Instruction 1(b)

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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OMR APP	ROVAL
OMB Number:	3235-02

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OND AFFROVAL									
OMB Number:	3235-0287								
Estimated average burden									
hours per response:	0.5								

1. Name and Address of Reporting Person* REED AUSTIN F					2. Issuer Name and Ticker or Trading Symbol BRINKS CO [BCO]									ationship of Reporting k all applicable) Director		10% Owner		ner
(Last) (First) (Middle) 1801 BAYBERRY COURT P.O. BOX 18100					3. Date of Earliest Transaction (Month/Day/Year) 01/13/2006								_ X	below) "	Officer (give title below) VP, Gen'l Counsel of		Other (specify below) & Secretary	
(Street) RICHMOND VA 23226 (City) (State) (Zip)					4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Ind Line) X	lividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person						
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
Date				2. Transac Date (Month/Da	Execution Day/Year) if any		ution Date,		Transaction Code (Instr.		Securities Acquired (A) isposed Of (D) (Instr. 3, 4) or 4 and 5)	5. Amount Securities Beneficiall Owned Fol Reported	y	Form:	Direct I Indirect E str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
								Code	v	Amount	nount (A) or Pr		Price	Transaction(s) (Instr. 3 and 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/Yea	Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Expirati (Month/	on Dat		7. Title and Amo Securities Unde Derivative Secu (Instr. 3 and 4)		lerlying urity	8. Price of Derivative Security (Instr. 5)	9. Numb derivativ Securitie Benefici Owned Followin Reported Transact	ve es ally ig d	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	e V (A) (D)		(D)			Expiration Date	Title	Nu	ount or mber of ares		(Instr. 4)			
Units	(1)	01/13/2006		A		56.45 ⁽¹⁾⁽²⁾		(1)		(1)	Commor Stock	56	.45(1)(2)	(1)	46,943.	.52 ⁽³⁾	D	

Explanation of Responses:

- 1. Under the terms of the Key Employees' Deferred Compensation Program (the "Program"), the Reporting Person has chosen to make bi-weekly salary deferrals to an incentive account. As of the end of each fiscal year, the amount of salary deferred to the Reporting Person?s account during that fiscal year, plus any matching amounts, is converted into Units representing shares of The Brink?s Company Common Stock ("BCO") and credited to the Reporting Person's account in accordance with the terms of the Program.
- 2. The number of Units credited to the Reporting Person?s account on the Transaction Date is an estimate based upon trading prices of BCO shares for the two-week period ended January 13, 2006.
- 3. The total number of Units owned following the reported transaction is an estimate of the total number of Units representing shares of BCO in the Reporting Person's account under the Program.

Remarks:

/s/ McAlister C. Marshall II McAlister C. Marshall II, 01/17/2006

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.