FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIAL	. OWNERSHIP

-	OND AFFRO	VAL				
	OMB Number:	3235-0287				
	Estimated average burde	n				
1	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

	d Address of Ronald I	Reporting Person*				r Name and I <mark>KS CO</mark>			ng Sy	mbol		(Che	elationship of eck all applica Director	ıble)	g Perso	10% Ow	ner
(Last) 1801 BA P.O. BOX	YBERRY (irst)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 01/02/2013								below)	(give title Other (spe below) VP - International		Jecny	
(Street) RICHMO		A tate)	23226 (Zip)		1. If Am	endment, D	Oate o	f Original F	Filed ((Month/Da	y/Year)	Line	Form file	ed by One	e Repor	Check Appli ting Person One Reporti	
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
Date			2. Transact Date Month/Day	Execution Date,		Transaction Disposed Of (ies Acquired (A) or Of (D) (Instr. 3, 4 and 5		5. Amount of Securities Beneficially Owned Followin Reported		6. Own Form: (D) or I (I) (Inst	Direct In Indirect B tr. 4) O	. Nature of ndirect Beneficial Ownership Instr. 4)			
						Code	v	Amount	(A) or (D)	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	Date (Month/Day/Year) i	3A. Deemed Execution Date, if any (Month/Day/Year)	Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amour of Securities Underlying Deriva Security (Instr. 3 a 4)		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)	Beneficial Ownership ct (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	Amount or Number of Shares		(Instr. 4)			
Units	(1)	01/02/2013		A		285.66 ⁽²⁾		(1)		(1)	Common Stock	285.66 ⁽²⁾	\$28.56 ⁽³⁾	31,543	3.06	D	

Explanation of Responses:

- 1. Under the terms of the Key Employees' Deferred Compensation Program (the "Program"), the Reporting Person has chosen to make deferrals to an incentive account. These deferrals, plus amounts matched by The Brink's Company ("BCO") and amounts credited for dividend equivalent payments, will settle in BCO common stock on a one-for-one basis following the Reporting Person's termination of employment with BCO, subject to and in accordance with the terms of the Program.
- 2. On the first business day of each month, salary deferred to the Reporting Person's account during the previous month, plus any matching amounts, is converted into Units (each of which is the economic equivalent of one share of BCO common stock) and credited to the Reporting Person's account in accordance with the terms of the Program.
- 3. The number of Units credited to the Reporting Person's account on the Transaction Date is based upon a share price of \$28.56, which is the average trading price of BCO common stock for the month of December 2012, calculated in accordance with the terms of the Program.

Remarks:

/s/ Elizabeth C. Restivo

Elizabeth C. Restivo, Attorney- 01/03/2013

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.