FORM 4

Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Check this box if no longer subject to	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP
Check this box if no longer subject to	STATEMENT OF CHANCES IN BEITE FORE CWINERSHIP
Section 16. Form 4 or Form 5	
obligations may continue. See	

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* SCHIEVELBEIN THOMAS C						2. Issuer Name and Ticker or Trading Symbol BRINKS CO [BCO]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
OCITIE	V LLDLI	IV IIIOWIII	<u> </u>											X Direc	or		10% Ov	vner	
(Last)	(F	irst)	(Middle)		3. [Date of Earliest Transaction (Month/Day/Year)								X Office below	r (give title)		Other (s below)	pecify	
1801 BAYBERRY COURT					02	02/20/2015									Chairman, President and CEO				
P.O. BO	X 18100																		
					- 4. I	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) RICHMOND VA 23226															m filed by One Reporting Person				
					_										Form filed by More than One Reporting Person				
(City)	(S	tate)	(Zip)																
		Tab	le I - No	n-Deri	vative	e Se	curities	Ac	quired, I	Dis	posed o	f, or Be	neficia	lly Owne	d				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					ar) E	2A. Deeme Execution f any Month/Day	Date,	Transaction Disposed Code (Instr. 5)			ties Acquired (A) or I Of (D) (Instr. 3, 4 a		Benefic Owned	es For ally (D) Following (I) (m: Direct or Indirect Instr. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)	Price	Reporte Transae (Instr. 3	tion(s)			(Instr. 4)	
		7	Гable II -	Deriva	ative	Secu	urities /	Acqı	uired, Di	spo	sed of,	or Bene	eficially	y Owned		1			
				(e.g., ¡	puts,	calls	s, warra	ants	, option	s, c	onvertil	ble secu	rities)						
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/Ye	Date,	Code (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 Exercisabl		Expiration Date	Title	Amount or Number of Shares	1					
Market Share Units	(1)	02/20/2015			A		49,391		(2)		(2)	Common Stock	(1)	\$0.00	49,39	1	D		

Explanation of Responses:

- 1. Each Market Share Unit represents a right to receive, subject to the terms and conditions of the 2013 Equity Incentive Plan and a Market Share Units Award Agreement, a minimum of 0 shares and a maximum of up to 1.5 shares of the Company's common stock, based on the average closing stock price for the twenty trading days leading up to and including December 31, 2017, as compared to the average closing stock price for the twenty trading days leading up to and including December 31, 2014.
- 2. Under the terms of the Market Share Units Award Agreements, the units will become earned and payable, if at all, upon the Compensation and Benefits Committee's determination of the amount of shares of Company common stock payable pursuant to each outstanding Market Share Unit award.

Remarks:

/s/ Elizabeth C. Restivo,

Elizabeth C. Restivo, Attorney- 02/24/2015

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.