FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

	OMB APPRO	OVAL						
	OMB Number:	3235-0287						
	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).

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* Pal Rohan					2. Issuer Name and Ticker or Trading Symbol BRINKS CO [BCO]									5. Relationship of Reporting Person(s) to Is (Check all applicable) Director 10% C				/ner	
(Last) 1801 BA	(F YBERRY (,	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 01/31/2017							7	X Officer (give title below) Other (specific below) SVP, Chief Information Officer				·	
(Street) RICHM(23226 (Zip)		4. 11	4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Ir Line							
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da					Execution Date,		Transaction Disposed Of (D Code (Instr. 5)		ties Acquired (A) or I Of (D) (Instr. 3, 4 a			5. Amour Securitie Beneficia Owned F Reported	Form lly (D) o ollowing (I) (In		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
								Code	V	Amount	(A) or (D)		Price	Transact (Instr. 3 a	ction(s)			, ,	
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 Dat if any (Month/Day/Yo	Date,	4. Transaction Code (Instr. 8)				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)		OV FC Di Or (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	0 N 0	lumber					
Units	(1)	01/31/2017			A		72.1 ⁽²⁾		(1)		(1)	Comm		72.1(2)	\$44.5 ⁽³⁾	1,023.93	3	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 account on the Transaction Date is based upon a share price of \$44.50, 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,

02/01/2017

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.