FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Washington, D.C. 20549

nington, D.C. 20549	OMB APPROVAL

- 1							
	OMB Number:	3235-0287					
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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

1. Name and Address of Reporting Person* <u>LENNON FRANK T</u>						er Name and NKS CO			ading S	Symbol		5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner							
(Last) (First) (Middle) 1801 BAYBERRY COURT P.O. BOX 18100					3. Date of Earliest Transaction (Month/Day/Year) 08/25/2006									X Officer (give title Other (specify below) VP & Chief Admin. Officer					
(Street)	OND V	⁄A	23226		4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Indi	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(5	State)	(Zip)																
		-	Table I - Non-	Deriva	tive S	Securities	s Ac	quire	d, Di	sposed	of, or	Bene	ficially C	wned					
Date				2. Transa Date Month/D		Execution if any	2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Dispose Code (Instr.		rities Ac ed Of (D)	rities Acquired (A) o d Of (D) (Instr. 3, 4 a		5. Amount Securities Beneficially Following Reported	Form:		Direct I Indirect E tr. 4)	. Nature of ndirect eneficial wnership nstr. 4)	
								Cod	le V	Amour	mount (A) or (D)		Price	Transaction(s) (Instr. 3 and 4)				1150. 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)	4. Transaction 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)			Securi Deriva	7. Title and Amou Securities Underl Derivative Securit (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numb derivativ Securitie Benefici Owned Followin Reporte	ve es ally ng d	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exerci	sable	Expiratior Date	Title	N	mount or umber of hares		Transaction(s) (Instr. 4)				
Units	(1)	08/25/2006		A		106.13 ⁽¹⁾⁽²⁾		(1		(1)	Comm		06.13(1)(2)	(1)	78,561	.2 ⁽³⁾	D		

Explanation of Responses:

- 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 ("BCO") Common Stock and credited to the Reporting Person's account in accordance with the terms of the Program.
- 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 August 25, 2006.
- 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:

Elizabeth C. Restivo /s/ 08/28/2006 Elizabeth C. Restivo, 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.