FORM 4

obligations may continue. See

Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT	OF CHANGES IN	N BENEFICIAL	OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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* <u>Beech Michael F</u>					2. Issuer Name and Ticker or Trading Symbol BRINKS CO [BCO]							heck all appli Directo	cable) or	Person(s) to Is	owner
(Last) (First) (Middle) 555 DIVIDEND DRIVE				3. Date of Earliest Transaction (Month/Day/Year) 12/31/2019							helow)		otner below ce President	(specify	
(Street) COPPEL (City)			75019 (Zip)	4.	If Ame	endment, [Date o	of Original Fil	ed (Month/E	oay/Year)	6. Lir	ne) X Form f	iled by One Filed by More	Filing (Check A Reporting Pers than One Rep	on
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned															
Date				2. Transactio Date Month/Day/Y	Execution Date,		Code (Ins	Transaction Code (Instr. 3, 5)			4 and Securities Form: Dire		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
								Code V	Amount	(A) (D)	Price	Transaci (Instr. 3	tion(s)		(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)	Execution Date, if any	Code	Transaction of Derive Section (A) of Derive Section (A) of Disp of (D				Date Amour sy/Year) Securi Underl Deriva		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	1			
Units	(1)	12/31/2019		A		22.3 ⁽²⁾		(1)	(1)	Common	22.3(2)	\$90.68 ⁽³⁾	9,102.98	D	

Explanation of Responses:

- 1. Units (each of which is the economic equivalent of one share of The Brink's Company ("BCO") common stock) credited to the Reporting Person's stock incentive account under the Key Employees' Deferred Compensation Program (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, on the last business day of each month, compensation deferred by the Reporting Person during that month and/or any matching amounts are converted into Units and credited to the Reporting Person's stock incentive account.
- 3. The number of Units credited to the Reporting Person's stock incentive account on the Transaction Date is based upon a share price of \$90.68, which is the closing price of BCO common stock on the final trading day of the month in which the deferred compensation would have been payable, calculated in accordance with the terms of the Program.

Remarks:

/s/ Lindsay K. Blackwood

Lindsay K. Blackwood,

01/03/2020

Attorney-in-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.