FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

STATEMENT	OF CHAN	IGES IN B	ENEFICIAL	OWNERSHIP

OMB APPROVAL								
OMB Number: 3235-0287								
Estimated average burden								
haa aaaaaaaaa	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

	nd Address of Dominil	Reporting Person*				Name and			ng S	ymbol			Relationship of the contract o	able)	g Pers	on(s) to Issu 10% Ow Other (s)	ner
(Last) 1801 BA PO BOX	YBERRY (,	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 09/01/2020						X Officer below)		SVP	below)	Jedily		
(Street) RICHM(23226 (Zip)		4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Line) X Form filed by One Reporting Perform filed by More than One Reperson						orting Person						
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
Date			2. Transact Date (Month/Day	Execution Date,		Date,	Code (Instr. 5)				5. Amou Securitie Beneficia Owned F Reported	Form (D) o ollowing (I) (In		m: Direct In or Indirect B Instr. 4) C	7. Nature of Indirect Beneficial Ownership		
				Code V Amount (A) or (D)			Price	Transact (Instr. 3 a	ion(s)			Instr. 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	Exercise (Month/Day/Year) ice of rivative			ansaction Derivative Securities		e s (A) sed str.	Expiration Date of Se (Month/Day/Year) Unde Deriv		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	• V	(A)	(D)	Date Exercisab		Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)			
Units	(1)	09/01/2020		A		49.22 ⁽²⁾		(1)		(1)	Common Stock	49.22(2	\$45.41 ⁽³⁾	14,949	.17	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, Units (each of which is the economic equivalent of one share of BCO common stock) were credited to the Reporting Person's account as a result of a dividend payment with respect to BCO common stock.
- 3. The number of Units credited to the Reporting Person's account on the Transaction Date is based upon a share price of \$45.41, which is the closing price of BCO common stock on September 1, 2020, calculated in accordance with the terms of the Program.

Remarks:

/s/ Lindsay K. Blackwood,

Lindsay K. Blackwood, 09/02/2020

Attorney-in-Fact

** Signature of Reporting Person

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.