SEC For	m 4																		
FORM 4			UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549														OMB APPROVAL		
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).				led pur	rsuant	to Section	16(a	S IN BI	urities E	xchang	_	SHIP	Estim	OMB Number: 3235-0287 Estimated average burden hours per response: 0.5					
1. Name and Address of Reporting Person [*] Bossart Dominik						2. Issuer Name and Ticker or Trading Symbol <u>BRINKS CO</u> [BCO]								eck all applic Directo	able)	10%		Ssuer Owner r (specify	
(Last)(First)(Middle)1801 BAYBERRY COURTPO BOX 18100					3. Date of Earliest Transaction (Month/Day/Year) 02/28/2023								X below)	EVP					
(Street) RICHMOND VA 23226					_ 4.	4. If Amendment, Date of Original Filed (Month/Day/Year)								. Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City) (State) (Zip)																			
		Tal	ole I - Nor			- T						-		-					
Date			Date	2. Transaction Date Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year		3. Transacti Code (Ins) 8)	ion Dis				5. Amour Securitie Beneficia Owned F Reported	es For ally (D) Following (I) (Direct I Indirect E str. 4)	7. Nature of Indirect Beneficial Ownership		
									Code V	/ Am	nount	(A) or (D)	Price	Transact (Instr. 3 a	ion(s)			(Instr. 4)	
			Table II - I (uired, Dis , options					Owned					
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. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable an Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative (Instr. 3 an	l Security	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				Co	Code	v	(A)	(D)	Date Exercisable		ration	Title	Amount or Number of Shares		(Instr. 4)	on(s)			
Program Units	(1)	02/28/2023			A		56.83 ⁽²⁾		(1)	((1)	Common Stock	56.83	\$65.25 ⁽³⁾	19,029	.44	D		

Explanation of Responses:

1. Program 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 terms of 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 Program Units and credited to the Reporting Person's stock incentive account.

3. The number of Program Units credited to the Reporting Person's account on the transaction date is based upon a share price of \$65.25, 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/ Beth Davis, Attorney-in-

Fact

03/02/2023

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

 \ast 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.