## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b)

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

OMB APPROVAL 3235-0287 OMB Number: Estimated average burden hours per response: 0.5

(Instr. 4)

1. Name and Address of Reporting Person* HARTOUGH JAMES B				2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>BRINKS CO</u> [ BCO ]			5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner V Officer (give title Other (specify			
(Last) (First) (Middle) 1801 BAYBERRY COURT P.O. BOX 18100				3. Date of Earliest Transaction (Month/Day/Year) 02/10/2006			X Onicer (give une Other (specify below) below) VP - Corp. Fin. and Treasurer			)
(Street) RICHMOND (City)	VA (State)	23226 (Zip)	4. If Am	endment, Date of C	Driginal Filed (I	Month/Day/Year)	6. Indiv Line) X	idual or Joint/Group Form filed by One Form filed by Mor Person	e Reporting Perso	on
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned										
Date			ransaction e onth/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4	and 5)	5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership

## Reported (A) or (D) Transaction(s) Code Amount Price (Instr. 3 and 4) Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) 7. Title and Amount of Securities Underlying Derivative Security 6. Date Exercisable and Expiration Date (Month/Day/Year) 1. Title of Derivative 3. Transaction Date 5. Number of Derivative 8. Price of Derivative 9. Number of derivative 11. Nature of Indirect 3A. Deemed 10. Conversion Execution Date actior Ownership Trans (Month/Dav/Year) if anv Security or Exercise Code (Instr. Securities Security Securities Form: Beneficial Acquired (A) or Disposed of Direct (D) or Indirect (Instr. 3) Price of (Month/Day/Year) 8) (Instr. 3 and 4) (Instr. 5) Beneficially Ownership Derivative Owned (Instr. 4) (D) (Instr. 3, 4 and 5) (I) (Instr. 4) Security Following Reported Transaction(s) Amount or (Instr. 4) Date Expiration Number of Code v (A) (D) Exercisable Date Title Shares

Explanation of Responses:

(1)

1. Under the terms of the Key Employees' Deferred Compensation Program (the "Program"), the Reporting Person has chosen to make bi-weekly salary deferrals to an incentive account. As of the end of each fiscal year, the amount of salary deferred to the Reporting Person's account during that fiscal year, plus any matching amounts, is converted into Units representing shares of The Brink's Company Common Stock ("BCO") and credited to the Reporting Person's account in accordance with the terms of the Program.

(1)

2. The number of Units credited to the Reporting Person?s account on the Transaction Date is an estimate based upon trading prices of BCO shares for the two-week period ended February 10, 2006.

**36.95**<sup>(1)(2)</sup>

3. The total number of Units owned following the reported transaction is an estimate of the total number of Units representing shares of BCO in the Reporting Person's account under the Program.

Remarks:

Units

Elizabeth C. Restivo /s/

Commor

Stock

(1)

Elizabeth C. Restivo, Attorney-02/14/2006 in-Fact

(1)

42,816.42<sup>(3)</sup>

D

\*\* Signature of Reporting Person Date

36.95(1)(2)

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).

02/10/2006

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

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.