FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20040	

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Name and Address of Reporting Person* Shemanski Raphael J.					2. Issuer Name and Ticker or Trading Symbol BRINKS CO [BCO]							(Chec	ationship of k all applica Director Officer (ble)	Perso	n(s) to Issue 10% Ow Other (sp	ner	
(Last) 555 DIV	(F IDEND DR	irst) IVE	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 10/31/2019						X	below)	SVP		below)	еспу		
(Street) COPPEL (City)		X tate)	75019 (Zip)		. If Am	endment, D	ate of	Original Fi	led (Month/Da	y/Year)		6. Indi Line)	Form file	ed by One	Repor	Check Appli ting Person One Reportii	
		Та	ıble I - Non-D	erivat	ive S	ecurities	s Acc	quired, I	Disp	osed o	f, or Be	nefic	ially	Owned				
1. Title of Security (Instr. 3) 2. Transa Date (Month/D			te	Execution Date,		Transaction Disposed Code (Instr.		ties Acquired (A) or d Of (D) (Instr. 3, 4 ar		or and 5)	5. Amount Securities Beneficiall Owned Fo	es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Direct Indirect Etr. 4)	7. Nature of Indirect Beneficial Ownership			
				Code V Amount (A) or (D) Price Reported Transaction(s) (Instr. 3 and 4)						nstr. 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/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 Derivat Security (Instr. 3 a 4)		Derivative Security		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)		Date Exercisabl		expiration Date	Title	Amou Numl Share			(Instr. 4)	011(3)		
Units	(1)	10/31/2019		A		209.89 ⁽²⁾		(1)		(1)	Common Stock	209.	89(2)	\$84.96 ⁽³⁾	7,455.	49	D	

Explanation of Responses:

- 1. 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 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 Units and credited to the Reporting Person's stock incentive account.
- 3. The number of Units credited to the Reporting Person's stock incentive account on the Transaction Date is based upon a share price of \$84.96, 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/ Lindsay K. Blackwood Lindsay K. Blackwood,

11/04/2019

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.