0	5. Relationship of Issuer	Reporting Pers	on(s) to
(Last)	(First) (N	/iddle)		f Earliest T				(Check	all applicable)
6555 WEST	Г GOOD HOPE R	D	(Month/E 04/07/2	Day/Year)				Director X Officer (give below) Chief Ad		Owner er (specify cer
	(Street)			endment, Da nth/Day/Yea	ate Original r)			6. Individual or Jos Applicable Line) _X_ Form filed by O Form filed by M	ne Reporting Per	rson
	KEE, WI 53223	(7:)						Person		
(City)		(Zip)					-	iired, Disposed of,		-
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any	n Date, if	Code (Instr. 8)	4. Securiti on(A) or Dis (Instr. 3, 4 Amount	sposed	of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Class A Common Stock								741.848	D	
Class A Common Stock (1)	04/07/2010			J	0.0441	А	\$ 31.92	5,738.4101	D	
Class A Common Stock (1)	04/14/2010			J	8.4371	A	\$ 32.38	5,746.8472	D	
Class A Common	04/21/2010			J	8.2951	А	\$ 33.4	5,755.1423	D	

Stock (1)	Class A Common Stock ⁽¹⁾	04/28/2010	J	8.0754	A	\$ 34.51	5,763.2177	D	
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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)	2. Conversion or Exercise Price of	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A	A)	6. Date Exer Expiration I (Month/Day	Date	7. Title and A Underlying S (Instr. 3 and	Securities	8. Pr Deri Secu (Inst
	Derivative Security				or Disposed (D) (Instr. 3, 4, and 5)	1 01					
				Code V	(A) ((D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Deferred Comp Units	(2)	04/30/2010		А	0.0093		(2)	(2)	Class A Common Stock	0.0093	\$ 3

Reporting Owners

Reporting Owner Name / Address			Relationships	
	Director	10% Owner	Officer	Other
Johnson Kathleen 6555 WEST GOOD HOPE RD MILWAUKEE, WI 53223			Chief Accounting Officer	

Signatures

Stock (1)

Krista Ebbens, asAttorney-In-Fact05/04/2010

<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) Represents shares of Class A Common Stock purchased under the issuer's 401(K) payroll deduction plan.

(2)

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The deferred compensation stock units were acquired under the Brady Corporation employee deferred compensation plan. Each deferred compensation unit is the economic equivalent of one share of Class A Common Stock. The deferred compensation units become payable in shares of Brady's Class A Common Stock upon the reporting persons cessation of service as an employee of Brady Corporation.

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.