FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF **SECURITIES**

| | OMB APPROVAL | | | | | | | | |
|---|--------------------------|-----------------------|--|--|--|--|--|--|--|
| | OMB Number: | OMB Number: 3235-0104 | | | | | | | |
| I | 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 Add Andrade Ka | , , | R | Date of Event equiring Staten Month/Day/Year 8/08/2019 | nent | 3. Issuer Name and Ticker or Trading Symbol BRINKS CO [BCO] | | | | | | | | |
|--|---------|----------|---|--|---|--|--|----------------------------------|--|---|---|--|--|
| (Last) 1801 BAYBE | (First) | (Middle) | | | | ationship of Reporting Perso call applicable) Director | son(s) to Issuer 10% Owner Other (specify below) | | If Amendment, Date of Original Filed (Month/Day/Year) Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person | | | | |
| PO BOX 1810 | 00 | | | | | Officer (give title below) | | | | | | | |
| (Street) RICHMOND | VA | 23226 | | | | | | | X | • | More than One | | |
| (City) | (State) | (Zip) | | | | | | | | | | | |
| Table I - Non-Derivative Securities Beneficially Owned | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 4) | | | | | Beneficially Owned (Instr. 4) F | | | | 4. Nature of Indirect Beneficial Ownership (Instr. 5) | | | | |
| Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | |
| Ex | | | | 2. Date Exercisable and Expiration Date (Month/Day/Year) | | itle and Amount of Securi lerlying Derivative Securi | ity (Instr. 4) Conv | | sion cise | 5. Ownership Form: | 6. Nature of Indirect Beneficial Ownership (Instr. 5) | | |
| | | | Date Exercisable | Expiratio Date | n Title | 9 | Amount or Number of Shares | Price of Derivati Security | ive | Direct (D) or Indirect (I) (Instr. 5) | | | |

Explanation of Responses:

Remarks:

No securities are beneficially owned.

/s/ Kathie J. Andrade 08/11/2019

** 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 5 (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.