### SEC Form 4

## FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

	OMB APPRC	OMB APPROVAL										
	OMB Number: 3235-0287 Estimated average burden											
	Estimated average burden											
l	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).
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### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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 Addre	1 0	rson*	2. Issuer Name <b>and</b> Ticker or Trading Symbol BRINKS CO [ BCO ]		tionship of Reporting Per all applicable) Director	10% Owner					
(Last) 1801 BAYBER	(First) RY COURT	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 06/01/2023	X	Officer (give title below) Controlle	Other (specify below) Pr					
PO BOX 18100 (Street)			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line) X	,						
RICHMOND (City)	VA (State)	23226 (Zip)	Rule 10b5-1(c) Transaction Indication								
Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intend satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.											
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned											

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)					7. Nature of Indirect Beneficial Ownership
			Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)

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 Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transac Code (Ir 8)		of I		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Program Units	(1)	06/01/2023		Α		0.42 <sup>(2)</sup>		(1)	(1)	Common Stock	0.42	\$66.78 <sup>(3)</sup>	128.91	D	

#### Explanation of Responses:

1. Program Units credited to the Reporting Person's stock incentive account under the terms of the the Program will settle in BCO common stock on a one-for-one basis and shall be distributed in accordance with the Reporting Person's deferral election either (1) following the Reporting Person's termination of employment with BCO or (2) on a future date selected by the Reporting Person at the time of his or her deferral election.

2. In accordance with the terms of the Program, Program Units were credited to the Reporting Person's account as a result of a dividend payment with respect to BCO common stock.

3. The number of Program Units credited to the Reporting Person's account on the transaction date is based upon a share price of \$66.78, which was the closing price of BCO common stock on June 1, 2023, calculated in accordance with the terms of the Program.

#### **Remarks:**

<u>/s/ Beth Davis, Attorney-in-</u> Fact

06/05/2023

\*\* 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.