Edgar Filing: BRADY CORP - Form 4

| BRADY CC | ORP | | | | | | | | | | |
|---|---|---|--------------------|--|---------------|-----------|--|--|---------------------------|--------------------------|--|
| Form 4 | | | | | | | | | | | |
| February 07 | , 2007 | | | | | | | | | | |
| FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION | | | | | | | | OMB APPROVAL | | | |
| | UNITED | STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 | | | | | | | OMB Number: | 3235-0287 | |
| Check th if no lon | | | | | | | | Expires: January 31 | | | |
| subject t | | MENT O | F CHAN | IGES IN BENEFICIAL OWN | | | | ERSHIP OF | Estimated average | | |
| Section Form 4 of | | SECURITIES | | | | | | burden hours per | | | |
| Form 4 C Form 5 | | Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, | | | | | | response | 0.5 | | |
| obligatio | ons Section 170 | | | | | | • | 1935 or Section | 1 | | |
| may con <i>See</i> Instr | unue. | | | • | Company | • • | | | | | |
| 1(b). | uction | | | | | | | | | | |
| | D | | | | | | | | | | |
| (Print or Type | Responses) | | | | | | | | | | |
| | | | 2. Issue Symbol | r Name an o | d Ticker or T | Frading | > | 5. Relationship of Reporting Person(s) to Issuer | | | |
| | | | • | Y CORP | [BRC] | | | | | 、 、 | |
| (Last) | (First) (| Middle) | 3. Date o | f Earliest T | ransaction | | | (Check | all applicable | e) | |
| (Month/E | | | Day/Year) | | | _ | X_ Director 10% Owner | | | | |
| 6555 WEST GOOD HOPE RD 02 | | 02/07/2 | 007 | | | | XOfficer (give titleOther (specify below) below) | | | | |
| | | | | | | | | · · · · · · · · · · · · · · · · · · · | ident & CEO | | |
| | (Street) | | 4. If Ame | endment, D | ate Original | | e | 6. Individual or Joi | nt/Group Filir | g(Check | |
| Filed | | | Filed(Mo | nth/Day/Yea | r) | | | Applicable Line) | | | |
| | ZEE WI 52002 | | | | | | - | X_ Form filed by O Form filed by M | | | |
| MILWAUF | KEE, WI 53223 | | | | | | I | Person | | | |
| (City) | (State) | (Zip) | Tab | le I - Non-I | Derivative S | Securit | ies Acqui | ired, Disposed of, | or Beneficial | ly Owned | |
| 1.Title of Security | 2. Transaction Date (Month/Day/Year) | 2A. Deemed | | 3. 4. Securities Acquired (A) Transactionor Disposed of (D) | | | uired (A) | | 6. Ownership | 7. Nature of Indirect | |
| (Instr. 3) | | any | | Code | (Instr. 3, 4 | | | Beneficially | Form: | Beneficial | |
| | | (Month/D | ay/Year) | (Instr. 8) | | | | Owned Following | Direct (D) or Indirect | Ownership (Instr. 4) | |
| | | | | | | | | Reported | (I) | (111501.4) | |
| | | | | | | (A) or | | Transaction(s) | (Instr. 4) | | |
| | | | | Code V | Amount | (D) | Price | (Instr. 3 and 4) | | | |
| Class A | | | | x (1) | | | \$ | | - | | |
| Common Stock | 02/07/2007 | | | J <u>(1)</u> | 12.5671 | А | 38.06 | 1,207.2322 | D | | |

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)

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| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transactic Code (Instr. 8) | 5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | ; | ate | 7. Title Amoun Underl Securi (Instr. | nt of lying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr |
|---|---|---|---|--|---|---------------------|--------------------|--|--|---|---|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|---|---------------|-----------|-----------------|-------|--|--|--|
| | Director | 10% Owner | Officer | Other | | | |
| JAEHNERT FRANK M 6555 WEST GOOD HOPE RD MILWAUKEE, WI 53223 | Х | | President & CEO | | | | |
| Signatures | | | | | | | |
| /s/ Barbara | | | | | | | |

| Bolens | 02/07/2007 |
|--|------------|
| <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) This transaction was a result of the employer's 401K payroll deduction

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.